February 2015

Scintillating Scotoma: Migraine, Aura, and Perception in European Literature, 1860-1900

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A thesis submitted in partial fulfillment of the requirements for the degree in Doctor of Philosophy

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SCINTILLATING SCOTOMA:
MIGRAINE, AURA, AND PERCEPTION IN EUROPEAN LITERATURE, 1860-1900

Monograph

by

Janice Zehentbauer

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A thesis submitted in partial fulfillment
of the requirements for the degree of
Doctor of Philosophy

The School of Graduate and Postdoctoral Studies
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Abstract

This dissertation focuses upon the ways in which nineteenth-century physicians in the emergent field of neurology conceptualized and catalogued the neurological condition, migraine, and the ways in which European literary texts reimagined and interrogated such medical classifications. While migraine had been a recognized medical condition for hundreds of years, the nineteenth century began to make it pathological; migraineurs became a “nervous” modern figure that haunted medical treatises and literary fiction. Anxieties regarding the construction of fragmented vision, bodies, gender, and consciousness render the migraine figure a relevant symbol for the anxieties of the modern era. As explored in nineteenth-century medical treatises by Jean-Martin Charcot, Edward Liveing, and Hubert Airy, a classic sign of migraine is scotoma, the appearance of bright spots or colourful, jagged shapes that blot the visual field, before the onset of hemicranial pain. These physiological blind spots have been interpreted in several ways by psychoanalytical and literary critics: as méconnaissance (Jacques Lacan); as psychological “blind spots” (Emily Apter); and as a punishment for excessive looking (Susan Harrow). In this dissertation, I study a range of British and European novels of the late-nineteenth century that thematize migraine pain, scintillating scotoma and perceptual shifts, such as Lewis Carroll’s Alice’s Adventures in Wonderland (1865) and Through the Looking Glass (1872); novels from Émile Zola’s Rougon-Macquart series, including La Curée (1871), Pot-Bouille (1882), L’Œuvre (1886), La Bête humaine (1890), and Une page d’amour (1878); Benito Pérez Galdós’ Fortunata y Jacinta (1886-7); the British naturalist text, George Gissing’s New Grub Street (1891), and the New Woman novel, Sarah Grand’s The Heavenly Twins (1893). I argue that the medical discourse regarding migrainous bodies contributes to European literature’s negotiations of gender, aesthetics, naturalism, and perception through a paradoxical mode of embodiment. While migraineurs experience a blinding disruption in the visual field, they themselves also reflect on and diagnose the fractures of nineteenth-century modernity.
Keywords

Acknowledgments

First and foremost, I would like to thank my thesis supervisor, Dr. Janelle Blankenship, for her insightful contributions, unwavering patience, and endless support as I developed this project. The dissertation began as a course essay for one of her graduate classes, and I will always be grateful for the encouragement Janelle gave regarding the subject of migraine and literature, and for her immense help in the completion of this thesis. Janelle, I hope you, Tobias and Juri continue to flourish, as you have enabled me to do.

I would also like to thank my second reader, Dr. Christopher Keep, who guided me in fin-de-siècle British novels and research relating to Victorian literature, particularly regarding the New Woman novel. Professor Keep provided thoughtful comments about my writing, and suggested some key theoretical texts to study. I very much appreciate his time and patience for discussions about academia and Victorian scholarship.

Thank you as well to the Graduate Chair of Comparative Literature, Dr. Călin-Andrei Mihăilescu, who also offered excellent suggestions and advice in the development of this project. I am grateful for his comments regarding the thesis at its prospectus phase, as well as his critical acumen regarding Galdós and Maximiliano Rubín.

Many people in the Comparative Literature program contributed to the shaping of this project, from the course-work stage through to its completion. During my course-work, Dr. Laurence de Looze’s and Dr. Steven Lofts’ erudite courses regarding philosophy, French literature, and theories of subject/ selfhood enabled my further study of French narrative and psychoanalytic theory. Dr. Tony Purdy also provided valuable commentary and suggestions for revision during the prospectus phase. Thank you also to Dr. Luca Pocci for his support during my comprehensive exams. I also would like to thank Dr. Angela Borchert, Dr. Melitta Adamson and Dr. Joyce Bruhn de Garavito for their generosity during my various stages of study at Western. As well, I am very grateful to past Graduate Chair, Dr. David Darby, for his kind discussions and generous support throughout my doctoral years.

Many thanks are offered to Sylvia Kontra, Teresa Aconito, and Dawn Gingrich for their help and patience in administrative matters. I am also grateful for the instructors at Western who helped further my languages studies, including Anaider Párez Mata Grajales and Ana García-Allén of Hispanic Studies, and El hadji Camara of the French department. Professors from Brock University’s Studies in Comparative Literature and Arts program,
especially Dr. Cristina Santos and Dr. Corrado Federici, also enabled me to pursue doctoral studies. Thank you also to Dr. Irene Blayer for furthering my study of Iberian literature. I would also like to express thanks to Bev Ulak and colleagues at Western’s Student Centre. Fellow students in the Program for Comparative Literature also helped me much, especially those who blazed a path for me, including Agnes Herra and Nazia Naz, who provided many pointers about thesis-writing, organizing conferences, and Western itself.

I am grateful for the generous support for the funding of this project, from several sources. The Ontario Graduate Scholarship program, the Social Sciences and Humanities Research of Canada foundation, and the Faculty of Arts & Humanities at Western University all enabled me to complete this work.

The unflagging, generous support of my family and friends was essential to this project. Thank you to Karen, Dave, Georgina McCarthy and Aurora Gordon, for reminding me that “time out” is important. Thank you also to Karen and Dwaine Lombarzcki, who selflessly helped me out with my studies. Krista, Doug, Ella, and Johnathan Le Blanc deserve thanks for constantly buoying my spirits, as do Mona, Tony, Alec, and Amelia Wales who provided welcome breaks from study. The support and positive energy from my family in New Zealand, especially from Russell Bain, also kept me on track. I would like especially to thank my parents, Fred and Ann Boyer, whose endless generosity and unconditional support of my studies have sustained me through all of my years of study. Mom and Dad, I am forever grateful.

Most of all, I would not be where I am today without the unwavering support and encouragement of my husband. Ziggy, thank you so much.
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Introduction

In an 1886 letter to Margaret Burne-Jones, \(^1\) Rudyard Kipling facetiously writes about a terrible pain in his head that fetters his concentration and ability to write: “Do you know what hemicrania means? A half head ache so [...]”\(^2\) I’ve been having it for a few days and it is a lovely thing. One half of my head in a mathematical line from the top of my skull to the cleft of my jaw, throbs and hammers and sizzles and bangs and swears while the other half - calm and collected - takes notes of the agonies next door” (132). In this striking account, Kipling isolates a key symptom of migraine: the intense pain on one side of the head. The riot of verbs evoke the sensations and the locus of pain specific to migraine, in cases that have been recorded by physicians since the classical age, starting with the works of Hippocrates, Galen, and Aretæus of Cappadocia in the second century A.D (Eadie 3-4). The word “migraine,” of French origin, has appeared in the English language in assorted guises since the fifteenth century; “megrim” was another popular variation, denoting a severe headache, but also extending to general malaise such as low spirits, whims or fancies (OED).\(^3\)

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\(^1\) The letter was sent 17 June 1886. Margaret was one of the daughters of Edward Burne-Jones, a painter associated with the Pre-Raphaelite movement; she was related through marriage, on her mother’s side, to Kipling.

\(^2\) As his editor Thomas Pinney writes, here Kipling includes a drawing of a head divided by a line. The drawing of the head is small, about the size of a thumbprint; the line shows the pain, but Kipling also adds a little smile to the face, which lends the drawing some irony. Many thanks to Thomas Pinney for sending me a copy the page of this letter.

\(^3\) Eighteenth-century literature includes several examples of the conflation between migraine and states of ennui or fancy. For example, Alexander Pope’s “The Rape of the Lock” (1712, 1714) uses migraine as a facet of mock-epic suffering: “She sighs for ever on her pensive Bed./ Pain at her Side, and Megrim at her head” (Canto IV 23-4). A character in Fanny Burney’s 1778 Evelina also considers migraine an affectation: “‘There are fools enough in your world, without your adding to their number. I’ll have no daughter of mine affect them sort of megrims’” (109). In the mid-nineteenth century, “migraine” as “whim or fancy” appears
Notably, Kipling employs the classical medical term, “hemicrania,” meaning “half a head;” this term, from the late Latin, derives from the Greek word ἡµίκρανία (Eadie 3; OED). “Hemicrania,” along with “cephalea” (headaches of short duration) or “cephalalgia” (chronic or recurrent headaches), often appears in Western medical writings about head maladies.  

Kipling loosely frames his diagnosis using a scientific approach, by employing the medical term itself, and by suggesting that the skull may be “mathematically” divided in the way that the emerging neurologists and vivisectionists of the late-nineteenth century were “skull mapping” the human (and animal) brain. Yet the term “hemicrania,” coupled with Kipling’s vivid description, further elucidates one of the strange paradoxes experienced by many migraineurs: the simultaneous sensation of demobilizing and excruciating pain on one side of one’s brain, accompanied by a very lucid awareness on the other.

By definition, etymology, and experience, then, “hemicrania” entails a split, a duality, of which, as Kipling’s letter reveals, the sufferer is acutely aware. As I will contend throughout this dissertation, the neurological/physical sensation of a split is not only physically felt, but carries with it implications for a new understanding of perception, embodiment, and selfhood. History of Medicine scholar Esther Lardreau has in relation to worry and anxiety, as seen in Wilkie Collins’ *Armadale* (1864–6), in which Allan Armadale says to Ozias Midwinter, “‘How did you manage to clear your head of those confounded meagrims?’” (133).

Chapter One will more closely trace the evolution and use of the terms “hemicrania,” “migraine,” and “megrim,” in the English language, as well as in French and Spanish.

In one of the earliest articles in the medical journal *Brain*, Crochley Clapham outlines a method for skull mapping, taking care to emphasize, “Of course the above plan of delineating the interior of the skull is only applicable post mortem [...]” (100).
performed valuable research regarding the medical transformations of the meaning of the word “migraine” in both the French and English language. According to Lardreau, in French, the terms “hémicrânie” and “migraine” are etymologically similar, but in the history of French medical practice, they were not interchangeable: “Due to [its] phonetic evolution, migraine is, in its form, further away from the etymon, and it also presents a looser connection between signifier and signified than the word” (Bibliothèque Numérique Medic@ n.pag.). This thesis seeks to explore such painful splits, “loose connections,” and moments of lucid awareness or heightened perception manifested in the figure of the migraineur in mid-to-late nineteenth-century British and European literature.

Here it is important to also consider how the field of psychoanalysis (an emergent nineteenth-century science) has theorized the idea of a “split” in its articulations of the subject. In his seminal “The mirror stage as a formative of the function of the I as revealed in psychoanalytic experience,” Jacques Lacan posits that a split of the subject’s consciousness is the basis of the human psyche. According to Lacan, the mirror stage is the moment in which a young child looks at him/herself in a mirror (or sees another being similar to itself) and realizes for the first time that he/she is not a unified being but rather a fractured one. This perception of a fractured self results in a persistent desire to reconcile both perceived images, entailing a “deflection of the specular I into the social I” (Lacan 5). Lacan further argues that the perception of one’s body/self in the mirror, even the apprehension of a dehiscent body, is actually a mis-recognition, or méconnaissance, due to the illusion of its wholeness (6). The concept of an “I” thus becomes alienated from the other “I,” and attempts to resolve its fractured identity through an identification
with another being or object. However, for Lacan, reconciliation can never be attained: “Through the effects of speech, the subject always realizes himself more in the Other [...] He will simply find his desire ever more divided, pulverized, in the circumscribable metonymy of speech” (Lacan *The Four Fundamentals of Psychoanalysis* 188). As evidenced in Kipling’s letter, the figure of the migraineur is caught in a similar dilemma—attempting to reconcile both his sensation of pain and the heightened awareness of the pain’s very pulverization.

Another physiological aspect of migraine that enters the corpus of psychoanalytic thinking, and which will be used as a conceptual framework in this thesis in relation to questions of perception, realism, and literature, is the phenomena of “scotoma.” In etymological terms, “scotoma” derives from ancient Greek σκοτοῦν “to darken, make dim-sighted” and Hellenistic Greek σκότωμα “dizziness” (OED online). Beginning in the 1820s, ophthalmologists used the term to signify spots or shadows that reduce or obstruct the visual field. The spots appear in and obscure the field, in the form of moving shadowy or illuminated circles, or geometric shapes. While some people may experience scotoma for other reasons (for example, as the result of a head injury), it is one of the key signs for a migraine diagnosis. Lacan incorporates “scotoma” into his ideas about the subject’s perception of self and the development of consciousness. According to Martin Jay, Lacan draws upon his French analytical predecessors, including Charcot who applied the term in the 1880s to hysterical vision, and René Laforgue and Edouard Pichon who used it in the 1920s to indicate a form of psychotic unawareness (353-4). Lacan prefers the term “scotoma” for its ambiguity in relation to the scopic drive: “Psychoanalysis regards the consciousness as irremediably limited, and institutes it as a principle, not only of
idealization, but of méconnaissance, as—using a term that takes on new value by being referred to a visible domain—scotoma” (“Anamorphosis” 82-3). In establishing his theory of optic mastery, Lacan privileges the gaze: “As the locus of the relation between me, the annihilating subject, and that which surrounds me, the gaze seems to possess such a privilege that it goes so far as to have me scotomized, I who look, the eye of him who sees me as object.” (84) He emphasizes, however, that the gaze is not real but imagined: “The gaze I encounter [...] is not a seen gaze, but a gaze imagined by me in the field of the Other” (84). In this dissertation, the phenomenon of scotoma mapped out in literary case studies of the migraine figure will be explored from both a physiological and a psychoanalytical standpoint; how might migraine, a disruption in physiology and perception, and the blurred spots of scotoma, lead not only to an obstruction of the visual field, but also to a new awareness of time and space, also contributing to a heightened need to narrate, describe and apprehend the “thickness” of the body and materiality?

Another paradox experienced by migraineurs involves the condition’s seeming invisibility. While the migraine experience is very corporeal, the body itself does not always bear physical marks, or signs, of the suffering. Of course, physicians have recorded symptoms and sufferers have testified to their pain for centuries; but it is a very embodied condition, and a diagnosis must be uttered in order for doctors or others to

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6 Later theorists object to the duality of Lacan’s splitting mirror; for example, in A Thousand Plateaus, Deleuze and Guattari maintain, “In the literature of the face, Sartre’s text on the look and Lacan’s on the mirror make the error of appealing to a form of subjectivity or humanity reflected in a phenomenological field or split in a structural field. The gaze is but secondary in relation to the gazeless eyes, to the black hole of faciality” (171; their emphasis). In a way, the scotomized subject is both within and of this void. Deleuze and Guattari argue not for a division but a deterritorialization of the body: “What we need to consider is not fundamentally organs without bodies, or the fragmented body; it is the body without organs, animated by various intensive movements [...] The question of the body is not one of part-objects but of differential speeds” (171-2).
recognize it. Casual observers might believe that a migraineur is a malingerer, valetudinarian, intellectually absent, intoxicated, or just lazy (or a conflation of these). While physical manifestations of suffering occur (migraineurs might hold their head or eyes, or retreat to a darkened room), the violence in the brain—the hammering, sizzli ng, and banging—is not immediately apparent or visible. Feminist scholars, among others, have consistently reminded us that bodies matter, bodies are volatile, bodies are unstable. How might migraine—a condition that grounds the sufferer in the materiality of his/her body, while forcing him/her into the awareness/ perception of a divided entity both physical/ physiological and psychological—usher in a new understanding of the fragmented self and (gendered) body in late-nineteenth century literature?

Sander L. Gilman argues that illness may be read and interpreted as textual and visual signs may be read and interpreted; he asserts that “[l]ike any complex text, the signs of illness are read within conventions of an interpretative community” (7). This dissertation takes its cue from Gilman’s research regarding constructions of illness in Western culture, to examine the ways in which the neurological condition, migraine, is treated in British and European fiction between 1860 and 1900, and the ways in which emerging medical discourses of the era (particularly neurology and psychoanalysis) informed aesthetic conceptions of the migrainous body. Some key questions under consideration include the following: Why do sustained representations of migraine suffering suddenly appear in British and European fiction of the mid-to-late nineteenth century, and do they signal a breakdown in naturalist or realist narrative? Which qualities

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7 This does not imply that only people with specific credentials can “read” migraine.
of the migraine are represented in literature and how do these symptoms map onto larger questions of gender, perception and modernity? How and why (or when) do representations of migraine overlap with fin-de-siècle and modernist portrayal of nervous conditions, including hysteria and madness? How might a migraineur’s experience, body, and perception contribute to new nineteenth-century narratives and new ways of reading/interpreting, working within but also moving beyond realist representation to the symbolic level and to the self-reflexive construction of narrative itself? When does the migraineur’s experience of a split offer alternate modes of perception and thus, a new construction of, “reality,” and when does the split experience usher in méconnaissance, failures of perception and misrecognition of the “real”?

This thesis hopes to contribute to the interdisciplinary fields of the history of medicine and comparative literature, by arguing that the discourse and representation of migrainous bodies is an important contribution to nineteenth-century European literature’s negotiations of “realism.” Even as the migraineur embodies the notion of a “split,” this body also challenges nineteenth-century Western notions of a division between mind and body, because the migraine event—with its prodrome, aura, pain, nausea, and “resolution phase”—engenders a paradox of perception: it forces sufferers to be in a state of both hyper-awareness and abject physical incapacity. Neurologist Oliver Sacks describes the psychological unease that accompanies the migraineur’s heightened awareness: “[a] peculiar horror [...] may be associated with negative scotoma, which may be felt, not just as a failure of sight, but as a failure of reality itself” (94). The migraine
experience constitutes a modernist mind-body borderland\(^8\) wherein a disruption of the sensorium—particularly the visual field—fosters another mode of perception as the boundaries between mind and body, between gaze and object, begin to blur and to dissolve.

Both neurologists and literary critics have speculated about the ways in which the figure of the migraineur and the migraine experience might suggest alternate modes of perception and being. In his *Manual of Diseases of the Nervous System* (1886-88), British neurologist William Richard Gowers (1845-1915) takes note of a dual physical and psychological phenomenon of the migraine experience: “Among other peculiar conditions that have been described is a sensation of ‘double consciousness’ or a vivid recollection of events long past” (782). Other nineteenth-century neurologists, including Edward Liveing (1832-1919) and John Hughlings-Jackson (1835-1911), also describe a type of doubled-consciousness that they encountered in their work with migraine and epilepsy, respectively. In *On Megrim*, Liveing records the experience of an elderly man with a “[…] singular form of ideation; circumstances and events which had occurred long before were brought back to him as if actually present; his consciousness appeared to be doubled, and the past and present confounded” (109). Similarly, Hughlings-Jackson differentiates vertigo and aura from what he terms a “dreamy state” (a term he prefers to “intellectual aura”) that sometimes occurs in patients before an epileptic attack. In the paper “On a Particular Variety of Epilepsy (‘Intellectual Aura’), One Case with Symptoms of Organic Brain Disease,” he stresses that “[…] loss of consciousness is not

\(^8\) I am indebted to Jean E. Jackson for this striking phrase. In his 1907 text, W. R. Gowers also considers epilepsy as a “borderland” neurological condition.
essential for the diagnosis of epilepsy; there may be a defect of consciousness only; and […] there may be ‘over-consciousness’ (dreamy state’) co-existing with the defect-consciousness; with [this] there may be a rise of consciousness as to some other and often quasi-former surroundings […]” (183). Both Liveing and Hughlings-Jackson turn to literature as the exemplar for the medical conditions they describe, referring to the same passage from Charles Dickens’ *David Copperfield* (1850). 9 In the twentieth-century, Oliver Sacks confirms that the visual disturbances attendant to migraine contribute to our overall transformation of perception and constructions of reality: “[t]he phenomena of ‘mosaic’ and ‘cinematic’ vision […] show us how the brain-mind constructs ‘space’ and ‘time’ by demonstrating to us what happens when space and time are broken, or *unmade*” (Sacks 75; his emphasis). Sacks also refers to a “double-consciousness” regarding migraine, citing Hughlings-Jackson’s work on epilepsy (78). In this analysis of double-consciousness, Sacks cites examples of experiences of *déjà-vu* and the uncanny, and also turns to literature to convey these sensations, drawing upon Dickens’ quotation and Alfred Tennyson’s poem “The Two Voices,” as an example of double-consciousness. Of course, the stream-of-consciousness technique (which may be associated with double-consciousness) was explored by authors like Virginia Woolf, James Joyce, or Marcel Proust (incidentally, the first two suffered migraines; see Silberstein et. al. 30, and Daniel 132). The neurologists’ examples reveal that nineteenth-century authors were already exploring the breakdown or split between mind and body, in a “proto-modern” way. For

9 Dickens’ narrator deviates from the action to ponder the fluctuation of impressions and sensory apprehension: “We have all some experience of a feeling, that comes over us occasionally, of what we are saying and doing having been said or done before, in a remote time—of our having been surrounded, dim ages ago, by the same faces, objects, and circumstances—of our knowing perfectly well what will be said next, as if we suddenly remembered it!” (566).
literary critic Kevin Larsen, “[...the representation of] migraine in the novel is not just a picture of pain, but articulates, aesthetically and biologically, a trance-like state of altered awareness in the characters and perhaps in the reader” (419). Migraine forces sufferers to exist in an in-between state, of both hyper-sensory perception and abject physical incapacity.

As previously mentioned, Esther Lardreau’s excavation of medical terminology and provocative study of English and French medical treatises on the condition we have come to know as “migraine” have been invaluable to the development of this thesis. In her research regarding migraine, Lardreau emphasizes how important it is to consider the historical context and cultural construction of illnesses:

Diseases are to be viewed in their cultural environments. Particular time periods or regions tend to elect one disease as representative of their history. Each period, each country, has its “own” diseases. In the 18th century, the French often referred to the pox as “the Neapolitan disease,” which the English called “the French sickness.” England suffered from the spleen. Nineteenth-century France had “migraine”: “one may say that France is the homeland of migraine.” For nineteenth-century France, after the Revolution and the Terror, migraine was a real problem, and was a grimacing image of the various fractures in the country, be they social or sexual. It was the disease of intellectuals, the disease of ill-married women, the disease of the bourgeoisie. (“La migraine”: Bibliothèque numérique Medic@ n.pag.)

From a cultural studies perspective, the fractured migrainous figure is linked to anxieties regarding nineteenth-century modernity. Of course one of the significant anxieties
throughout the nineteenth-century and into the twentieth is the concern of nationality (as the quotation above reveals, with its categorization of “national” diseases), and a nation’s identity, which is yet another facet of determining individuality/ selfhoods. As explosive revolutions in politics, gender, and technology override geographical and linguistic borders, so too does the migrainous paroxysmal figure—symbolic of an individualized containment of agony—burst into the collective, cultural imaginary of Britain and Europe.

Even as the nineteenth century consolidated its faith in materialism and positivist science, dichotomies between the mind and body were being challenged, particularly in the realm of the visual. In addition to the history of medicine scholarship and nineteenth-century psychoanalytical thought, several primary and secondary works and treatises on medicine, perception, gender and the body inform and underpin the arguments in this thesis. Jonathan Crary’s works on the constitution of vision and its historicity in relation to the roles of the observer, technology, science, and philosophy, have also informed my own historical understanding of the migraineur. In “Modernizing Vision” (1988) and Techniques of the Observer: On Vision and Modernity in the Nineteenth Century (1990), the art historian and cultural critic postulates that a reorganization of observing figures occurred well before the advent of new technology such as photography and film, the moment at which a “break” in vision is traditionally assigned; rather, he argues that the observing paradigm was reconstituted earlier in the nineteenth century, as artists, physicians, and scientists discarded the “camera obscura” model of viewing the world. For him, the camera obscura, which contributed to the traditional early modern epistemology that perception and body were separate, is “a metaphysic of interiority. It is
a figure for the observer who is also a privatized, isolated subject” (“Modernizing Vision” 33). Crary marks the early nineteenth-century studies of retinal after-images, in addition to the mapping of the brain and nerve functions, as facets in the shift in thought regarding the importance of the body with vision, asserting, “The body which had been a neutral or invisible term in vision was now the thickness from which knowledge of vision was derived” (“Modernizing Vision” 43). However, migraine has always forced the migraineur to recognize such “thickness,” with its disruptions of the visual field and other heightened sensations. Important for this thesis as well, Crary questions the scholarly understanding of the entry of modernist aesthetics in the nineteenth-century:

In a sense, however, the myth of the modernist rupture depends upon the binary model of realism versus experimentalism. [...] It is not enough to attempt to describe a dialectical relation between the innovations of avant-garde artists and writers in the late nineteenth century and the concurrent “realism” and positivism of scientific and popular culture. Rather, it is crucial to see both of these phenomena as overlapping components of a single social surface on which the modernization of vision had begun decades earlier. (4-5).

The works of later-nineteenth century artists, including Lewis Carroll, Émile Zola, Benito Pérez Galdós, George Gissing and Sarah Grand, all point to a more fragmented experience of reality in their narratives, through the perceptions of figures with migraine, and other neurological conditions. These artists may refer to scientific studies (and profess to be a “doctor” as author, as does Zola), nonetheless they do not accept a straightforward concept of mimesis in their work.
Similarly, Martin Jay’s historical analysis of vision, in *Downcast Eyes: The Denigration of Vision in Twentieth-Century Thought* (1994), helped shape this thesis’ ideas regarding perception. His text examines writings from Plato to Lyotard, revealing that Western culture might not be as “ocularcentric” (3—his term) as traditionally assumed, with primacy traditionally allotted to sight as the central sense upon which reason and logic might determine the “truth” of existence. Rather, Jay argues, French thought (particularly modern French thought) has sought to undermine the dominance of vision as the most significant sense through which to know the world, and vision’s role in maintaining hegemonic discourses. Although vision is the dominant sensory trope for the migraineur, my thesis does not seek to reinscribe the hegemonic position of vision in perceiving the world, but aims to reveal that disruptions and heightening of other senses like hearing and touch (or lack thereof, when body becomes numb) are of great importance to nineteenth-century literature’s understanding of the migraineur’s experience of the world.

Elizabeth Grosz’s *Volatile Bodies: Toward a Corporeal Feminism* (1994) interrogates the privileging of a psychical interiority by emphasizing its dependence upon the body (xii). For Grosz the history of Western thought itself has scotomized corporality, claiming, “The body has remained a conceptual blind spot in both mainstream Western philosophical thought and contemporary feminist theory” (3). Grosz’s emphasis upon the specificity of bodies in socio-historical contexts, and resistance to dualistic thought like mind/body splits has also inspired me to re-read the role of gender, heightened awareness and performances of migraine suffering in Zola and Galdós’ fiction, as well as the “New Woman” fiction examined in the final chapter of this thesis.
Nineteenth-century fiction is replete with figures suffering from the ubiquitous and loosely-defined “nerves,” usually attributed to the shocks of nascent modernity, as exemplified by the railway (which itself engendered new neurological ailments such as “railway spine”), increased urbanization and populations, and developments in industry and technology. Much valuable scholarship has focused upon hysteria as the central nervous condition/syndrome of the era, including Georges Didi-Huberman’s *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (1982; 2003), Elaine Showalter’s *The Female Malady: Women, Madness, and English Culture, 1830-1980* (1985) and Janet Beizer’s *Ventriloquized Bodies: Narratives of Hysteria in Nineteenth-Century France* (1994). These studies all conceptualize the malady of hysteria in fiction, photography, and medical discourse, and particularly emphasize how the discourse of the illness itself was reinscribed upon and acted out by its sufferers. Jean-Martin Charcot himself (who suffered migraines) considered migraine a possible harbinger of hysteria; references to such studies of migraine’s “allied disorder” of hysteria help situate the migraine figure in a larger medical and socio-historical context in this thesis.

Recent cultural studies and literary scholarship have moved away from the studies of hysteria and started to unearth additional neurological conditions/syndromes that haunt nineteenth-century literature. For example, Anne Stiles’ work in neurology and literature examines the discourses of cerebral locationists, anatomists, and vivisectionists in relation to nineteenth-century popular culture. In *Popular Fiction and Brain Science in the Late Nineteenth Century* (2012), Stiles demonstrates that popular fiction, ranging from the gothic to romance genres, exposes a deep suspicion of the then-emergent field
of neurology. At this time, as Stiles demonstrates, the experiments of many physicians, including David Ferrier, John Hughlings-Jackson, and Paul Broca, were revealing that aspects considered fundamental to humanity—such as speech—were situated in specific, identifiable sites in the brain and nervous system. Along with the scientists’ controversial methods—like vivisection, for example—the writers and general public were anxious about the ramifications of further mapping of the brain; Stiles argues, “One might easily add neurology [...] to the list of fin-de-siècle scientific discourses that undermined a sense of a stable human identity” (10). The fractured figure of the migraineur in European literature also dialogues with this splitting and remapping, both of the body and the act of narration itself.

Following Stiles’ approach, this dissertation seeks to further interrogate the rich intersection between literature and neurology. As Kipling’s quotation above illustrates, various authors have penned the experience and pain of migraine. Medical treatises also frequently quote literary passages to describe the poesis of the migraine experience and its fits of scintillating scotoma (for example, while Liveing and Hughlings-Jackson use fictional prose to delineate “double-consciousness,” Hubert Airy invokes a passage from Alfred Tennyson’s “Œnone,” to exemplify the movement and occlusion of scotoma). I believe it is important that a previously neglected area in the subfield of literature and neurology, the role of migraine figures in mid-to-late nineteenth century English and European fiction, receives more scholarly attention. To date, there are no book-length studies of the migraine experience in literature. However, I would like to acknowledge the work of Joost Haan who recently published an article “Migraine and Metaphor” in *Literary Medicine: Brain Disease and Doctors in Novels, Theater, and Film* (2013) and
the important studies of literary critics such as Elizabeth McKim who have published on headache pain and poetry.\textsuperscript{10}

The first chapter of my thesis, “‘Centres of Vision and Serrated Margins:’ Reading Migraine,” offers an overview of current medical definitions and classifications of migraine, and also offers a brief discussion of how the signs and symptoms of the condition physicians would come to identify as “migraine” were identified in medical treatises. For contemporary classifications and symptoms, the chapter draws upon well-known studies of migraine such as Oliver Sack’s \textit{Migraine} (1970; 1991), as well as various articles and books chapters by neurologists, such as those found in editors’ David Borsook, May Arne, Peter J. Goadsby et. al.’s \textit{The Migraine Brain: Imaging Structure and Function} (2012). The second part of the chapter is an historical overview of medical treatises concerned with “migraine” or “sick-headache” and its attendant symptoms. Lardreau emphasizes that “[i]t would be wrong and anachronistic to believe that migraine has always existed.’ [...] Nevertheless, the sensations of migraine and the facts of the disease are probably perennial” (2008 n. pag.). The chapter examines treatises, or sections of medical documents, devoted to headache, from Aretæus of Cappadocia in the

\textsuperscript{10} The physician Joost Haan discusses migraine and fiction in his book article, “Migraine and Metaphor.” The examples focus on twentieth and twenty-first century novels; some examples include Thomas Mann’s \textit{Dr. Faustus} (1947), Irvin Yalom’s \textit{When Nietzsche Wept} (1992), Ian MacEwan’s \textit{Atonement} (2001) and Siri Hustvedt’s \textit{The Blindfold} (2003). Haan’s helpful catalogue of these novels examines briefly the metaphors of pain and aura employed by the authors, as the experiences they narrate register migraine phenomena ranging from scotoma to body-image distortions. He offers only one nineteenth-century reference, and that is to the \textit{Alice} books and diagnoses of migraine in children. Haan invokes Barthes’ mantra that “the author is dead,” and therefore, for Haan, it is futile to relate Dodgson’s migraines to his work, or to offer a retrospective diagnosis for Dodgson. The text \textit{Literary Medicine: Brain Disease and Doctors in Novels, Theatre, and Film} contains articles of interest for “allied” conditions of migraine, including “Hysteria in \textit{Fin-de-Siècle} French Novels” by Olivier Walusinski and “Epilepsy in Dostoevsky’s Novels” by Piet H. A. Voskuil. While the articles are not full literary analyses, the authors’ medical knowledge highlights the complexities of neurology and its representation in fiction. See also the volume \textit{Literature, Neurology and Neuroscience: Neurological and Psychiatric Disorders} edited Anne Stiles, Francois Boller and Stanley Finger (Amsterdam: Elsevier Press, 2013).
second century to nineteenth-century advances regarding migraines. Treatises of the nineteenth-century by British and French physicians, for example the works of Edward Liveing, George and Hubert Airy, Jean- Martin Charcot, and Jules Pierre de Kinkelien-Pelletan, inform not only the century’s medical thinking, but also seep into the European and English literary cultural imaginary.

The second chapter considers life-writing and creative fiction of mid-nineteenth century Britain, with a “case study” of migraineur, mathematician, photographer and creative writer Charles Lutwidge Dodgson. Entitled “Lewis Carroll’s ‘Odd Optical Affections’: Phantasmagoria, Scotoma, Word/Image,” the chapter contends that Dodgson’s experiences of scotoma can be translated into his creative fiction and photography. I first trace Dodgson’s understanding and diagnosis of migraine symptoms in his diary and letters. Dodgson here assumes the guise of a physician, who takes notes on transformations and shifts in bodily perception and larger shifts in technological development that informed Victorian Britain. Unlike other scholars, I do not argue that the author was capturing a migraine experience literally; rather I contend that his fiction and photography might be read through the phantasmagoric, time/ space shifting lens of migraine experience. The chapter considers well-known works of creative fiction such as Alice in Wonderland, Beyond the Looking Glass, lesser-known texts such as “Hiawatha's Photographing,” and Roger Lancelyn Green’s two volumes of Dodgson’s diaries, documenting his preoccupation with “odd optical effects.”

Chapter Three, “‘L’Œil Gauche Barré’: Migraine, Visual Fields, and Émile Zola’s Naturalism,” turns to the morass of literary naturalism to explore several novels from Zola’s Rougon-Macquart cycle in which migraines and their “allied disorders”
appear. Zola considered his century a particularly “ill” one. In theory and practice, Zola famously eschewed what he considered to be a Romantic strain in French writing, and proposed that borrowing from scientific approaches of the day would inject new life into literature. In “Le Roman Experimental,” Zola associates the novelist with the doctor, granting the novelist a similar perceived omniscience; he also appropriates the scientific method for aesthetic purposes, in which a seemingly objective observer offers detailed notes of material objects and living beings in specific environments, noting the conditions in which they act. After situating Zola and the debates regarding Naturalism, I turn to five novels from his substantial Rougon-Macquart cycle: *La Curée* (1871), *Pot-Bouille* (1882), *L’Œuvre* (1886), *La Bête humaine* (1890), and *Une page d’amour* (1878). The first-mentioned novels feature sustained portraits of migrainous figures in the form of Renée Saccard (La Curée) and Auguste Vabre (L’Œuvre). The obscured vision of both scotomized characters—Renée’s myopia and Auguste’s half-closed eye during migraines—point to larger questions of gender, access and power and the struggle between the eye/(or eye/I/individual and the social gaze. This chapter highlights the construction of gender through the migrainous body. Renée, as a figure of excess and sensual overload in *La Curée*, represents not only a migraineuse, but also society’s concern with containing female sexuality. Renée appears as a prime example of the “split consciousness” or double awareness that often accompanies the literary exploration of migraine. While she is punished for her excessive looking and performance of sexuality, her migrainous “breakdowns” and acts of gender transgression also speak to her awareness of the oppressive atmosphere of her milieu. Auguste’s migraines in *Pot-Bouille* also signal gender transgression. Migraine has often been seen as a condition
associated with women (while medical research does indicate that more women than men suffer migraine, the migraine specialists of the day recognized that both sexes suffered migraines). Auguste is rendered an ineffectual “male” figure throughout—physically, financially, and sexually—and his migraines are emblematic, for Zola, of degeneration and physical failure. Zola’s critique of male (impotence) continues in the narratives and the fractured visions of Claude Lantier, the failed artist of L’Œuvre, and his brother Jacques Lantier of La Bête humaine. Both novels also chart the dizzying effects of modernity: in the former novel, fainting, breaking, and exhausted bodies inhabit the public, physical spaces of Salons and art studios; while in the latter, bodies are violently ripped apart by new technologies (specifically, the train) while perception is blotted out by speed. Zola’s narratives are naturalist in their relentless catalogue of things, but the repetition of images and the insistence upon forcing the reader to experience the saturation of verbs and descriptive passages for him/herself reveals that his aesthetic approach blurs the line between “naturalism” and “modernism.” Finally, the chapter also considers an “allied disorder” of migraine, hysteria, in the figure of young Jeanne of Zola’s 1878 novel Une page d’amour. Taken together, these novels reveal that migraine manifests repeatedly throughout Zola’s corpus, often as signs for a breakdown in political and social action.

The fourth chapter of this thesis, “Maximiliano Rubín’s Dead Head: Galdós’ Fortunata y Jacinta” (1886-7), treats the role of Maximiliano Rubín and his migraines in relation to discourses regarding medicine and neurosis, narration and perception. As seen in Zola’s work, this character’s debilitating migraines represent wider concerns regarding subjectivity and subjects in late nineteenth-century Spain: fluctuating gender roles, the
crisis of religion and faith, the growth of urban centres and the collapse of class structures. These are many anxieties for Maxi’s body to bear, and indeed the narrative finds him crushed by the weight. Several scholars have analyzed Maxi and his migraines, often diagnosing his condition in conjunction with other physical or psychological conditions (like congenital syphilis); indeed, the novel invites such collisions in reading, with many overlapping symptoms evidenced by Maxi. That Maxi suffers migraines is not debatable—as literary critic Kevin Larsen points out, Galdós insists in Spanish upon the term “jaqueca,” which translates into “migraine.” However the figure of the migraineur is complicated (and exhausted) by the presence of physical disease and metaphysical worry, both of which may be induced by Maxi’s experiments with pharmaceuticals (he works as a pharmacist). As I analyze in this chapter, Galdós admired Zola’s naturalist literary approach, but the fractured, migrainous figure of Maxi also reveals the Spanish author’s resistance to naturalism, in reconciling a clinical reading with dreamy hallucination and imagination.

The fifth chapter, “Modernity, Gender and Perception: The Case of the New Woman” explores the appearance of another nineteenth-century “fragmented” (and certainly contested) figure, the “New Woman,” and her collision with the already well-established (fictional and medical) figure of the “hysterical” or “nervous” female. Illness (in the forms of nerves, exhaustion, syphilis, and hysteria) pervades the fiction of nineteenth-century Britain, as evidenced by the novels included in this chapter: George Gissing’s New Grub Street (1891) and Sarah Grand’s The Heavenly Twins (1893). While these novels do not present sustained portraits of a migraineur/migraineuse per se, they do reveal the ways in which the conditions of modernity can be read in conjunction with /
through a migraine experience. The chapter traces the contamination or containment of Naturalism in aesthetic thinking in Britain, and situates the New Woman within the social and political concerns of the era. I also examine who has access to knowledge and vision, and who does not, and examines how reading migraine contributes to critical interpretation—of constructions of vision, and constructions of gender. The New Women in these novels—Marion Yule and Evadne Colquhoun, later Gailbraith—may suffer from patriarchal society, obscured vision and neurological trouble, but like Maximiliano Rubín, Renée Saccard, and other literary migraineurs, retain a state of awareness in their containment; an awareness similar to the double awareness evinced in Kipling’s letter.
Chapter 1

“Centres of Vision and Serrated Margins:” Reading Migraine

“These are the very megrims of existence;/ The dizzy rounds of thought, that foundering drown/
In their own whirlpools”
H. Brooke, The Imposter, 5.4.211-3, 1778

“La migraine qui broie la tête, rend fou, égare les idées et disperse la mémoire ainsi qu'une poussière au
vent, la migraine m’avait saisi.” Guy de Maupassant, Contes fantastiques (1887)

“I took some cocaine, watched the migraine vanish at once, went on writing my paper [...] but I was so
wound up that I had to go on working and writing and couldn’t get to sleep before 4 in the morning.”
S. Freud, letter, 1885

A migraine is a neurovascular syndrome that the World Health Organization ranks number 19 as one of the world-wide conditions that render disability (International Classification 24). A migraine is a process that unfolds over several hours to several days, and each event may have different symptoms; that is, symptoms vary not only from person to person, but also manifest differently within the individual. Indeed, neurologist Oliver Sacks contends that migraines, together with their symptoms, triggers, and manifestations, are as variable as individuals themselves (31; 53). Such variability may account for the profusion of names the condition has received over the centuries in Western medicine: hemicrania, hemiopsia, ophthalmic migraine, sick headache, bilious

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11 The International Classification of Headache Disorders specifically uses the term “disease,” but such a designation for migraine can be problematic. History of Medicine scholar Jacalyn Duffin notes that “We tend to think of disease and illness as identical and use the words interchangeably. However [...] following philosophers, the word ‘illness’ designates individual suffering; the word ‘disease’ pertains to ideas about the illness” (67). “Disease” carries connotations of infection, treatment, and (possibly, depending upon the disease) cure. What Duffin identifies as the philosophical understanding of “illness” seems better suited to my examination of migraine case studies in literature, because the migraine experience in these texts often forces the sufferer into a state of heightened awareness of one’s own body.
headache, blind headache. Despite its unstable nomenclature and varying symptoms, three aspects consistently emerge in Western medical writings since at least the second-century A.D. as key symptoms for a migraine diagnosis. One, the pain affects one half of a person’s head (although unilateral pain on its own does not always signal migraine); two, the pain’s onset is sometimes heralded by an aura (to be discussed in more detail below); and three, nausea and vomiting regularly accompany the pain. Thus, a migraine cannot be equated with a “headache” because so many other neurophysiological constellations are involved.

In the twenty-first century, the official nomenclature and symptoms for diagnosis have changed yet again, though the three key symptoms outlined above remain the same. In 2004, the International Classification of Headache Disorders divided migraine into two major subtypes: migraine without aura and migraine with aura (24). The former, classified throughout the twentieth century as “common migraine” simply because it manifests more often in a larger proportion of the world population, is considered the most physically disabling of the two types (25). Pain is unilateral, often throbbing or pulsating; nausea and vomiting may occur; some patients cannot tolerate light, sound, or

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12 Edward Liveing was one of the first doctors to recognize that various conditions—such as bilious headache, sick headache, meagrim—were actually the same. Other European languages also have a history of unstable terms; for example, Esther Lardreau points out that in the history of French medical thought, the terms “migraine” and “hémicrânie” were not interchangeable. “Hémicrânie” strictly signaled unilateral headache pain, while “migraine,” which appeared in the French lexicon from the twelfth century, implied “ennui.” Indeed, according to Lardreau, until the nineteenth century “migraine” was also employed as a verb in French: “migrainer,” “to cause migraine, to aggravate, to bore” (“La migraine: Introduction.” n. pag.). The Spanish language includes migraine in its vocabulary, “migraña,” but the Spanish also has a word from Arabic to indicate a pain in half the head: “jaqueca” (from the [Andalusian] Arabic šaqīqah).

13 The International Classification also catalogues other types of migraine, and more criteria that distinguish it from headache (for example, cluster headache). For the purposes of this dissertation, I examine here only the two major sub-types of migraine in this most recent classification, although others (such as migraine with aura, but without headache) will arise in the analysis of literary migraineurs.
movement, without aggravating the pain and/or the nausea. Attacks without aura, according to this classification, can last from one hour to three days (hence the reason why these are the most disabling).

The second sub-type, migraine with aura, was considered “classic” migraine throughout the twentieth century. In addition to some of the features outlined in migraine without aura (unilateral throbbing pain; photophobia; phonophobia; nausea), these migraines include a period of neuro-physiological disturbance that precedes hemicranial pain and nausea, may include disruption in the visual field, speech disturbances, somasensory manifestations, and/or loss of memory (International Classification 25-7; Lardreau 1378; Daniel 21-36; Drummond 31-6; Sacks 52-81). The aura occurs after the “premonitory” or the “prodrome” phase of the migraine (Maniyar and Goadsby 19; Sacks 27-33; International Classification 26); These two moments—prodrome and aura—are deemed distinct phases in the migraine attack, even though the migraineur him/herself may not experience them as such. A prodrome may include excessive fatigue, an inability to concentrate, photophobia, phonophobia, and neck stiffness (International Classification 26; Borsook et. al. 19). As the pain recedes, there is also a recovery phase in which the migraineur may experience lethargy and grogginess (International Classification 24). The entire progression of the migraine, then, as evidenced by this brief catalogue of symptoms, situates the sufferer in an in-between position both physically and mentally.

The aura is often one of the key warning signs of impending pain, a sign that distinguishes migraine from other headaches and neurological conditions. “Aura” entails several complex neurological symptoms that usually occur during the onset of the migraine; several disturbances, like scotoma, aphasia, and paraesthesiae (the numbness or
tingling of a hand or foot), manifest in unison (Sacks 87-92). The aura also marks the moment in which the migraineur falls into a liminal, indeterminate space. Usually the migraineur is aware of this slippage; according to Sacks, “[t]he abnormal sensations of migraine aura, as oppose to those of dreams, are likely to be experienced in full waking consciousness (although they may also occur in twilight states, or sleep), and most patients learn not to mistake them for reality” (66). Nonetheless, Sacks also cites the neurologist John Hughlings-Jackson on the heightened awareness or “double consciousness” of migraine. As previously discussed in the introduction, the neurologist William Richard Gowers also notes that during an aura phase, a migraineur might experience an impression of doublenness, not necessarily a “split” or division in awareness, but a “double consciousness or a vivid recollection of events long past” (782). Living distinguishes such experiences during a migraine attack as “psychical phenomena,” in which “disturbance[s] of the higher cerebral faculties […] may be regarded for the most part as either intellectual or emotional” (107). He recounts a case in which a man experienced “[…] a singular disorder of ideation; circumstances and events which occurred long before were brought back to him as if actually present; his consciousness appeared to be doubled, and the past and present confounded” (109).

In the article “The Difference between Epileptic Auras and Migrainous Auras,” Lardreau stresses that the clinical association of aura with migraine began in the nineteenth century, when French physicians noticed the constellation of symptoms that heralded a migraine; they borrowed the term “aura” from long-established thought about regarding epilepsy. Lardreau notes that both Greek and Latin words for “aura” translate to “breeze” or “wind” (1379), signaling something felt yet intangible. Thus, aura came to
signify a “‘halo which could only be seen by initiates’ in the field of occult sciences; by extension, it came to mean a ‘mysterious atmosphere,’ a *condition of* [in]visibility which paradoxically becomes visible” (1379; author’s emphasis).\textsuperscript{14} The OED pathological definition of “aura” also dates to the nineteenth century, identifying it as “[a] sensation, as of a current of cold air rising from some part of the body to the head, which occurs as a premonitory symptom in epileptics and hystérics.” Further denotations of “aura” are aligned with electricity, particularly an air current caused by an electric discharge (*OED* online).

Several sensory disturbances usually occur during the aura phase, and these phenomena have also received much medical attention from the late-eighteenth century until the present day. Some of the most fascinating occur in the visual field; as Sacks contends, such disruptions “show us how the brain/ mind constructs ‘space’ and ‘time’ by demonstrating to us what happens when space and time are broken, or *unmade*” (75). While Sacks refers to what are termed “mosaic” and “cinematic” vision here, the disruptions to the visual field experienced by migraineurs provide aesthetic analogues for the construction of image and narration. As its name indicates, “mosaic vision” involves the breakage and assemblage of an image into pieces of varying size; Sacks compares the varying sizes of these fragments to modern art movements, like pointillism or cubism (74), which play with fractured perception. “Cinematic vision” or “stroboscopic vision”

\textsuperscript{14} The *Oxford English Dictionary* supports Lardreau’s outline regarding the changing denotations of “aura” in the nineteenth century: “A supposed subtle emanation from and enveloping living persons and things, viewed by mystics as consisting of the individual, serving as the medium for the operation of mesmeric and similar influences” (*OED* online). Lardreau (2007) further notes that Edward Liveing recognized several early nineteenth-century studies in English that associate epileptic aura and migraine (1382), and that the association was more easily accepted into English medical thought about migraine than in French (1383).
designates a pulsating series of images; Sacks compares this to a steady flickering of still images from a movie (74). Other disruptions in the visual field include “zoom vision,” in which objects appear to open up or collapse, as with a camera’s zoom lens; micropsia, or “Lilliputian vision,” the diminution or recession of objects in the field of vision; and macropsia, or “Brobdignagian vision,” a seeming enlargement in the size of objects (Sacks 73). Several neurologists (starting with Caro W. Lippman in 1952) have also recorded that, in addition to seeing objects change size, migraine sufferers also experience body image distortions, such as a sudden sensation of the body, or a part of the body, being too large or too small, or splitting in half, or one’s head bobbing about like a balloon (348-9, 350). Although Lippman is the first physician credited with associating the migraine’s body-morph hallucinations with Lewis Carroll, psychiatrist J. Todd named these body-morphing sensations the “Alice in Wonderland Syndrome” in 1955 (704).

The visual disturbance particularly intriguing to neurologists, however, is “scotoma,” because it is so highly characteristic of a classic migraine (see Wray, et. al., 25); according to Sacks and other neurologists, scotoma appears in migraine more so than other paroxysmal conditions with aura, like epilepsy, for example (89). In etymological terms, “scotoma” derives from ancient Greek σκοτοιν “to darken, make dim-sighted” and Hellenistic Greek σκότωµα “dizziness” (OED online); neurologists Russell Lane and Paul Davies point out that scotoma was transposed into Latin as “vertigo.” Beginning around 1822, according to Esther Lardreau, ophthalmologists used the term to signify

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15 As the terms suggest, the names for the visual phenomena were borrowed from literature and art.
spots or shadows that reduce or obstruct the visual field. Scotoma may be “scintillating”—that is, it may take the form of twinkling spots, similar to the spots that appear when one stares at the sun, or like the spots in one’s eyes after a camera flash. These spots or shadows can also appear as bright colours or vibrating lights (sometimes these scintillations are termed “phosphenes” [Lane and Davies 95]). The scotoma may also be “negative” as when parts of the visual field are blocked or blinded; or, a person may lose peripheral vision for a time. For other migraineurs, the blind spots can assume the form of various repeated geometric shapes, termed “fortifications” due to the evident similarity of the walls of a fortress; in most descriptions of scotoma, vibrating lights and various colours edge the crenellations while the centre of vision disappears.

In addition to obstructions of the visual field, the aura experience may also include hyper-sensitivity to sounds, lights, and smells; some migraine sufferers may experience moments of aphasia; others experience somesthetic symptoms like numbness or tingling in one’s arm or foot. Neurologists M.B. Vincent and N. Hadjikhant remind us that while visual disturbances are the dominate characteristic of an aura, other sensory circuits are often interrupted as well (1370), and argue that the great reliance upon visual symptoms for diagnosing migraine with aura may cause some to overlook additional, non-visual, aspects of aura, such as aphasia, paraesthesiae, or apraxia (the inability to perform tasks due to weakness, or loss of coordination) and memory loss (1371-75). Lane and Davies further contend that vertiginous auras are very common (113-4), although they admit that the pathogenesis of “migrainous vertigo” is again not absolutely certain; some studies suggest it originates in the brain stem, others in the cerebral cortex (114-5).
The pathogenesis of migraine itself eluded physicians for several centuries. Debate continues into the twenty-first century, particularly in relation to aura and scotoma, whose physiological manifestations and mechanisms remain somewhat elusive. As recently as 2007 Vincent and Hadjikhani concede that the precise mechanism of aura is unknown (1378), while Peter D. Drummond in 2012 admits that the source of migraine pain remains unclear (30). Briefly, the debate regarding migraine pathogenesis is divided between two theories: the vasodilation theory, and the cortical spreading depression theory. The vasodilation theory holds that extracranial arteries expand during an attack, thus accounting for the unilateral, pulsating pain. To support this argument, physicians of the early-twentieth century found that ergotamine helped prevent attacks by constricting the blood vessels in the brain. American neurologist Harold Wolff’s (1898-1962) influential studies throughout the 1940s to the 1960s provided much evidence for vasodilation (Eadie, 2012, 13). In his seminal work *Headache and Other Pain* (1963), he contends that local vasoconstriction of arteries produce aura; as the aura diminishes, “[the] vasodilator headache manifestations begin [...] In most patients the headache arises in one or another of the distended branches of the external carotid arteries, although any or all of the major cranial arteries may be involved [...]” (qtd. in Eadie, 2012, 13). Mid-twentieth-century, Wolff’s work regarding the constriction and dilation of blood vessels in the brain and neck became the standard explanation of cause and basis for treatment.

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16 “Ergot” has its own intriguing history in the annals of migraine. A fungus that grows on rye, ergot contaminated the food supply at several points in European history. According to neurologists P. J. Koehler and H. Isler, two types of infection occurred: a gangrenous one in France’s crops, under the name “Holy Fire” (this type also became known as “St. Anthony’s fire”); the second type appeared in Germany, causing convulsions. Koehler and Isler identify English doctor Edward Woakes (1837-1912) as the first to use ergot in the treatment of migraine (687-9). Lane and Davies also state that in 1938 H. Wolff used ergotamine as a vasoconstrictor to successfully abort migraine pain (25-7).
For Peter J. Goadsby and other contemporary neurologists, the vasodilation theory alone does not adequately account for all of the neurophysiological symptoms that occur during a migraine; vasodilation is indeed a factor, but not a cause. Indeed, some neurological studies have not found relevant evidence to indicate cerebral or meningeal blood vessel dilation at all, as a cause (Schoonman et. al. 2197). Goadsby contends that Living, Hughlings-Jackson, and W.R. Gowers were all correct to suspect that migraine is primarily neural in nature, claiming that clinical neurology today has “[...] put migraine back into the brain” (6). Cortical spreading depression (CSD), observed by Aristides A. P. Leão while studying epilepsy in the 1940s (351), found that an electrical stimulation of the cerebral cortex (performed upon rabbits) produced a gradual wave of lowered electrical activity (Leão 360; Eadie 2012 14; Charles and Baca 637). It is now generally accepted that the cortical spreading depression generates the aura, that that aura originates in the cerebral cortex (Lauritzen 205; Sacks 258; Eadie 2012 14; Lane and Davies 93). However, modern neurologists, like their historical predecessors, continue to find that the origins and mechanisms of a complex event like migraine remain somewhat mysterious.

1.1 Meagrms, Sick-headache and Nerve Storms: A Brief History

Some historical-medical foundations are necessary to situate the ways in which nineteenth-century writers of fiction represented migraines, and the way thinking about migraine infused their aesthetics and narrative constructions. Although case studies and narratives of migraine symptoms appear to remain relatively constant in medical works, the thinking about migraine has changed depending upon the era and context in which the
works were written; and as medical theories change, so do the treatments of migraine whether they be pharmaceutical, surgical, or dietary.\textsuperscript{17}

In the historical medical treatises about head pain, most physicians have recognized and recorded some or all of the tell-tale signs of migraine. As previously mentioned, Western medicine has long recognized migraine as a condition that is more than a common headache, and distinct from (but overlapping with) other head conditions, such as epilepsy, vertigo, and neuralgia. In histories of migraine,\textsuperscript{18} Aretæus of Cappadocia (second century AD) is often mentioned as one of its first and best recorders.

In his writings about chronic disease, Aretæus\textsuperscript{19} devotes a section to “On Cephalæa, An Affection of the Head.” After describing headache in general and distinguishing between “cephalalgia” (a headache that lasts a few days) “cephalæa,” (headaches that last without remission), he identifies third type of headache: “But in certain cases, the parts on the right side, or those on the left solely, so far that a separate temple, or ear, or one eyebrow, or one eye, or the nose which divides the face into two equal parts; and the pain does not

\textsuperscript{17} Some prescribed treatments regarding diet and exercise have remained relatively constant over the last two hundred years. Though the actual food trigger might change—for example, eighteenth-century physician John Fothergill warns against butter but advocates caffeine—doctors have often recommended changes to diet. From Tissot in the eighteenth century, and on, doctors have also advised that lack of exercise may precipitate an attack.

\textsuperscript{18} During my research I encountered several remarkable histories of migraine; for example, Daniel; Eadie (2009; 2012); Lardreau; Pearce; Sacks; Schott; Silberstein et. al..

\textsuperscript{19} Although I cite only one Greek author here, other histories of migraine (see Eadie 2012, Pearce, Daniel, and Silberstein et. al.) also refer to doctors from the Hippocratic school, who record similar phenomena; Galen appears in these histories as well. Translator Francis Adams in his 1856 edition cannot be certain if Aretæus was a contemporary with Galen; however, it seems that Arteæus wrote slightly before Galen. History of Medicine scholar Jacalyn Duffin, for example, dates the former to 100 A.D. (72).
pass this limit, but remains in the half of the head. This is called *Heterocrania* [...])” (1865, 294). As Kipling will do hundreds of years later, Aretæus isolates a key symptom of migraine, with his emphasis upon the head’s splitting pain. Aretæus also reads the face and eyes for symptoms, finding a “spasm and distortion of the countenance [...] the eyes either fixed intently like horns, or they are rolled inwardly [...] deep-seated pain of the eyes as far as the meninges [...]”(Adams trans. 294-5); for him, nausea and vomiting comprise “bilious matters.” The emphasis upon eyes indicates the early importance of vision as the abiding trope for migraine (the striking simile about the eyes as horns). Aretæus further notes that sufferers cannot bear light, and are averse to certain sounds and smells. In addition to these symptoms, he attests to the emotional condition of the sufferer: “there is much torpor, heaviness of the head, anxiety, and ennui” (Adams trans. 295; translator’s emphasis). Although Aretæus does not associate scotoma with heterocrania, he does link it with vertigo. In both the Moffat and the Adams translations from the Greek, he aligns vertigo and scotoma, and their symptoms are startlingly similar to those later associated with migraine aura; the patient experiences a “[...] heaviness of the head, sparkles of light in the eyes along with much darkness, ignorances of themselves and of those around [...] and nausea and vomiting of phlegm, or of yellow or black bilious matter” (Adams trans. 296). Later writers on neurology, such as G. D. Schott, H. Isler, and M.J. Eadie, will claim that medical study of visual aura, particularly scotoma, did not occur until the mid-nineteenth century (at least in English-speaking parts of the world); however, Aretæus here clearly points to scotoma with the inclusion of

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20 I have combined and used two translated editions of Aretæus’ extant works. Adams, in the Editor’s Preface to his 1856 edition, offers a good history of the various printings of Aretæus’ works throughout Europe, in both Greek and Latin.
“sparkles of light” and “darkness” in the eyes, even though these symptoms are not situated with the descriptions of heterocrania and cephalalgia (at least, according to the editorial divisions of his work).

Various histories of medicine remind us that dependence upon Greek theories of medicine, specifically Galen’s theory of the humors, persisted well into the early modern period;\textsuperscript{21} hence thought about migraine and its treatment remained relatively unaltered. Sacks (4) credits Thomas Willis (1621-1675)\textsuperscript{22} with writing one of the first modern treatises on the nervous system in \textit{Cerebri Anatome}, and Willis is generally considered to be the founder of neurology—the “doctrine of the nerves”—in English medicine (Feindel 6, 47; Lane and Davies, v).\textsuperscript{23} Working as an anatomist and physician in Oxford and London in the seventeenth century, Willis outlined the nervous system and vascular aspects of the brain. In addition to anatomy, he experimented in cerebral localization (Ackerknecht 124), and wrote about diabetes, scurvy, the plague, muscular motion, and “convulsive diseases” such as epilepsy. He is also credited with anatomical discoveries in

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\textsuperscript{21}See Jacalyn Duffin and Erwin Ackerknecht regarding the influence of Galen in Western medical practice from the middle ages until the early modern period. In the late 1880s, W.R. Gowers stipulates, regarding the different terms for migraine, that “names like ‘sick’ and ‘bilious’ headache derived partly from the fact that bile is often vomited, and partly from the old humoral pathology which regarded the bile as one of the chief morbific fluids of the body” (776).
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\textsuperscript{22}Thomas Willis numbered among the most influential scientific men of his day. His colleague, Christopher Wren—when he was not designing and building edifices for Oxford and London—drew some of the plates of brain sections and nerves that illustrate the \textit{Cerebri Anatome}. In his nineteenth-century about migraine, Edward Living will often refer to observations made about the nervous system by “our old Willis.”
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\textsuperscript{23}Feindel claims Willis introduced the term “neurology” into English: “The term was used by Willis to include the cranial, spinal, and automatic nerves as a distinct from the brain and spinal cord [...] Willis’s use of the root \textit{neuro} from the Greek word meaning sinew, tendon, or bowstring, antedates its appearance in all other combinations in English by a century or more” (47). Willis’ medical treatises were translated from Latin into the English vernacular in the seventeenth century, not long after his death.
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the brain, specifically the Circle of Willis, a ring of arteries at the brain’s base (Ackerknecht 124). According to some migraine historians, Willis also identified the vasodilation theory of migraine (Silberstein et. al., 15; Pearce 1098; Eadie, 2012, 8).

In “The Second Part, Pathological” of Two Discourses Concerning the Soul of Brutes (1683), Willis devotes the first chapter to aspects “Of the Headach” (sic). Like Aretæus, he distinguishes different types of headaches:

As to the differences of the Headach, the common distinction is, That the pain of the Head is either without the Skull, or within its cavity: The former is a more rare and more gentle disease, because the parts above the Skull are not so sensible as the interior Meninges [...] The other kind of Headach, to wit, within the Skull, is more frequent, and much more cruel, because the Membranes, cloathing the Brain, are very sensible, and the Blood is poured upon them by a manifold passage, and by many and greater Arteries. Further, because the Blood or its Serum, sometimes passing thorow all the Arteries at once, both the Carotides and the Vertebrals, and sometimes apart, thorow these or those, on the one side or the opposite, bring hurt to the Meninges, hence the pain is caused that is interior; which is either universal, infesting the whole Head or its greatest part; or particular, which is limited to some private region; and sometimes produces a Meagrim on the side, sometimes in the forepart, and sometimes in the hinderpart of the Head. (106; author’s emphases)

As this passage reveals, Willis deems that the excessive pressure of the blood flow throughout the brain causes general “interior” headache pain as well as migraine (“meagrim”) itself. His description “poured upon” concisely epitomizes such pressure;
the metaphor of the membranes (or meninges) “cloathing” the brain reinforces the sense of constriction in the brain (although blood vessels actually dilate, the resulting pain can feel like a series of vises circling one’s head, or a cap squeezing one’s skull). His location of migraine pain, in a specific side of the head, is also consistent with other physicians’ and sufferers’ reports.

While Willis treated patients of all ages and classes for migraine (The London Practice of Physick 384), his most famous patient was Lady Anne Conway (1631-1679), a distinguished scholar of ancient and modern philosophy. In the “Headache” section of The London Practice of Physick (1692), he often alludes to her case to exemplify the migraineur’s suffering and quest for treatment:

Some years since, I was called to see a Lady of Quality, troubl’d for above twenty years with a Head-ach, which at first was intermittent, but of late is almost continual [...] the Disease not being limited to one place or part of her head; sometimes infested the right side, sometimes the left, sometimes the whole circuit. During the access (which seldom ending within the space of twenty four hours, often infested her for two, three, or four days), she could not endure light, speech, sound, or any motion; but sitting upright in her bed in a darkened room [...] But

24 Lady Anne Conway’s maiden name was Anne Finch; she is not to be confused with Anne Finch, Countess of Winchelsea, an English poet born thirty years after Conway. Her Principles of the Most Ancient and Modern Philosophy appeared posthumously in Latin in 1690.

25 The OED indicates that “access” was introduced into English via the French language, and denoted the approach or attack of an illness (or sometimes emotion).
the disease being free from a Vertigo, Scotomia, Convulsive affects and any symptom, [she] had still the chief Faculties of her Soul, whole and sound. (394)

Although Willis does not specifically diagnose “megrim” here, many of the symptoms point to it: the pain occurring at times in half of the head, the inability to tolerate light or sound, and the duration of pain. Moreover, his portrait contains an iconic image of the migraineur, remaining motionless and isolated in a dark room. Significantly he does not witness aspects concomitant with migraine, such as vertigo or scotoma, nor does he think the migraines signal another underlying condition, because her “Soul” and sanity remain intact.27

In the eighteenth-century, migraine seemed to be considered, popularly and professionally, a condition of the elite.28 French physician Samuel Auguste Tissot (1727-

26 Again according to the OED, “scotomia” carries the same definitions and associations with scotoma; the suffix “ia” is a post-classical Latin addition to names of diseases. The word appears earlier than “scotoma” itself. “Scotomy” was the original noun used from the middle ages until the nineteenth century.

27 It is surprising that Lady Conway stayed sane after the pains of migraine and the treatments she endured. Willis catalogues standard treatments for migraine in the seventeenth century, admitting that all of the remedies she tried (even his own) did not relieve her of pain: “[...] she underwent a long-continued and most troublesome Salivation, by a Mercury Oyntment, so that she incurred a great danger of Life. Afterward, a Cure was twice undertaken by a Flux, though to no effect [...] She try’d hot Baths, and drank Spaw-waters [sic], almost of every Country and Nature [...] She was frequently Blooded, and once in an Artery [...]” (394-5). Treatments also included pharmaceuticals of all sorts.

28 Eighteenth-century literature is rife with examples of considering migraines an “affectation.” A blustering, military patriarch in Fanny Burney’s Evelina (1778) also views migraines with suspicion, remarking, “There are fools enough in your world, without your adding to their number. I’ll have no daughter of mine affect them sort of megrims”’ (109). The editor explains “megrim” as follows: “Although often understood to be a headache, or depression (i.e. ‘vapours’) megrim—or megrims, as here—could be a whim or fancy” (Bloom 412). The Captain’s assertion here demonstrates the way migraine was conflated with other nervous “disorders.” In France in the eighteenth-century, the Marquise de Merteuil, in Choderlos de Laclos’s Les Liaisons Dangereuses (1782), employs fits of migraine to conceal her affairs: “J’ai ma migraine; je me couche pour tous mes gens; et, restée enfin seule avec la veritable, tandis qu’elle se travestit en laquais, je fais une toilette de femme de chambre” (100). The Marquise de Merteuil’s “condition” demonstrates what some authors of the era believed: migraines signified the domain of the upper class (and in the nineteenth century, according to Zola, the domain of the bloated bourgeoisie).
1797), like Willis contributed to studies of the nervous system. His *Essai sur les maladies de gens du monde* (*An Essay on the Disorders of People of Fashion* [1771]) devotes a section to “Megrims or Vapours.” Tissot believes that the head operates in sympathy with the digestive system:

> When the disorder is so inveterate as to become an affection of the nerves, or habitual illness, [...] it should not sometimes be cured, for a suppression of the megrims causes more pernicious maladies; we should confine ourselves to mitigate its force by lessening the fits, or rendering them less powerful [...] This disorder has sometimes its seat in the chief intestine, and derives itself from an accumulated bile which corrupts: purges, a continued use of cream of tartar, and above all a temperate and almost entirely vegetable diet, are the true remedies.

> [...] There are but few ways of giving ease in the fit: tranquility is almost the only one which is efficacious. (119-20)

Tissot’s thinking, here, anticipates Jean-Martin Charcot’s belief (analyzed in the next section of this chapter) that migraine may signal graver, more ominous underlying conditions (whether they be physical or psychological). Although Tissot does not offer theories regarding cause or origin, he argues, as physicians before and after him, that “lifestyle” activities (or lack thereof), particularly regarding diet and exercise, are essential to migraine treatment.
A near-contemporary of Tissot’s, Quaker-raised Englishman Dr. John Fothergill (1712-1780), also placed blame for migraine—or “sick headache”—upon digestion: “...indeed, from numerous circumstances, it is most clear, that the head-ach proceeds from the stomach; not the reverse [...]” (106). Even though migraine masquerades as “sick-headach” here, again its cardinal features appear in his study: hemi-cranial pain (104); nausea (105); sensitivity to light and noise (105). Fothergill’s account in “Remarks on that Complaint Commonly Known under the Name of the Sick Head-ach [sic]” (1778) is one of the earliest detailed accounts regarding scotoma and migraine; he is also the first to identify the luminescent geometric shapes as “fortifications.”29 Fothergill clearly isolates scintillating scotoma in his catalogue of the sick-headache: “After breakfast, if much toast and butter has been used, [the sick headache] begins with a singular kind of glimmering in the sight; objects swiftly changing their apparent position, surrounded with luminous angles, like those of a fortification” (120). Like Tissot, he puts great emphasis upon diet to alleviate migraine, pointing to the amount, the frequency of eating, and what one ate as factors in the sick-ache. He too notes that sick-headache is common to those who lead sedentary lives (103). Fothergill eschews the nervous system as a cause of migraine; for him, moderation in food and drink is the key: “The disease is frequently treated as a nervous distemper [...] My opinion of the disease is, that, for the most part, it proceeds from inattention to diet [...]” (106-7). His approach to treating migraine involves the maintenance of overall health, stressing that medicines would not help if strict dietary regulations were not also followed.

29 Edward Liveing credits Fothergill’s contributions in *On Megrim* (13; 76); J. M. S. Pearce provides similar information in his biographical sketch of Fothergill.
The nineteenth century witnessed an explosion of medical literature devoted to migraine. This era, of course, was a period in which technological and scientific innovations enabled further studies into the body and its functions. In Britain, the Anatomy Act of 1832 made legal the dissection of human remains, enabling neurologists like David Ferrier (1843-1928) and John Hughlings Jackson (1835-1911) to contribute to the mapping of the brain and nervous system (indeed, Ferrier became a very controversial figure due to his experiments in vivisection). The work of the cerebral locationists further challenged doctrines of faith and belief in human agency or individuality. Within this fermentation of neurological study, more comprehensive studies of migraine, aura, and scotoma emerged in mid-century France and Britain.30

In the fourth part of his Du Procédé Opératoire à suivre dans l’exploration des organes par la percussion (1835), Pierre Adolphe Piorry (1794-1879) includes a section regarding migraine: “Mémoire: Sur l’une des affections désignées sous le nom de migraine ou hémicrânie.” Today Piorry is noted for his work in medical percussion and as a physician at the Salpêtrière (a fore-runner to Charcot), but he also contributed to studies of migraine (Edward Liveing, discussed below, admired his work). Piorry notes that those that lead sedentary lifestyles are particularly subject to migraine: “Les hommes de lettres, les employés, les ouvrières en dentelle, les demoiselles de comptoir qui ont beaucoup d’écritures à faire, les typographes, sont spécialement exposés à cette pénible affection” (407). However, women remain particularly vulnerable to attacks, due to their

30 See Duffin’s chapter “Technology and Disease” for the reciprocal relationship between technology and medical thought. For more information about the fervour of neurological activity in mid-to-late nineteenth century Europe, see Anne Stiles’ introduction to Neurology and Literature: 1860-1920.
domestic confines: “Le genre de vie que suivent les femmes est peut-être la cause qui fait qu’elles sont plus sujettes à la migraine” (407). According to Lardreau, in this era French physicians began to distinguish “migraine” from other similar neuralgic disorders, and argued that “hemicrania” was a symptom of migraine (1383).\(^\text{31}\) Piorry separates migraine from other conditions, for not only its head pain, but for eye strain, lethargy, and nausea: “L’affection que j’étudie me paraît être une névrose de l’iris, qui, d’abord bornée à cette membrane, ou plutôt à ses nerfs, s’étend à de nombreux rameaux nerveux, et est caractérisé par des troubles dans la vision, suivis de douleur dans l’œil, ou à la surface du crâne, de nausées et de vomissements” (407-8). Although he does not refer to disturbances in the visual field as “scotoma” or “fortifications,” Piorry, like Fothergill, isolates ophthalmic breakdown as a key diagnostic feature: “[…] après une ou deux minutes, se dessine à l’entour de l’espace obscurci un arc de cercle lumineux, coloré chez quelques individus, mais pâle chez d’autres, disposé en zigzags, agité par une sorte d’oscillation continuelle. […] se développant de plus en plus, scintillant continuellement […]” (409-10). Piorry recommends belladonna for eye pain, and opium for the hemicranial pain, noting that cold water on forehead, sleep, and/ or vomiting, will ease the paroxysm.

Piorry was not the only physician studying migraine in France in the early nineteenth-century. In 1832, doctor of medicine Jules Pierre de Kinkelin-Pelletan (1803-1845) published a treatise dedicated entirely to migraine, entitled Coup d’œil sur la migraine et ses divers traitements. He also distinguishes “migraine” from head pains and

\(^{31}\) Lardreau “La Migraine,” Bibliothèque numérique Medic@.
nervous conditions with which it is often confounded, arguing that physicians have not paid enough attention to migraine itself: “Les névralgies, les douleurs rhumatismales, les douleurs de tête provenant de l’inflammation d’un viscère, etc., et la migraine, se trouvent là confusément rassemblées, et la question de la migraine essentielle n’y est réellement pas traitées” (22). As the title of his treatise indicates, Pelletan was interested in the ways in which perception could be tricked and disrupted by the body itself.

British dialogue regarding migraine, and specifically scotoma, began to circulate mid-century in public forums, in magazines and journals dedicated to medicine and philosophy. In 1865 the Royal Astronomer, George B. Airy (1801-1892) sent a letter to the editors of *Philosophical Magazine*, recounting his experiences with “hemiopsy.” Airy’s account makes explicit the appearance and movement of scotoma: “Only one arch is seen at one time: the arch is small at first, and gradually increases in dimensions. The zigzag nearly resemble those in the ornaments of a Norman arch, but are somewhat sharper [...] The zigzags do not change their relative arrangement during the dilation of the arch, but they tremble strongly [...]” (20). He further reports red hues on the external edges of the zigzags, and maintains that headache does not accompany the disturbances in his visual field. He concludes that the seat of the condition is in the brain, a “species of paralysis” with the hemiopsy appearing as a secondary symptom (21). In addition to the visual disturbances, he remarks that he once experienced loss of speech and memory (21). The incident occurred in a railway carriage, but Airy does not implicate the modern

32 This letter prompted even more dialogue in medical journals, and letters exchanged between physicians in England, France, and Germany. For biographical information about the Airy family, see M. J. Eadie, “Hubert Airy, Contemporary Men of Science and the Migraine Aura.”
mode of travel prompted the hemiopsy, as Liveing and others will do. His accompanying illustration is a lucid representation of moving fortifications (Figure 1).

George Airy’s son, Hubert, expanded on his father’s observations in a paper offered to the Royal Society of London, “On a Distinct Form of Transient Hemiopsia” (read by his father in 1870). Hubert Airy (1838-1903), himself a Cambridge-graduated physician, contributed to neurology a set of explicitly detailed descriptions and drawings of scintillating scotoma. His description provides particularly vivid details and is worth citing at some length, not only for its medical substance, but also for its implications regarding migraine and migraine aesthetics. After citing previous physicians’ and scientists’ experiences with “transient hemiopsia,” the younger physician outlines his own case:

Usually after two or three hours’ close reading, especially if I have had insufficient exercise, I become aware that part of the letter I am looking at [...] is eclipsed by a dim cloud-spot [...] Even at this very earliest stage, the tremor, that is so characteristic of the developed disease, can be detected, and as the cloud enlarges, it begins to assume its proper zigzag outline, enriched with tinges of colour.

At this earliest stage the spot is but faintly luminous in a dark room, or with the eyes shut and shaded, and scarcely shows at all against the bright sky. Its shape and colours are best seen by looking at a shady part of the ceiling or a neutral-tinted wall.

For example, Airy junior acknowledges Fothergill’s work regarding “fortifications.”
When this blind spot makes its appearance close to the centre of vision, as soon as it begins to spread, and shows a serrated margin, it at once presents the irregular horse-shoe shape [...] 

Almost from the very first it may be noticed that parts of the faint cloud have a slow rolling heaving swaying motion to and fro, by which the outline is altered from time to time and again restored in the gradual outward spread; and superadded to this slow rolling is rapid flickering tremor (about five vibrations per second) of the marginal rays, affecting especially such parts as are rolling at the same time. (256)

Notably, for Airy, the trigger for the visual disturbance is an exhausted body, a body exhausted by reading. His description is singular for the precision with which he pinpoints the duration of movement, testifying to the era’s obsession with fixing and determining, quantifying things. Yet the description also reflects a lyrical fluidity (the “slow rolling heaving swaying motion”), both in the writing and of the experience. He describes scotoma in terms of “teeth” (256) and horseshoes. In this paper, Airy rejects the term “hemiopsia” to signal the phenomenon, and returns to the Greek for the neologism “Teichopsia” (teich—town wall + opsia—vision) (259; the name is sometimes still used to indicate “fortifications”).

34 The “walls” of these fortifications suggest also that vision is being “walled in,” as when one suddenly loses his/ her peripheral vision. Such walls are also suggestive of positivist science’s increasing tendency to segregate knowledge and fields of study. Nonetheless, the very movement of scotoma emphasizes that those “walled-in perceptions” are indeed unstable.
Figure 1: George B. Airy, “Hemiopsy” (1865)

Figure 2: Hubert Airy’s Plate XXV “Stages of Teichopsia” from “On a Distinct Form of Transient Hemiopsia” (1870)
The coloured plates appended to Airy’s article are visually stunning. Indeed they carry the living warmth and colour of art, rather than the skeletal, structural diagrams of science. Plate XXV (Figure 2) represents examples of sinistral scotoma, the fortifications that appear to the left of the central sight point (labeled with the letter “O” in Airy’s drawing). The drawings demonstrate the progression of the zigzagging arches. The biggest arch, depicts teichopsia fully developed; the jagged edges are the most colourful, with luminescent shades of yellow and red-like swirls of teeth and tails. In addition to narrative and art, Hubert Airy uses poetry to enhance the neurophysical phenomenon he describes. In his experience, the advent of scotoma recall lines from Tennyson’s “Enone,” which he quotes in his paper: “[...] as yonder walls/ Rose slowly to a music slowly breathed,/ A cloud that gathers shape [...]” (38-41; Airy’s emphasis). Although Airy’s emphasis demonstrates that he was thinking about fortifications and clouds as barriers to clear perception, this quotation also reveals the association of scotoma with migraine aura, invoking as it does the “breathing” inherent in the term “aura.”

Significantly, Airy offers an intriguing analogy of scintillating scotoma, drawing upon the new technology of his day; for him, the experience offers a “veritable ‘Photograph’ of a morbid process going on in the brain” (264). To depict the neurological onset of vibrations, rollings and flickerings, nineteenth-century scientists and patients alike drew upon the sensational experience of new media such as photographs, zoetropes, or magic lanterns. For example, Samuel Gee, MD, in “Diseases of the Nervous System” quotes a male colleague/migraine sufferer who compares the growing of the headache pain and fortifications to magic lantern chromatropes:
Indoors all day reading and writing. Felt towards evening some premonitory dimness, but no headache or megrim signs. Suddenly, after half an hour’s reading of small print in Bellow’s French Dictionary, I was conscious the teichopsia had begun, though I could not say when it had started. Faintly luminous, jagged, “swarming” half circle, referred to outer half of left eye, the convexity of the curve being outwards […] The appearance moves as I move my eyes or head; by no means can I bring myself to feel that the right eye has any part in it. It is growing slowly, though in incessant outer movement like a magic lantern chromatrope. (43-4)

As the nineteenth-century witnessed an ever-increasing development of visual technology—photography, stereoscopes, cinema—doctors too moved from making organic-based analogies to analogies with photographic/viewing technology to explain migraines.

New media such as cinematography in the early twentieth-century were also seen as a “trigger” for the sensory overload of the migraine experience itself. For example, T. H. B. Dobson writes in “On Migraine” in the British Medical Journal of 1908, “At present we can only say that there is an hereditary predisposition to a brain storm. […] Typical [immediate] causes are a cinematograph exposition, a tour round a picture

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35 Here I would like to acknowledge Dr. Janelle Blankenship, my thesis supervisor, for contributing this source and point to the dissertation.

36 Gowers speaks of “fortifications spectra” in his 1895 Bowman Lecture on “Subjective Visual Sensations,” again drawing an analogy between ghostly forms and the body’s own spectres. The term “spectra” is of course related to “spectre.” In 1895 the first films were also projected to a paying audience. Gorky, in his review of the new media of cinematography in 1896 writes, “It is not life but its shadow; It is not motion but its soundless specter” (quoted in Burch, 23).
gallery, and prolonged microscopical work” (314). This last trigger reveals how many male physicians and scientists of the era were interested in studying their own experiences with migraine, which may be why their studies seem to privilege men of science as migraineurs. As I will discuss in some of the literary case studies in this dissertation, there is a gendered dynamic to this link between migraine, intellectual production and media. In the context of our medical history, Willis, Airy, Liveing, and Latham all describe cases of male scholars with migraine and “brain work,” even as they established migraine as a “woman’s” illness.

Another Victorian physician specializing in migraine was Peter Wallwork Latham (1832-1923), Assistant to the Dowling Professor of Medicine at Cambridge. Latham’s work, *On Nervous or Sick-Headache, Its Varieties and Treatment: Two Lectures* (1873), is significant because he propounds the vaso-motor theory as cause of migraine: “[...] first of all we have a contraction of the vessels of the brain, and so a diminished supply of blood produced by excited or uncontrolled [sic] action of the sympathetic [nervous system]; and that the exhaustion of the sympathetic following on this excitement causes the dilation of the vessels and the headache” (16). Nonetheless, he recognizes that migraine is an inherited condition with innumerable triggers: “In some persons already predisposed to an attack, any strong impression produced on the retina or on the olfactory or auditory nerves is sufficient to excite the headache” (15). Like other physicians, Latham classifies the migraineur as one of a “nervous temperament”: “[...] their brains

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37 Again, this history is indebted to M. J. Eadie’s 2009 study regarding this remarkable group of physicians that Cambridge University produced in the early 1870s.

38 Although Latham had clearly read Airy, it is not clear whether or not he read or knew of Thomas Willis’ work, which also point to blood vessels as the likely cause of migraine.
are excitable, their senses acute, and their imaginations free” (14). His results follow from his own case studies (his patients seem to be frequently forced to lie down and then get up again), as well as experiments with galvanism.

After the Airys, the Cambridge scholar most recognized today for his contributions to migraine science is Edward Liveing (1832-1919), whose thesis was published as *On Megrim, Sick-headache, and Some Allied Disorders: A Contribution to the Pathology of Nerve-Storms* (1873; 1986). This work is viewed as one of the best modern studies regarding migraine (Pearce 1100; Sacks 7). *On Megrim* is responsible for the grouping of the various types of headaches known as “sick-headache,” “hemicrania,” and “bilious headache,” recognizing that physicians before him had been describing the same condition under different names. Via his detailed case studies, Liveing too chronicles the key symptoms of migraine, including scotoma, nausea, and hemicranial pain. He argues that migraine is hereditary, and finds that external factors trigger a migraine episode: “[...] powerful impressions on the sensorium, as by the combined sights, sounds, and general excitement of public spectacles and assemblies,” in addition to “mental emotion” and “excessive brainwork” (1872, 365). Other causes include travel in a closed, confined space, such as by carriage, omnibus, or railway (1873, 6), and rapid movement: “[...] the motion of a close carriage, and a rapid succession of visual impressions, [...] upsetting the sensorium and producing a vertiginous state allied to sea-sickness” (1873, 50). For Liveing, many aspects of modern life trigger a migraine: “[...] glaring lights, loud noises, strong odours, foul air [...]” as well as spaces such as “[...] factories, workrooms, public assemblies, and [...] the various forms of what is called sight-seeing” (53). While Liveing considers heredity, dietary factors, and environmental
factors like barometric changes as migraine causes and triggers, he concludes that the rapid expansion of technology and population growth, in addition to the fast pace of Victorian modernity, contributes to an “overload” of senses and perception, to which migraineurs are particularly sensitive.

While he, too, considers vascular theories of nervous disorders (273-97), he does not agree that the “seat” of a disorder like migraine can be found in the circulatory system or in the digestive system; Liveing’s central thesis in Of Megrims is that migraines originate in the nervous system (336 ff). He propounded a theory of “nerve-storms” to account for the paroxysms of pain and constellation of visual and visceral disturbances in migraine and its allied disorders:

On this theory, then, the fundamental cause of all neuroses is to be found [...] in a primary and often hereditary vice or morbid disposition of the nervous system itself; this consists in a tendency on the part of the nervous centres to the irregular accumulation and discharge of nerve-force—to disruptive and unco-ordinated [sic] action [...] the paroxysm itself may be likened to a storm by which this condition is dispersed and equilibrium is restored. (336)

Liveing stresses that in applying the term “nerve-storms” to neural seizures and disorders, he does not provide an explanation for migraine pathogenesis (337), but he finds the term reflects the “explosive tendencies” (343) of such paroxysmal disorders.  

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39 Late twentieth and twenty-first studies have confirmed Liveing’s concept of migraine as a primary aspect of the nervous system, with vasodilation as a secondary factor (see outline above regarding the dual theories of migraine).
Another key neurologist of the late nineteenth-century merits mention: William Rihcard Gowers’ (1845-1915) work regarding the nervous system. Although his primary interests entailed epilepsy and Parkinson’s disease, Gowers also treated migraine in his *A Manual of Diseases of the Nervous System* (1886-88) and *The Borderland of Epilepsy* (1907). He defines migraine in his 1880s treatise as “an affection characterised by paroxysmal nervous disturbance, of which headache is the most constant element” (776). Headache notwithstanding, he also catalogues the attendant symptoms of migraine (scotoma, nausea, “vertigo of the labyrinthine variety” [787]). Like Liveing, he finds migraine to be hereditary (777) and related to “another paroxysmal neurosia, epilepsy” (777; 789). Although he did not find Liveing’s metaphor of the “nerve-storm” particularly apt for explaining the physiology of migraine (789), he does agree that the condition is essentially one of the nervous system. He rejects Latham’s theory of vasodilation because he does not see evidence for a spasm of the arteries in one section of the brain, nor that the spasm occurs in the same place every time (789). Gowers asserts that “we know that the vascular system is in a special way under the influence of the cerebral centres” (790); nonetheless he concedes that disorders of the blood vessels may intensify symptoms, even if they do not cause them (791). Regarding treatment, fortunately for migraineurs, he also discourages the use of electricity and faradism in alleviating migraine pain (795). Modern technology such as “glaring” (electric) lights or the railway, for Liveing, could trigger migraine; Gowers recognized that some new technologies could not necessarily render a cure.

In France, Jean-Martin Charcot (1825-1893), the neurologist most famous for his studies of hysteria, also explored migraine (he, too, experienced scotoma and ophthalmic
migraine). Like his English contemporaries, his interest lay in scotoma and aura when outlining “migraine ophthalmique” to the audience in his *Leçons sur les maladies du système nerveux* (1890):

[...] dans un accès vulgaire de migraine ophthalmique, nettement caractérisée, on voit se manifester, dans le champ visuel, une figure lumineuse, d’abord circulaire, puis demi-circulaire, en forme de zigzag, ou de dessin fortification, agitée d’un mouvement vibratoire très rapide, image tantôt blanche, phosphorescente, tantôt offrant des tints jaunes, rouges ou bleues plus ou moins accentuées. C’est là ce qu’on appelle le scotome scintillant. (3. 74-79)

“there is a luminous figure manifested in the visual field, first circular, then half-circular, in the form of a zig-zag, or drawn like a fortification, shaken in very rapidly vibrating movement, sometimes a white, phosphorescent image, sometimes tinted with more or less accentuated yellows, reds, and blues” (qtd./trans. in Didi-Huberman 292).

Charcot’s descriptions of scotoma are relatively similar to Hubert Airy’s, and indeed he includes Airy’s drawing to illustrate his own remarks. Charcot does not mention a theory regarding migraine pathogenesis—that is, he does not discuss, in this lecture, theories of vasodilation, for example—however his emphasis upon the sometimes white, sometimes “tinted” flickering, hysterical movements of optics and nerves here would indicate he too reproduces the migraine event using the new aesthetic of rapidly vibrating, living pictures, viewing migraine as a singularly modern aspect of the brain and nervous system.
1.2 From Neurology to Psychoanalysis

As the above history makes explicit, migraines had been an acknowledged medical condition for hundreds of years, but the nineteenth century began to make it pathological; migraineurs became a “nervous” modern figure that haunted medical treatises and literary fiction. Their “nervousness” was different from the bilious humours of the early modern era, and from the “vapours” that emanated from stomach to brain in the eighteenth century (though the nineteenth century migraineur was still marked by melancholia, according to Liveing, noted above). The physiological occurrence of “scotoma” informed the late nineteenth century’s developments in the field of psychology (which, as various literary critics have demonstrated, developed from neurology). For example, early psychiatrist Henry Maudsley (1835-1918), in The Pathology of Mind (first published in 1879, and expanded later), identifies migraine as a possible precursor to mental illness: “‘Neuralgic headaches or megrims, various spasmodic movements or tics, asthma and allied spasmodic troubles of breathing will often times be discovered to own a neurotic inheritance or found one’” (Maudsley 108). Although Maudsley’s study is primarily interested in the causes and manifestations of “mental derangement” and insanity, he clearly considers inherited “nervous disorders,” such as migraines, as a facet of or trigger for mental illness.

Georges Didi-Huberman observes that Charcot’s interest in scotoma was a facet of the doctor’s intrusive cataloguing and construction of the stages of the hysterical, and then reinscribing and perpetuating the stages of the hysterical through photographic images (as well as in his lectures and writings); this writer contends that Charcot believed
scotoma heralded hysterical episodes (133-4; 292). Indeed, at the closing of the
*cinquième leçon*, Charcot offers an ominous word of caution:

La morale de tout ceci, Messieurs, c’est qu’il ne faut pas s’arrêter sans critique à
l’idée juste pour l’immense majorité de cas, que le scotome scintillant et les autres
phénomènes qui souvent l’accompagnent sont choses peu d’importance. Sous des
debors bénins peut se cacher le début d’une maladie grave; il ne faut pas s’y
laisser prendre. (79)

The moral of all of this, sirs, is that in the majority of cases, one cannot stop at the
idea that scintillating scotoma and other accompanying phenomena are of little
importance. Under some benign appearances the start of a serious illness may be
hiding [...]” (my translation).

Although migraine is not necessarily as “theatrical” as hysteria (scholars such as Didi-
Huberman and Showalter emphasize the performative nature of Charcot’s hysterical
subjects as well as the directorial/performative actions of Charcot himself), or as
“frightening” as epilepsy (as deemed by both doctors and lay people throughout the
ages), Charcot recognizes that these “nervous conditions” are often comorbid in nature.

It is worth noting that one of the founders of psychiatry and pupils of Charcot,
Sigmund Freud (1856-1939), who started his studies as a neurologist, did not develop a
systematic study of migraine (although he was a sufferer himself); nonetheless, he
employed his experiences as evidence for the latent and/ or repressed workings of
consciousness: “The mild attacks of migraine from which I still suffer, usually announce
themselves hours in advance by my forgetting names, and at the height of these attacks,
[...] it frequently happens that all proper names go out of my head” (qtd. in A. Karwautz,
C. Wöber-Bingöl, C. Nober, 22). Moreover, he admits that “[s]lips of the tongue do really occur with particular frequency when one is tired, has a headache, or is threatened with migraine [...] Some people are accustomed to recognize the approach of an attack of migraine when proper names escape them this way” (qtd. in A. Karwautz, C. Wöber-Bingöl, C. Nober, 22; Sacks 77 n.18). Indeed, Freud clearly incorporates some of the neuro-physiological aspects of migraine into psychopathology as a whole.

As the nineteenth-century scientists and doctors before them, psychiatrists of the twentieth century also seized upon the phenomenon of “scotoma” to elucidate the inner workings of the mind (recall Gowers’ proposed term “double consciousness” for the experience of the migraine aura and event itself). Both Martin Jay and Emily Apter chronicle the appropriation of “scotoma” into psychoanalytical concepts, pointing out that Jacques Lacan uses the term “scotoma” to refer to the limitations of human consciousness, which he believed to be prone to a misrecognition of itself, a méconnaissance. Lacan privileges scotoma for its relation to the gaze, and for signifying an “ambiguity that affects anything that is inscribed in the register of the scopic drive” (1981, 83). Apter offers a persuasive synthesis of the concept of scotoma from Charcot to Lacan:

The scotomized Lacanian subject is caught in a contentious struggle for mastery between the eye and the gaze that parallels Charcot’s dialectic between scotophilia and scotomization. Both metaphor for and visible evidence of repression, the scotoma, as Lacan uses the term, plays on an ambiguity already introduced by Charcot, where the physical sight of the brilliant aura was interpreted both as manifestation of, and punishment for, hysteria. (93).
Apter treats “scotoma” on the one hand, as a symbol of “blind spots,” that is, different people’s refusal to “see” a situation “clearly” (for example, people who refused to listen to counter-arguments and evidence in the Dreyfus affair), and on the other hand, views the “scotoma” (with Lacan) as a form of “repression.”

Freud himself rejected the term to represent the blocking of one’s sight; for him, “repression” already adequately conveys the pathological process of denial (1927, 205). He argues that “[s]cotomization seems to be particularly unsuitable, for it suggests that the perception is promptly obliterated, so that the result is the same as when a visual impression falls on the blind spot on the retina. In the case we are discussing [a young boy’s “shock” at a woman’s “lack” of a penis], on the contrary, we see that the perception has persisted and that a very energetic action has been exerted to keep the denial of it” (205-6). For Freud, human will or conscious awareness is at play in his rejection, here; scotoma is involuntary, while repression is very much an active though subconscious force.40

This short account of migraine and scotoma in medical history demonstrates that physicians have long recognized the cardinal symptoms of migraine—hemicranial pain, aura and scotoma, and nausea—although the complexity of migraine has generated long debate regarding its pathogenesis. I have placed emphasis upon later eighteenth-century and nineteenth-century neurological thinking, not only because these eras witnessed an

40 Interestingly, Freud accepts neuro-physiological conditions such as “slip of the tongue,” which is clearly as much a physical manifestation of migraine as much as “blind spots on the retina,” but he will not give any validity to the theory of scotoma.
explosion of study about the nervous system and migraine, but also because the doctors’
theories and demonstrations suggest wider implications for the aesthetic thinking of the period.
Chapter 2

Lewis Carroll’s “Odd Optical Affections:” Phantasmagoria, Scotoma, Word/ Image

“Off with her head!” Queen of Hearts, Alice’s Adventures in Wonderland (72)

“In the evening Mrs. Cameron and I had a mutual exhibition of photographs. Hers are all taken purposely out of focus—some are very picturesque—some are merely hideous. [...] She wished she could have had some of my subjects to take out of focus—and I expressed an analogous wish with regard to some of her subjects.”

Dodgson, letter to his sister Louisa, 1864 (1: 66)

“‘you, I suppose,’” turning to me, “dream photographs’” Tennyson to Dodgson (Dodgson’s Letters, 1:37)

2.1 “The Realm of Neuromythology”

Neurologists often distinguish Charles Lutwidge Dodgson, alias Lewis Carroll (1832-1898), as one of migraine history’s most famous sufferers. Several physicians also identify Carroll’s Alice books as exemplary case studies of perceptual disturbances as experienced by migraine sufferers. Rather than simply arguing that migraine hallucinations inspired the fantasy, neurologists use Carroll’s work to lend legitimacy to the conditions they describe. In his 1952 paper “Certain Hallucinations Peculiar to Migraine,” Caro W. Lippman recites cases of body-image distortions occurring during the aura phase; patients felt as if they had elongated limbs or bobbing heads, for example. He concludes, “I would hesitate to report these hallucinations [...] had not, more than 80 years ago a great and famous writer set them down in immortal fiction form. Alice in Wonderland contains a record of these [body-image distortions] and many other migraine hallucinations” (351). Three years later, J. Todd studied migraine cases from a

[41] J.N. Blau’s words from a letter to The Lancet, refuting claims that Dodgson drew upon his migraine experiences for the Alice books.
psychiatric perspective, and expanded on Lippman’s thesis by naming the body-
distortions the “Alice in Wonderland Syndrome.” In his discussion of “zoom vision,”
Oliver Sacks asserts, “[t]he most famous descriptions of such perceptual changes have, of
course, been provided by Lewis Carroll, who was himself subject to dramatic classical
migraines of this type” (74). In a recent article on the “Alice in Wonderland Syndrome”
in the edited volume *Literature, Neurology and Neuroscience: Neurological and
Psychiatric Disorders* physician Edward J. Fine also concludes that

Lewis Carroll vividly described Alice’s metamorphosis because he himself was
most likely a migraineur. He experienced the transient visual changes associated
with his migraine headaches such as hemianopsia as evidenced by his sketch of a
person with the right half of the face, right shoulder, and hand eradicated,
characteristic of right-sided paracentral negative (ablative) scotoma drawn in
1854-1855 and reproduced in his family journal 1855-62 (Podoll and Robinson,
1999) (Fine 151-152).

While these doctors persuasively argue that Carroll’s stories provide vivid illustration of
body-morph hallucinations, others deny any associative value at all between Dodgson’s
migraine suffering and the Alice books. The neurologist J.N. Blau finds that the relation
between Alice’s somatic experiences and Dodgson’s migraines fall into the “realm of
neuromythology,” contending, “Carroll's migraine played no role in his imagery of Alice.
However, it is possible that Alice's body distortion arose from his photography—but this
is speculation” (582). Fine himself contends, however, that Blau based his argument that
Lewis Carroll did not experience migraines until after he wrote the *Alice* books on faulty
research: Blau only read diary entries Dodgson recorded between 1885 and 1891 (Fine,
151-152). Other neurologists such as Joost Haan argue that the condition itself does not fit our modern understanding of migraine in the twenty-first century: “Dodgson once made a self-diagnosis of ‘bilious migraine’ but this cannot be checked with the present migraine criteria” (133-4). Yet as I will demonstrate below excerpts from his diaries demonstrate that Dodgson was “clearly” aware of the visual disturbances that foreshadow migraines, particularly the “moving fortifications” phenomena. The disturbances were not always followed by headache, nausea or other symptoms (at least, according to his records); but when considered within the context of nineteenth-century and current-day medical knowledge about “transient hemiopsia” and migraine, his “odd optical affectations” reveal that Dodgson indeed did suffer from a form of (silent) neurological syndrome. Certainly, the mathematician and author was keen to self-diagnose, as the diaries illustrate (Dodgson even took on the guise of a doctor to help other afflicted souls).

How did Dodgson’s curiosity about the “odd optical affections” intersect with his creative output? Here it is important to consider the migraine itself as a phenomenon linked to larger issues of time-space transformation, media and technology (Dodgson’s own photographic practice and his interest in magic lantern projection), ephemerality and splitting or doubling. I am not suggesting that Dodgson’s perceptual shifts during migraine directly influenced the Alice books; but I believe that his migraines need to be

42 Roger Lancelyn Green, the editor of Dodgson’s diaries, also refutes the idea that the author suffered migraine in the way it was defined for the mid-twentieth century. After Dodgson’s record of “seeing moving fortifications” in 1885, Green observes, “This was an attack of ‘Psychical’ or ‘Doctor’s’ migraine (not to be confused with the French ‘migraine’ or ‘sick head-ache’) […].”

43 Here I am echoing what Blau in his 1998 letter provocatively states (as quoted in the chapter above), that one should more closely consider the link between the Alice books and Dodgson’s photographic practice.
considered within the wider context of his fascination with photography, illustration, spectacle, and narration. This chapter thus examines the case of Dodgson the migraineur anew, drawing upon an assemblage of his autobiographical writings, photographic practices, fiction, and poetry to shed new light on the phantasmagoric and transient experiences associated with the time-space transformations and auratic zigzags and shifts in his writing, contributing to the ways in which the *Alice* books might be read as scotomatic texts.

### 2.2 Lewis Carroll, Migraineur

The myth of Charles Lutwidge Dodgson/ Lewis Carroll presents a man divided, “split”: Dodgson the mathematical professor and Carroll the charming creator of alternate realities.\(^{44}\) As scholars gained more access to his private and professional papers (his descendents were strict gatekeepers of Lewis Carroll’s image),\(^{45}\) the myth of Dodgson divided has come into a little more focus—or, the supposed division has *blurred*, if you will. Like any myth, this one does not adequately reflect the man who supported his sisters and relatives with his work; the frequenter of the theatre; the avid photographer who took pictures of Tennyson and his family, Christina and Dante Gabriel Rossetti and their family, and scores of child-friends; the art enthusiast who often visited exhibitions at the Royal Academy and engaged in discussions of aesthetics with the Pre-Raphaelites;

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\(^{44}\) In this chapter I follow scholarly practice, referring to “Dodgson” in the analyses of his diaries and photography, and “Carroll” when discussing his published creative work.

\(^{45}\) See Karoline Leach’s biography for details regarding the censoring of the diaries and facets of Dodgson’s life, by (perhaps) his nephew Stuart Collingwood and his nieces—some of whom lived well into the twentieth century.
the man who zipped back and forth on the train\textsuperscript{46} from Oxford to London, then London to Guilford, so often that it is a wonder that he finished any work at the university.

In his two-volume edition of Dodgson’s letters, Morten Cohen published 1,305 of the approximately 4,000 recovered letters (they were recovered by him, and his colleague, Roger Lancelyn Green). Dodgson’s correspondence was prolific, so much so that he maintained a register (now lost), with a \textit{précis} of every letter he sent and received (estimates put the number of letters written at more than 90,000).\textsuperscript{47} Dodgson does not often comment on his health in these letters, offering detail only to his close relatives; for example, a letter to his aunt Lucy (April 2, 1866): “My old enemy, neuralgia, has shifted its quarters from the neck to the face, where it gives me several days of considerable pain, partly I fancy owing to the weather, and partly to a hollow tooth. […] I interested myself in making out from my Cyclopedia its exact name, which I believe to be “neuralgia suborbitalis” (1:89). In the nineteenth-century, neuralgia was a ubiquitous term, and cannot here be considered migraine; however, the letter reveals Dodgson’s interest in playing the role of the physician, employing precise medical terms when he could. Some additional clues about Dodgson’s interest in migraine and medicine appears in an

\textsuperscript{46} Dodgson delighted in the technological and scientific innovations of his era. As a youth he devised a make-shift railway car for the amusement of his siblings, and he contributed to the short-lived \textit{Train} magazine. He was thrilled with his electric pen and typewriter; Dodgson mentions the former in his \textit{Diary} (2: 385) and writes a letter with it to Gladys Walker (\textit{Letters}, 2: 706). On May 4, 1888 he records receiving a “Hammond” type-writer the day before. In January 1869, he and his friends “[…] had a very interesting exhibition of ‘Geissler’s Tubes,’ lit with electric light” (1: 278). He was also fascinated by medical innovations; on December 15, 1856, he writes, “Dined with Uncle Skeffington in Brompton, who showed us a curious new French toy, the “Orthoscope”” (\textit{Diary} 1:97).

\textsuperscript{47} See Cohen’s “Preface” for details about the methods used to collect, catalogue, and publish Dodgson’s letters.
editorial footnote to a letter of September 30, 1879: “My homoeopathic remedies are coming in useful! […] today I have just sent off, by Mr. Hull, 8 drops of nux vomica (dropped on sugar of milk) for Agnes’ sick headache”’ (Letters 1: 348-9; footnote 1).48

Again Dodgson shows his familiarity with “sick-headache,” and method for treatment, as well (presumably Agnes was cured by the dose, and not made more ill; “Nux vomica” is strychnine [Taber N-45]).

Dodgson kept a diary throughout his life, and scholars know it filled thirteen volumes, all of which were in existence and intact at his death.49 Often, the entries are short, and he did not write every day; sometimes he would ignore it for weeks, then summarize skipped days in one entry. He was curious enough about the “odd optical affectations” to record them on five occasions; these entries correspond to the years 1885 to 1891, when he was already in his fifties. The entries are relatively few and short, so I offer full citations.

The first record appears on Saturday, May 23, 1885: “In the morning I experienced, for the second time, that odd optical affection of seeing moving fortifications, followed by a headache” (2: 435).50 Here Dodgson knows what he is

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48 In his edition of the Letters, Cohen at times includes unpublished excerpts from Dodgson’s diaries.

49 The volumes I use here are from the small selections that were published. Dodgson’s diaries in their entirety have not survived; four of the thirteen volumes have been lost. The missing journals include numbers 1, 3, 6, and 7 (see Green’s edition, “Preface,” xii), dated between April 1858 to May 1862. Speculations are rife about the missing diaries, their contents, and the circumstances of their disappearance. Furthermore, some pages from the existing diaries have been deleted or cut out. Karoline Leach, who discovered a summary of some of the missing journals (a summary written in Dodgson’s niece’s handwriting), discusses the mystery of the diaries in her biography of Dodgson.

50 In an editorial note after this first record, Green asserts that there are six such instances of migraine; however, I have located only five. Neither the diaries nor the letters reveal the first time that he witnessed
“seeing;” that is, he recognizes the “odd optical affection” under its medical guise. He also knows that the visual disturbances could herald a headache (this is the only occasion—recorded, that is—when Dodgson suffers a headache after the vision).

The next entry does not appear until 1888, when he notes the precise appearance and location of the visual disturbance: “June 12 (Tu) This morning, on getting up, I experienced that curious optical effect—of ‘seeing fortifications’ —discussed in Dr. Lathan’s [sic] book on ‘billious [sic] headache.’ In this instance it affected the right eye only, at the outer edge, and there was no head-ache” (2: 459). As discussed in the first chapter of this thesis, Dr. Peter Wallwork Latham (1832-1923) published his On Nervous or Sickheadache, Its Varieties and Treatments: Two Lectures in 1873; likely this is the text Dodgson cites. In these lectures, Latham quotes evidence from previous migraine studies (by Fothergill, Herschel, and Liveing) regarding the fortifications phenomenon, and advocates the vasodilation theory as its cause. Evidently Dodgson was well acquainted with the neurological studies of his day.51

On December 3rd of the same year, Dodgson writes, “Again experienced the optical ‘fortifications.’ It began with a distinct loss of a large piece of vision of the left eye, the ‘blind’ patch being the right-hand corner, just where, directly afterwards, the

the fortifications, so it is impossible to determine when Dodgson’s migraines started. Since migraines, even those without headache, do not, usually, suddenly appear later in life, it is likely that he experienced the visual disturbances before (Dodgson was 52 at the time of this record). It is also unclear if an underlying neurological condition or other illness might have caused the sudden experience.

51 Latham’s book does not appear in the list of the facsimile version of Stern’s Lewis Carroll’s Library; Dodgson’s medical texts were kept within the family. Selwyn H. Goodacre affirms that Dodgson’s books (“[...] ‘Anatomy, Physiology, Pathology and Kindred Subjects’ ”) were willed to his nephew (231).
‘fortifications’ appeared” (2: 466). Note that Dodgson experiences not only a loss of sight (blind patches), but also an apparition of another object in the visual field (fortifications). Below, I will associate these spectral images, the visible and invisible moving figures of scotoma, with Dodgson’s photographic practice and magic lantern culture; scotoma acts as an “inner phantasmagoria” (Warner 155). Here, however, I emphasize Dodgson’s ever-present optical awareness. Like other scientists (and pleasure-seekers) of his age, he was clearly intrigued by the way in which the body could produce its own play with vision, without the aid of external lenses, such a telescope, microscope, kaleidoscope, or the lenses of photography.

Nine months later, on September Monday 2 1889, he offers a rare extended commentary of his health: “Just now I am the victim of several various maladies! A boil on the left wrist, which has lasted about a month, has scarcely healed yet. The synovitus,52 which a year ago was in the right knee, has now attacked the left, and today I have begun a course of bandaging and iodine. Also today I saw ‘fortifications’: but no headache followed” (2: 474). Again, Dodgson characterizes the experience as seeing the fortifications. After a two year gap, on Saturday September 12, 1891, he briefly writes, “Last evening I had another experience of ‘seeing fortifications’” (2: 486). Later in the year (December 25) Dodgson ruminates, “For the first time in my life, I am spending Christmas Day alone at Christchurch, the cold being so intense that Dr. Brooks advises me not to face the risk of travelling. My knee seems nearly well [...] My headaches have

52 Synovitis is an inflammation of a synovial membrane, the lubricating fluid of the joints (Taber S-147). In his letters of this period, Dodgson mentions the synovitis, but does not mention “seeing fortifications.”
vanished [...]” (2: 488). After this date, if he saw fortifications again, he did not record them; he kept a diary until a few weeks before his death in 1898.  

### 2.3 Phantasmagoria and Photography

Liveing, Latham, and other doctors of the Victorian era note that more people were becoming vulnerable to eye strain, particularly among those involved in “brain work” (doctors, university students, office workers) or excessive gazing; in addition to scotoma, Dodgson himself experienced problems with his vision. Days before he wrote to his Uncle Skeffington for photography equipment, he visited a London physician about his eyesight: “Jan. 17 (Th). Consulted Mr. Bowman, the Oculist, about my right eye: he does not seem to think anything can be done to remedy it, but recommends me not to read long at a time, nor on the railway, and to keep to large type by candlelight” (Diaries 1:73). After the appointment, Dodgson promptly attended a photographic exhibition in the city.  

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53 The last entry regards a train trip to Guildford, the family home, on December 23, 1897. There, he became sick with the cold that caused his death. He wrote a few short letters in the early days of 1898.

54 Roger Lancelyn Green’s note: “‘Later Sir William Bowman, the great ophthalmic surgeon.’” (1. 73).

55 The diaries show how Dodgson fully immersed himself in the emerging technological, visual, and medical innovations of the Victorian era. For example, during these early days of 1856, he had already attended this same Photographic Exhibition the day before, and then spent five hours that evening at the Princess theatre. The day after his appointment, he and friend Reginald Southey went instead to visit Dr. Hugh Welch Diamond (1809-86) to obtain more photographs. See 1: 73-74 of the Diaries. Diamond was an early member of the Calotype Club, later the London Photographic Society. Like Jean-Martin Charcot in France, Diamond oversaw the female ward of the asylum and used photography as a tool of scientific positivism to diagnose and to catalogue his patients.
When Oliver Sacks considers the different visual disturbances that occur during a migraine aura, he argues that “[a] peculiar horror [...] may be associated with negative scotoma, which may be felt, not just as a failure of sight, but as a failure of reality itself” (94). But as various migraineurs have attested, and as Dodgson’s witnessing of the moving fortifications reveal, some sufferers experience a combination of seeing/ not seeing, or visibility and invisibility. Fortifications or other scintillating patterns appear, while other objects seem to disappear; but even a “blot” appearing in the visual field is may be qualified as “seeing” an object/entity. Might one be able to read these “disturbances in the visual field” not as a failure of sight, but as a failure of what is deemed as “reality”? 

The Victorians delighted in the way in which the emerging technology of photography, or “sun pictures,” could “capture” and “fix” people and moments in time, on glass and then on paper. Crary argues, in Techniques of the Observer, that the nineteenth century witnessed the reconstitution of sight, as devices such as the kaleidoscope, phenakistiscope, and stereoscope emphasized the embodiment of vision. Yet Carol T. Christ and John O. Jordan, in their “Introduction” to Victorian Literature and the Visual Imagination, maintain that competing models of visuality existed: “[…] neither an exclusively subjective nor an exclusively objective model provides a sufficient explanation for the Victorian idea of visual perception. Rather, the Victorians were interested in conflict, even the competition, between objective and subjective paradigms for perception” (xxiii). Daniel Novak echoes this idea of competing visualities: “[…] for

56 Crary also warns against privileging technology over the human senses: “[…] it would be a mistake to accord new industrial techniques primacy in shaping or determining a new kind of observer” (112).
many Victorian writers, far from capturing particularity and individuality, technologies of realism rendered its subjects at once dismembered and disembodied” (4).

Nineteenth-century doctors quickly appropriated the new technology into their medical theory and practices, maintaining that photographs provide an unmediated representation of material objects. Hugh Welch Diamond, the Superintendent of the Surrey Lunatic Asylum, was of the earliest physician-photographers of the nineteenth-century who employed the new medium for the taxonomy of gestures, facial expressions, and movement for other doctors to recognize the signs of madness. In his 1856 paper “On the Application of Photography to the Physiognomic and Mental Phenomena of Insanity,” he seems to consider the “fixed” image as a relatively living entity as well: “The Photographer […] needs […] no aid from any language of his own, but prefers rather to listen, with the picture before him, to the silent but telling language of nature. […] the picture speaks for itself” (2). Interestingly, Diamond advocates that one listen to the “talking bodies” of the patients, even as he subscribes to the positivist notion that language interferes with “objective” scientific work. He further recognizes that photographs enabled the gazing doctor (or metaphysician, in his words) “[…] to witness and trace out the connexion [sic] between the visible and the invisible […]” (3). Although the (meta)physician was the only one qualified to observe and to read/ listen to the images “correctly,” he seems to accept that the photograph will reflect something that reality does not, and that his own eyes may not detect. As will be remembered from chapter one, another physician, Hubert Airy, invokes photography to enhance his illustrations and narrative descriptions of scotoma: “[…] regarded as a veritable ‘Photograph’ of a morbid process going on in the brain, [the interest in teichopsia] cannot
be too strongly insisted upon” (264). Yet in attempting to “fix” teichopsia, Airy’s narrative only emphasizes the movement and the process of scotoma: “the boiling and the tremour are well seen” (257); “All the interior of the fortification […] was boiling and rolling about in a most wonderful manner as if it was some thick liquid all alive” (255). Indeed, Airy’s descriptions reflect the fluidity of using chemicals to gradually develop and unfold photographic images.

Yet photography also magnified for the Victorians what might be potential flaws of vision and “reality” itself. For example, when Queen Victoria arrived with her retinue at Oxford in December 1860, Dodgson reports that he was mildly horrified when he saw her “in person”: “I had never seen her so near before, nor on her feet, and was shocked to find how short, not to say dumpy, she is […] She is exactly like the little full-length photograph published of her” (Letters 1. 44; his emphasis).57 Such disappointment upon encountering (harsh) “reality” as revealed through a photograph is also registered in “Hiawatha’s Photographing,” Dodgson’s 1857 parody about the trials of a photographer and the unpleasant truth that photographs expose. The poem was republished in Phantasmagoria and Other Poems in 1869 and in in Rhyme? and Reason? in 1883 with illustrations by Robert F. Frost (Figure 3). “Failure” variably haunts the poem at the end of each stanza: “[…] the picture failed completely” (76; 111), and when he takes a “perfect likeness” of his subjects, they complain of its flaws: “‘the worst and ugliest picture/ That could possibly be taken./ Giving one such strange expressions!’” (138-40).

57 Dodgson displays his obsession with photography in this letter, stating that he has purchased the collection of photographs of the royal family, and detailing his (unsuccessful) pursuit of the Prince of Wales for a photographic sitting.
In the early days of practicing photography, Dodgson’s diary is obsessed with failure: “May 8 (Th) […] [Reginald Southey] and I took a portrait of Collyns, and, after several failures, he succeeded with my help […]” (1. 84); “May 15 (Th) Took several likenesses in the day, but all more or less failures” (1. 85); in 1857: “June 30. (Tu). Photographing and packing all the morning. Mrs. Liddell brought over the children about 12: all the pictures failed” (114). Of course Dodgson was just starting at this point, and was dependent upon daylight, chemicals, and getting people to sit long enough for the portrait. Nonetheless, the passages show a preoccupation with failed images of reality. As he became more adept with wielding the camera, however, Dodgson himself would stage occult photographs, fake photographs and “double exposure” hallucinatory images.

As scholars well know, Dodgson participated gleefully in the Victorian world of visual consumption. He regularly attended the theatre and pantomime shows; he also staged (domestic) shows himself, such as devising magic lantern shows for friends. His diary for December 31, 1856 reads, “First exhibition of the Magic Lantern: the largest audience I ever had, about eighty children, and a large miscellaneous party besides of friends, servants, etc. […] I introduced thirteen songs in the course of the performance, six for myself and seven for the children” (1: 98). He started practicing photography in 1856, immersing himself in the production, circulation, and private presentations of the new medium. When he was not taking photographs, he was hunting for subjects to photograph, trading photographs, (re)arranging his photograph albums and negative
collections, making lists of children to photograph, and attending public and private photography exhibitions.

The tensions between the competing models of “objective” and “subjective,” the clash between one’s sight and “reality,” and the exposing of the invisible all inform Dodgson’s photographic practice. For example, as much as he posed children in literary (“The Artful Dodger”), fairy-tale (“Little Red Riding Hood”), or Oriental costume (all of which distance and alienate these mostly female child-subjects as Other), many attest that Dodgson was a performer himself during their sessions. As Rosella Mallardi suggests, Dodgson’s glass-house became yet another stage set (548). His child-subjects recount that to put them at ease or distract them from boredom, Dodgson narrated impromptu stories and drew illustrations to accompany them. Alice Liddell Hargreaves (the “Alice” of the narratives) remembers, “When we were thoroughly happy and amused at his stories, he used to pose us, and expose the plates before the right mood had passed. He seemed to have an endless store of these fantastical tales, which he made up as he told them […]” (qtd. in Mallardi 551). Bodily performance, the orality of narrative, and writing and “capturing” were synonymous, then, for Dodgson. Indeed, he was a creator, collector, cataloguer, “curator” and viewer of objects.

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58 His diary for July 31, 1875 reads, “The week has gone in registering and arranging photos—about 10 h. work per day” (qtd. in Gernsheim 74).

59 A diary entry of March 25, 1863, lists the names of 107 girls that he wanted to photograph. Carol Mavor’s “Dream Rushes: Lewis Carroll’s Photographs of Little Girls” offers an astute analysis of Dodgson’s construction of young female’s sexuality in photography.
Figure 3: Illustration, Robert B. Frost, for Lewis Carroll, “Hiawatha’s Photographing,” 1883.

Figure 4: Photograph, Charles Lutwidge Dodgson, “The Dream,” 1863
(Courtesy of Royal Photographic Society)
Dodgson employed the collodion method of photography, which involved corrosive chemicals, polishing and coating glass plates, and nitrate baths (Gernsheim offers the process in full detail, pages 24-8). However technological, photography was often imbued with a sense of mystery, considered by some a “black art”—mostly (in scientific explanation) because the chemicals blackened the photographer’s hand, but also because the photographer move from the “glass house” to the dark-room for developing; indeed the images appearing on glass suggested the ephemerality of ghosts, images, specters. For example, Alice Liddell Hargreaves recalls that “[…] much more exciting than being photographed was being allowed into the dark room, and watching him develop the large glass plates. What could be more thrilling than to see the negative gradually take shape, as he gently rocked it to and fro in the acid bath? […]” (qtd. in Cohen, *Lewis Carroll*, 164-5). Carroll’s interest in ephemeral images was possibly also peaked by magic lantern performances he witnessed, in particular the “phantasmagoria” ghost projection onto smoke. Marina Warner describes the magic lantern devised by the showman Étienne-Gaspard Robertson (1763-1837), which he called the “Fantasmagorie.” He used a Fantascope projector, putting light sources in the projector and placing it behind a large, flat screen. He put this projector on rollers, so when he pulled it back, the images appeared to approach the audience. He used special effects like smoke, different lenses, as well as an Argand oil lamp rather than candles, thus increasing the brightness

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60 In “Hiawatha’s Photographing.” Carroll delineates the “mystic, awful” (15) process of photographic developing toward the beginning of the 1857 poem: “Mystic, awful was the process/ First a piece of glass he coated/ With collodion, and plunged it/ In a bath of lunar caustic/ Carefully dissolved in water;/ There he left it certain minutes./ Secondly my Hiawatha/ Made with cunning hand a mixture/ of the acid Pyro-gallic,/ And the Glacial Acetic,/ And of alcohol and water:/ This developed all the picture/ With a saturate solution/ Of a certain salt of Soda […]” (16-33). The poetic metre of the poem it parodies, Longfellow’s 1855 “The Song of Hiawatha.”
of his lighting sources for larger, public spaces. A favourite subject of his shows was the
terrors of the French Revolution. Images gradually taking shape on a glass plate or
ephemeral images projected onto smoke could also mimic the scotomatic lights that seep
into a migraineur’s periphery, or centre, of the field of vision. Fothergill speaks of “[…] a
singular kind of glimmering in the sight; objects swiftly changing their apparent position
[…]” (120). Regarding the dual nature of the visual disturbances, Liveing adds, “These
[ spectral] appearances are not visible at the commencement of the blindness, but they are
gradually developed as the blank spot expands” (75). Like Airy, he accentuates the
animation of the scotoma: “[…] some speak of it vaguely as a ‘glimmering,’ or of the
visual field being ‘all alive’ (75). The appearances of oscillating images on glass plates
invoke the phantasmagoric, spectral images of scotoma in the visual field.

Although many of Dodgson’s photographic images are crisp, clear, and carefully
arranged, he did experiment with the medium. For example, according to Gernsheim, as
already mentioned, he participated in the Victorian rage of “spirit” photographs, using a
figure draped in white for a part of the exposure (53; for Gernsheim, this experiment was
“another debasement of the young art” [53]). He also uses the technique of double-
exposure for an 1863 phantasmal photograph of the Barry children entitled “The Dream”
(Figure 4). A young girl sleeps in a chair, while “figments” of her dream are projected in
front of her. Another girl—the “awake” double of the sleeping girl herself—stares at her,
while a young boy kneels in front of the sleeping girl with his hand shaped like a gun.
The ghostly girl keeps her hand on the boy’s shoulder, as if she is trying to prevent—or

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61 See Warner’s discussion of Robertson’s innovative, supernatural special-effects in “Darkness Visible:
The Phantasmagoria” (in Phantasmagoria: Spirit Visions, Metaphors, and Media into the Twenty-first
Century 147-56).
facilitate—the boy’s threat of “assassinating” the sleeping girl. Certainly the boy’s presence poses a threat to the sleeping girl (as does her double), even though his image is the one that fades or melts more into the background. The image of the girl in the dream is stronger, with her billowy white dress and her stance over the boy. His position as “in-between” the girls represents an obstruction; perhaps the boy occludes (scotomizes) something that the little girl does not want to see. The image of the “awake” girl of the dream looking at herself sleeping, also recalls Lacan’s arguments about méconnaissance and the scotomatization of the subject; here the “split” of the consciousness is pictorially enacted and embodied. The projection of the dream girl constitutes a split and a doubling of the subconscious, but the stance and action of the double also reveals an awareness of a (perhaps future) threat or danger hovering over the sleeping girl.

2.4 Scotoma and Word/ Image

Dreaming and danger, doubles and in-betweens, are central themes of Lewis Carroll’s fiction for children, particularly in the Alice books. Scholarship has long recognized the inextricable link between Dodgson’s photography and Carroll’s narration. Rosella Mallardi argues that photography allowed him to

[…] abandon […] the idea of [narrative] development as logical progression and replacing it with the revelation of hidden potential, that is of those factors and phenomena that elude the control of the eye/I. Corresponding to the homophony of the eye and the I, Carroll conceives the first as a frontier of the visible/invisible and the second as a moment between waking and dreaming […] (558).

From a similar standpoint, Marina Warner, in Phantasmagoria: Spirit Visions, Metaphors and Media into the Twenty-First Century, contends that “in his other persona of Lewis
Carroll, Dodgson turned habitual modes of photographic representation—mirror inversion, miniaturization and suspension of time—into the conditions of Wonderland and Looking-Glass Country” (16). While his migraines cannot be said to have directly influenced the play with perception in his creative writing, the “curious optical effect” of seeing fortifications, phantasmagoria, doubles and disturbances in the visual field offer another lens for reading his prose. Lewis Carroll uses unique illustrations and typesetting, the language of photographic developing, and narrative play to “unmake” the spatial and temporal zone of Wonderland and reveal ways of interpreting the liminal—scotomatic—spaces of Alice’s Adventures in Wonderland and Through the Looking Glass.

Let us consider one example of Carroll’s play on space and time: the appearance and the reappearance of the Cheshire Cat in Alice’s Adventures in Wonderland. One could argue that his narrative description of the cat with its wide smile suggests a scotomatic experience: “[...] I wish you wouldn’t keep appearing and vanishing so suddenly: you make one quite giddy!’ ‘All right,’ said the Cat; and this time it vanished quite slowly, beginning with the end of the tail, and ending with the grin, which remained some time after the rest of it had gone” (59). Scholars have persuasively related this particular passage to the appearance of images on the glass plate; again, Warner argues, “With dissolves and fades and metamorphoses of this sort, Carroll the photographer introduced cinematic techniques into storytelling” (153). Of course the illustration is “fixed;” the cat appears among the leaves in Tenniel’s drawing, but he catches the cat in a moment of transience (Figure 5). This transience also echoes the movement of scintillating scotoma; the Cheshire Cat’s grin invokes similarities to the way physicians mapped “fortifications,” especially the fortifications as “teeth” devouring the visual field
(Hubert Airy 256; Figure 2). Another illustration or word/image experiment in Alice in Wonderland, the typographic placement of the narrative of “The Mouse’s Tale” (or “Long Tale”, Figure 6), the flow of text mimicking an undulating mouse’s tail, further invokes the zig-zag oscillations of the edge of fortifications. Carroll’s original handwritten manuscript Alice’s Adventures Under Ground (1862-1864) contained his own illustrations, including this play on language and form (Figure 7).

Alice in Through the Looking Glass experiences at several junctures the sensation of “melting,” usually as she shifts from one place to another. References to “melting,” to disappearing and reappearing, belong to the neurological language of migraine; they also belong to the theory and practice of nineteenth-century photography. As Alice peers into the mirror, for example, her field of vision becomes blurry: “And certainly the glass was beginning to melt away, just like a bright silvery mist” (128). The melting glass and silvery mist conjures up the process of developing pictures using the collodion process; but the perception that objects are melting is also reminiscent of a scotomatic experience.

Many scholars have written about the relationship between Carroll’s words and John Tenniel’s illustrations for the Alice books.62 Carroll was careful about the construction of his books, involved not only in the narration, but also in all aspects of book-making: the illustrations, the printing process, the binding. Hancher definitively demonstrates (and Dodgson’s letters reveal) that Tenniel indeed studied Carroll’s images

62 See, for example, Nina Auerbach and Mou-Lan Wong. Michael Hancher’s text is devoted to Carroll and Tenniel’s relationship, as well as Tenniel’s position in Victorian society as an illustrator for Punch magazine; he further offers comparisons between Carroll’s own drawing for the manuscript Alice’s Adventures Under Ground, and an analysis of the first published edition.
in the manuscript for the illustrations in the published *Alice's Adventures in Wonderland* (Hancher 27-39; 100-6; and 120-32).

Figure 5: Illustration, Sir John Tenniel, “Cheshire Cat,” *Alice’s Adventures in Wonderland*, 1865
We lived beneath the mat
Warm and snug and fat
But one wee, that
Was the cat!
To our joys
a clog, In
our eyes a
fog, On our
hearts a log
Was the dog!

When the
cat's away,
Then
the mice
will
play,
But, alas!

one day, (So they say)
Came the dog and
cat, Hunting
for a
rat,
Crushed
the mice
all flat:
Each
as
he
sat.
Underneath the mat, Away

Figure 6: “Mouse’s Tale,” Alice’s Adventures Under Ground, 1864
(Courtesy of British Library)
Alice, ‘and why it is you hate—C and D,’ she added in a whisper, half afraid that it would be offended again. 'Mine is a long and a sad tale!' said the Mouse, turning to Alice, and sighing.

'It is a long tail, certainly,' said Alice, looking down with wonder at the Mouse's tail; 'but why do you call it sad?' And she kept on puzzling about it while the Mouse was speaking, so that her idea of the tale was something like this:—

'Fury said to a mouse, That he met in the house, “Let us both go to law: I will prosecute you.” Come, I'll take no denial: We must have the trial; For really this morning I've nothing to do.” Said the mouse to the cur, “Such a trial, dear sir, With no jury or judge, would be wasting our breath.” The cur said, “I'll be judge, I'll be jury,” and said nothing more. Fury: “I'll try the whole cause, and—”

Figure 7: “Mouse’s Tale” Oxford Edition, Alice’s Adventures in Wonderland, 2008
Not only do the narration and illustrations convey Alice’s movement through Wonderland and her physical transfigurations, but the white space combined with a constellation of signs—asterisks—also signal these movements and changes. Her transfigurations are signaled not only linguistically and visually, but also spatially through these “gaps.” Such gaps particularly appear when Alice eats or drinks something and changes body size, and amplify the either/or alternatives. The white space plus asterisks constellation at these junctures recur in many printed editions of the Alice texts; moreover, the combination appears in the original manuscript (Figures 8 and 9). The white space and asterisks function together, as both *image* and *narrative*, at moments in which Alice becomes a “volatile body.”

The constellation and white space materialize first, after Alice sips from the “DRINK ME” bottle. Her shape-shifting begins as the narrative resumes, “‘What a curious feeling!’ said Alice. ‘I must be shutting up like a telescope!’” (14). Not long after she shrinks to ten inches high, she discovers the cake marked “EAT ME”: “So she set to work, and very soon finished off the cake” (15). Again, the white space and asterisks appear; at this point in the Oxford edition, a chapter *and* page break occur, which extends the white space (Figure 10). The manuscript indicates Carroll again envisioned white space and asterisks to signal movement, even though he does not include a chapter break. The final moment/placement of the white space plus asterisk combination occurs with another transfiguration, as Alice eats both sides of the mushroom to adjust her body size.

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63 Neither Hancher nor Wong discusses white space in their analyses of the narrative, illustrative, and layout roles of the text. They also do not discuss the asterisks, which for me function as another illustration, or *image*. 
she had never forgotten that, if you drink a 
bottle marked "poison", it is almost certain 
to disagree with you, sooner or later.

However, this bottle was not marked 
poison, so Alice tasted it, and finding it very 
nice, (it had, in fact, a sort of mixed flavour 
of cherry-tart, custard, pine-apple, roast 
turkey, toffy, and hot buttered toast,) she very 
soon finished it off.

* * * * * * *

"What a curious feeling!" said Alice, 
"I must be shutting up like a telescope."

It was so indeed: she was now only 
ten inches high, and her face brightened up 
as it occurred to her that she was now the 
right size for going through the little door 
into that lovely garden. First, however, she 
waited for a few minutes to see whether 
she was going to shrink any further: she 
felt a little nervous about this, "for it 
might end, you know," said Alice to herself, 
"in my going out altogether, like a candle, 
and what should I be like then, I wonder?"

Figure 8: “Drink Me,” White Space/ Asterisks, Alice’s Adventures Under Ground, 1864

(Courtesy of British Library)
quite dull and stupid for things to go on in the common way.

So she set to work, and very soon finished off the cake.

* * * * *

"Curiouser and curiouser!" cried Alice, (she was so surprised that she quite forgot how to speak good English.) "Now I'm opening out like the largest telescope that ever was! Goodbye, feet!" (for when she looked down at her feet, they seemed almost out of sight, they were getting so far off.) "Oh, my poor little feet, I wonder who will put on your shoes and stockings for you now, dears? I'm sure I can't! I shall be a great deal too far off to bother myself about you: you must manage the best way you can — but I must be kind to them," thought Alice, "or perhaps they won't walk the way I want to go! Let me see: I'll give them a new pair of boots every Christmas."

And she went on planning to herself how she would manage it.

Figure 9: “Eat Me,” White Space/ Asterisks, Alice’s Adventures Under Ground, 1864

(Courtesy of British Library)
red-hot poker will burn you if you hold it too long; and that,
if you cut your finger very deeply with a knife, it usually bleeds;
and she had never forgotten that, if you drink much from a
bottle marked 'poison,' it is almost certain to disagree with
you, sooner or later.

However, this bottle was not marked 'poison,' so Alice
ventured to taste it, and, finding it very nice (it had, in fact,
a sort of mixed flavour of cherry-tart, custard, pine-apple,
roast turkey, toffy, and hot buttered toast), she very soon
finished it off.

* * * * *

"What a curious feeling!" said Alice. "I must be shutting up
like a telescope!"

And so it was indeed: she was now only ten inches high,
and her head came up above the little door into that lovely
garden. First, however, she waited for a few minutes to see if
she was going to shrink any further: she felt a little nervous
about this; "for it might end, you know," said Alice to herself,
in my going out altogether, like a candle. I wonder what
I should be like then? And she tried to fancy what the flame
of a candle looks like after the candle is blown out, for she
could not remember ever having seen such a thing.

After a while, finding that nothing more happened, she
decided on going into the garden at once, but, alas for poor
Alice! when she got to the door, she found she had forgotten
the little golden key, and when she went back to the table for
it, she found she could not possibly reach it: she could see it
quite plainly through the glass, and she tried her best to climb
up one of the legs of the table, but it was too slippery; and
when she had tried herself out with trying, the poor little thing
sat down and cried.

"Come, there's no use in crying like that!" said Alice to her-

self rather sharply. "I advise you to leave off this minute!" She
generally gave herself very good advice (though she very
seldom followed it), and sometimes she scolded herself so
severely as to bring tears into her eyes; and once she remem-
bered trying to box her own ears for having cheated herself
in a game of croquet she was playing against herself, for this
curious child was very fond of pretending to be two people.
"But it's no use now," thought poor Alice, "to pretend to be
two people! Why, there's hardly enough of me left to make
one respectable person."

Soon her eye fell on a little glass box that was lying under
the table: she opened it, and found in it a very small cake, on
which the words 'EAT ME' were beautifully marked in currants. "Well, I'll eat it," said Alice, "and if it makes me grow
larger, I can reach the key; and if it makes me grow smaller,
I can creep under the door: or--either way I'll get into the
garden, and I don't care which happens!"

She ate a little bit, and said anxiously to herself 'Which
way? Which way?,' holding her hand on the top of her head
to feel which way it was growing; and she was quite surprised
to find that she remained the same size. To be sure, this is
what generally happens when one eats cake; but Alice had
not so much into the way of expecting nothing but out-of-the-
way things to happen, that it seemed quite dull and stupid for
life to go on in the common way.

So she set to work, and very soon finished off the cake.

* * * * *

Figure 10: White Space/ Asterisks, Oxford Edition. Alice’s Adventures in
Wonderland. 2008
The manuscript, and the editions that follow, make clear that the illustration that follows is Alice’s stretching neck. Carroll employs a similar typographical and spatial strategy in *Through the Looking Glass*. I have already gestured toward the “melting” that occurs throughout this text, such as when Alice slips through the looking glass. Carroll intended for his books to be interactive; he fully expected that his readers would engage in collaborative play with him in the Alice books (indeed, many of his creative writings prompt such engagement). As Hancher (130-31) and Wong (142) both demonstrate, the illustrations of Alice moving through the mirror were to be placed back-to-back, so that a reader is forced to turn the page as Alice moves through the looking glass. Moreover, Wong argues that the exact placement of word and illustration in the first edition, combined with the reader’s hand movement, allows the reader to immerse him/herself physically in the text, following Alice. Other physical movements of Alice’s progress are signaled by permutations of white space/asterisk and melting occurs during Alice’s train voyage: “In another moment she felt the carriage rise straight up into the air, and in her fright she caught at the thing nearest to her hand, which happened to be the goat’s beard. But the beard seemed to melt away as she touched it […]” (152). Hélène Cixous also emphasizes Alice’s melting, her movement “by means of melting and dispersal” (241). The white space and asterix typographically visualize the melting and dissolving process, another phantasmagoric play on words and ephemeral images.

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64 While remaining as faithful as it can to the first edition, some differences in layout in the Oxford edition are inevitable. A key difference involves the two illustrations for *Through the Looking Glass*. At the pivotal moment in which Alice moves through the mirror, the Oxford edition lays out the two images on facing pages.
The constellation of white space and asterisks does not appear every time that Alice’s body changes in Wonderland. Nor does Carroll use the combination to indicate a break in the narrative, a temporal or spatial shift, or a new chapter; for example, when Alice follows the White Rabbit, the narration submerges readers as immediately as Alice falls into the rabbit hole. Moreover, when Alice wakes up from her dream in her Adventures, Carroll signals that her tale has ended, with the narrative frame of her sister’s musing, as well as visually through white space, for a line divides Alice’s tale and her sister’s in the manuscript. So why does the white space and asterisk constellation occur at these points, and why do they appear at all? What is happening in these not-quite-blank, “empty” yet symbolically charged spaces?

These moments of ruptures/ interruptions—rather continuations, movement—of both linear (typed) narrative and space mimic a form of “transient hemiopsia,” which can be useful for reading (and seeing) these spaces. They are simultaneously “scintillating” (with the stars indicating the eye’s hallucination of bright lights) and “negative (with the “empty” white space, blotting out words or images—and the typed words may be seen as images here—in the field of vision). As mentioned in the first chapter of this dissertation, Victorian physicians such as Hubert Airy qualify transient hemiopsia as an obliteration of the visual field; Airy offers his own experience as scientific evidence: “[...] I become aware that part of the letter I am looking at, or a word at some little distance from the sight-point [...] is eclipsed by a dim cloud-spot that would not be noticed except for this obliteration” (Airy 356). While objects are not obviously obliterated in these gaps—words are not eliminated, for example—they signal a transience regarding something that cannot or will not be articulated in language or fashioned in a picture.
At these points the reader also witnesses Alice’s awareness of the “Other”—or rather, we see that she is being made to be aware that she is aware of a difference between her body/materiality and others—but at this same moment of awareness, her “awareness” of herself is lost—or rather, blurred. In this context one may ask: Is Alice scotomized as a subject at this point, or even obliterated from the reader’s field of vision? Do the asterisks and white space indicate such a “blotting out”?

Carroll’s interest in identity in the Alice books, particularly in Wonderland, is well known. Gilles Deleuze argues that the reversals Alice encounters “as they appear in the infinite identity have one consequence: the contrasting of Alice’s personal identity and the loss of her proper name” (3). Moreover he asserts, “[…] the entire first half of Alice still seeks the secrets of events and of the becoming unlimited which they imply […]” (9). Nina Auerbach points out that Alice alone, of all the girls who find themselves in fairytales in the nineteenth century, asks not “‘where am I’” but “‘who am I?’” (33; Auerbach’s emphasis). Auerbach further point out that even outside of Wonderland, Alice remains doubled, speaking in two voices (33) and pretending to be two people (AAiW 15). Additionally, in Through the Looking Glass, Alice is advised, “[…] remember who you are!” (147).

Identity in Alice’s Adventures in Wonderland is a game that troubles the eponymous heroine often: “I wonder if I’ve been changed in the night? Let me think: was I the same when I got up this morning? I almost think I can remember feeling a little different. But if I’m not the same, the next question is ‘Who in the world am I?’ Oh, that’s the great puzzle!” (18; Carroll’s emphasis). Alice’s hedging in this self-analysis—“I almost think I can remember feeling a little different—combined with various verbs of
sensation and consciousness—“I think I can remember feeling”—demonstrate at this point, at least, she has almost-but-not-quite convinced herself that a change has occurred and that she has experienced it. She then proceeds to identify herself in terms of difference from others: “And she began thinking over all the children she knew that were the same age as herself to see if she could have been changed for any of them” (18).

Alice “sorts” herself among her peer group, specifically in age and gender. She does not, for example, consider that she might have turned into her older sister; and boys do not appear in Wonderland—although the phallic nature of the illustrations, signal something different—for example, the one in which her neck stretches. Furthermore, Alice compares herself to others not only in terms of appearance but also education: “‘I’m sure I’m not Ada,’ she said, ‘for her hair goes in such long ringlets, and mine doesn’t go in ringlets at all; and I’m sure I ca’n’t [sic] be Mabel, for I know all sorts of things, and she, oh, she knows such very little! Besides, she’s she, and I’m I [...]” (18; Carroll’s emphasis). Alice, then, finds that the common markers by which she ‘knows herself’—appearance, and her education/rearing, her learning and recitation—are quite useless.

As will be recalled from chapter one, Lacan employs the term “scotoma” to refer to the limitations of human consciousness, which he believed to be prone to a misrecognition of itself, a “méconnaissance,” an illusion of an autonomous self (the mirror itself is already a distortion of an image). Lacan extends theories about misrecognized doublings and distortion in when discussing the function of the gaze. Critic Martin Jay emphasizes that Lacan’s concepts of “the gaze” and “the Other” are significant in this theory of misrecognition (Jay 353-61). In “Anamorphosis,” Lacan again asserts, “Psycho-analysis regards the consciousness as irremediably limited, and
institutes it as a principle, not only of idealization, but of *méconnaissance*, as—using a term that takes on new value by being referred to a visible domain—*scotoma*” (*Four Fundamentals* 82-3). Using an example from Sartre’s text *L’Être e le Néant* to make the argument that the gaze “sees itself,” Lacan emphasizes the [difficulty] of optic mastery: “the gaze seems to possess such a privilege that it goes so far as to have me scotomized [...] The gaze I encounter [...] is, not a seen gaze, but a gaze imagined by me in the field of the Other” (*Four* 84). The *imagination* of an Other’s gaze is the key for Lacan’s interpretation of scotoma.

Perceived through a Lacanian lens, then, Alice becomes a scotomized subject, because she attempts to remain “whole” by differentiating herself from others, by reasoning “But she’s she, and I’m I [...]” (18; Carroll’s emphasis). She experiences the “illusion of *seeing [her]self see [her]self.*” Critic Martin Jay also reminds us that “[s]cotomization [...] suggests that an actual blindspot occurs when something is too threatening to be seen” (356). Alice is menaced throughout *Wonderland*, before her moments of bodily change, as exemplified when she attempts to figure out the correct way to eat the mushroom: “The next moment she felt a violent blow beneath her chin: it had struck her foot! She was a good deal frightened by this sudden change, but she felt there was no time to be lost, as she was shrinking rapidly [...]” (46). After the constellations and white space, she exclaims with delight that she is “free at last!” (46), but this tone “changed to alarm in another moment, when she found that her shoulders were nowhere to be found: all she could see, when she looked down, was an immense length of neck [...]” (47). In addition to the immediate fright she experiences, her
corporeal changes often signal, for critics, fears of other (“real”) changes: mainly, sexual maturation, and death. 65

I mentioned before that the typographical “gaps” occur at moments when Alice becomes a “volatile body.” This phrase brings into play the theories of Elizabeth Grosz, who in her *Volatile Bodies: Toward a Corporeal Feminism* (1994), traces Western philosophical tradition regarding thought, perception and materiality, to investigate the ways in which these have been constructed and how they might be incorporated into or modified by feminist theory. Chapter 7, “Intensities and Flows,” examines Deleuze and Guattari’s theories, particularly the idea of Body Without Organs. In the examples of “becoming” (or becoming unlimited), Grosz notes that “[...] the figure of resistance they advocate is the little girl” (74); specifically “[...] the girl as the site of the culture’s most intensified disinvestments and recasting of the body” (75). I would like to suggest that if these spaces are ones in which Alice is scotomized, they are also moments in which she is “becoming unlimited,” to use Deleuze’s phrase, which I think amplifies the transient aspect of scotoma. There is a blind spot, indeed, but also a movement, for Alice, and for readers as well. There may be something about the changes in a girl’s body that is blotted out for readers (especially Victorian readers). However, I would conclude, the inexorable movement (as indicated by scotoma) also creates a new perception and mode of seeing, however frightful or painful.

65 As Hélène Cixous argues, it is tempting to read Alice through the mirror stage; however, Alice does not simply look or gaze into the looking glass—she moves right through it: “[...] Alice crosses the mirror from side to side, and the surface, as it gives way, makes possible an *inverted reading* of the world” (238). Again, Lacan’s point though is that the image already constitutes a distortion.
Chapter 3

“L’Œil Gauche Barré:” Migraine, Visual Fields, and Émile Zola’s Naturalism

“L’artiste n’est qu’un réceptacle de sensation, un cerveau, un appareil enregistreur” Cézanne

“Even the most naïve of the Realists [...] would nauseate a generation.” Ferragus

“What is it that makes Mr. Zola keep charging off to do battles with windmills?” Fernand Brunetière

“When France sneezes, Europe catches a cold,” Klemens von Metternich said regarding the revolutions of the nineteenth century. One of the more virulent illnesses (according to some critics, then and now) that European writers caught was Naturalism. The attacks on Naturalism and its central proponent, Émile Zola, were visceral and viral, replicating the very discourse and images that the critics found so reprehensible. Many intellectuals of mid-to-late nineteenth century France, and critics of the following century, have diagnosed the era as “ill.” Diverse cultural historians have also demonstrated that advancements in medicine, particularly neurology (and later psychology) fascinated and at times repulsed novelists of the later nineteenth-century. Drawing from the emerging scientific discourses and practices of his day, Émile Zola equated his artistic methodology with the performances of vivisectionists, surgeons, and cerebral locationists.

66 For example, see Ferragus, alias of Louis Ulbach, who berates the nineteenth-century for being sick and monstrous. As will be discussed later, Zola himself also considered the age to be “sick.”

67 For examples of scholarship that concern this fascination with European (particularly French) medical discourse and practice, see, for example, Elaine Showalter The Female Malady; Georges Didi-Huberman The Invention of Hysteria; Michel Foucault Madness and Civilization, and The Birth of the Clinic; and Sander Gilman Disease and Representation.
Fin-de-siècle scientific and aesthetic explorations regarding the physiology of perception, often (although are not limited to) involve the sensory world of sight, mark the migraine a significant condition of the era. As mentioned earlier in the thesis, for medical historian Esther Lardreau, migraine embodied the malaise of French being and nationhood in the nineteenth century: “‘on peut dire que la France est la patrie de la migraine’ [8]. Pour le dix-neuvième siècle français, qui sort de la Révolution, et de la Terreur, la migraine est problématique, et renvoie une grimace des fractures, sociales ou sexuelles: maladie des beaux esprits, maladie de la femme mal mariée, maladie de la bourgeoisie” (n.pag.; “‘one may say that France is the homeland of migraine’ [8]. For nineteenth-century France, after the Revolution and the Terror, migraine was a real problem, and was a grimacing image of the various fractures in the country, be they social or sexual. It was the disease of intellectuals, the disease of ill-married women, the disease of the bourgeoisie”). Anxieties regarding fragmented vision, bodies, and consciousness render migraine a potent symbol for anxieties that accompanied technological, national and social shifts in nineteenth-century modernity.

As already touched upon briefly by French studies scholar Susan Harrow, references to migraine appear throughout Zola’s oeuvre, often figuring as signs for a breakdown in political and social action. Scholars have long recognized Zola’s obsession with the intersection of vision, narration, and neurology. The literary critic and feminist theorist Naomi Schor argues, “The window is a neuralgic point where Zola’s aesthetic, sexual and political concerns intersect” (1969, 47). Neurological conditions such as 68

migraine in his works also frequently point to larger breakdowns of a social, sexual or political nature. As I will discuss later in this chapter, the pleasure of looking and the punishment of characters for illicit acts of vision are also linked to the representation of migraines in Zola’s novels. Several critics have equated migraine in Zola with the prohibition regarding looking; for example, in a footnote in her essay about *La Curée*, Harrow observes, “The body stages the experience of visual overload as a migraine. Likewise, the somatic translation of the interdiction on seeing, produces, literally, a ‘blinding’ headache” (261). Indeed, as I analyze in this chapter, Zola’s scotomatized subjects experience moments of *méconnaissance* and punishments for looking, but their migraines also render them exceedingly susceptible to moments of clear perception.

Jonathan Crary’s work regarding the history of visuality and modes of perception is particularly pertinent for this chapter. In his essay “Modernizing Vision,” Crary points out that the demise of the *camera obscura* model of perception—which emphasized a split between the object and the viewer, lending primacy to a monocular “geometrical optics” rather than a multiplicity of sensory data received by the body—occurred early in the nineteenth century, before the new technology of photography exerted its influence on theories of perception. When scientists began to make distinctions between different nerves and their connections to senses, Crary argues, an ontological shift occurred:

> The body, which had been a neutral or invisible term in vision now was the thickness from which the knowledge of vision was derived. This opacity or carnal density loomed so suddenly into view that its full consequences and effects could not be immediately realized. But it was this ongoing articulation of vision as nonveridical, as lodged in the body, that was a condition of possibility […]. (43)
Medical breakthroughs, in addition to the development of new technologies and changing philosophical thought, began to blur the Cartesian boundary between mind and body.

As studies of the brain, the nervous system, and optics revealed more knowledge about the workings of human physiology, the epistemology regarding the constitution of the observer also shifted. In *Suspensions of Perception: Attention, Spectacle, and Modern Culture* (1999), Crary outlines the ways in which nineteenth-century Western scientific and technological discoveries relating to sight and perception altered human beings’ assumptions regarding visuality, attention, and the body/mind split: “from the mid-1800s on, perception is fundamentally characterized by experiences of fragmentation, shock, and dispersal” (1). The experiences of fragmentation, shock and dispersal are significant aspects of migraine, and the discoveries regarding optics and the physiology of human vision might point to why the nineteenth century saw more medical treatises devote attention to scotoma. Crary further isolates two important facets of this ontological shift: the aforementioned erasure of the traditional, Cartesian mind/body split, and paradoxically, the way that vision, like other senses, could be measured (2). As he points out, “[w]ith the collapse of the camera obscura model of vision and the emergence of physiological optics, it became increasingly clear that perception was not a matter of a relatively passive reception of an image of an exterior world, but that the makeup and the capacities of an observer contributed to the making of perception” (155). Writers of the late nineteenth-century, then, are not merely reduced to observers, as Georg Lukács charges (discussed below); they are participants within and cartographers of an ontological shift regarding perception.
It would seem that Zola himself apprehended the artist’s role in relation to this shift, although he does not articulate it in the same manner as Crary. The first part of this chapter thus, is concerned with Zola’s own theories regarding his creative endeavour. I explore the premises and critical reception of Zola’s naturalism, review his critical quarrels with Naturalism, and place these debates in dialogue with one another, then review recent critical recuperations of Zola’s impact upon nineteenth-century French literature. The second part of this chapter examines the presence of migraines and migraineurs in novels of the Rougon-Macquart cycle, specifically *La Curée* (1872), *Pot-Bouille* (1882), *L’Œuvre* (1886), and *La Bête humaine* (1890), with some analysis of migraine’s “allied disorders,” specifically the young female’s hysteria in *Une page d’amour* (1878).

### 3.1 Ink, Blood, and Mud: “L’odeur du peuple”

When a young Émile first met aesthetes Edmond and Jules de Goncourt in 1868 at the age of twenty-eight, he had managed to become one of the most despised writers of the era—even before the Rougon-Macquart cycle made its appearance. He would continue to be a lightning rod for literary and social debates for the later nineteenth century. Zola was an admirer of Flaubert, Baudelaire, and the Goncourts themselves, as well as a novelist and pugnacious journalist of art and politics. In a journal entry, the Goncourts use a Naturalist lens to analyze Zola, appraising him more as a “weak” character of fiction than a living being:
Our immediate impression was of a Normalien\(^{69}\) [...] When we looked more closely, however, we saw that the sturdy young man’s head was rather finely modelled [...] he was like one of those vivid characters in his books, those complex beings who are occasionally a little feminine in their virility. Then, what is striking about him—given his build—is that there is something ailing, puny, ultra-nervous in him, that gives you a sharp feeling [...] of being in the company of a rebellious and unhappy victim of some ailment of the heart. In a word, a restless, disquieted, profound, complicated, evasive man, hard to read. (264)

In keeping with a Naturalist’s obsession, the body is under full, microscopic display. At first impression, Zola is a “sturdy young man” but signs of health (the finely modeled head) become insidiously undermined by signs of “illness” (the writer appears frail and small). The Goncourts’ view of Zola as crossing gendered boundaries—he is also nervous and “feminine” in his virility—also reflects some of the age’s anxiety regarding changing gender roles and the nature of masculinity. The passage reveals not only the Goncourts’ fascination (a morbid fascination, according to Erich Auerbach) with diagnosing the nervous conditions of their era; it also reveals strategies of observing, reading, and interpreting, strategies that are important for apprehending the naturalist method. Significantly as well, the Goncourts, alert as they are to nuances, find Zola “hard to read.” Such inscrutability points not only to the fallibility of the scientific positivism in which the Naturalists put faith, but also to the tenuous nature of perception and interpretation.

Indeed, the Goncourt brothers’ sketch of Zola and fascination with the body in all its transmutations—and the ways in which medical, political, and economical discourses of the era attempted to control the body—could almost be seen as a parody of Naturalism. Zola’s contemporary critics associated his work with illness, waste, and contagion, employing the very tropes and symbols of Naturalism against the movement itself. As Norman L. Kleebatt points out, Zola was the most caricaturized figure of his day, and more often than not cartoons in the press depicted Zola amid images of sex, muck, and 
merde (54). The cover of Henri Mitterand’s folio-classique edition of Pot-Bouille (1882) depicts Zola stirring a pot stewing with women’s legs, human rumps, and flies, while the writer’s quill drips with ink, mud, and blood. This caricature by André Gill first appeared in the French satirical journal La Nouvelle Lune on April 20 1882 (Figure 11). One of the first virulent verbal attacks upon Zola’s fiction appeared in Le Figaro, on January 28 1868, entitled “Putrid Literature.” The reviewer (Louis Ulbach, under the pseudonym Ferragus) denounces in vitriolic terms a new “monstrous school of novelists”—which included Zola, the Goncourt brothers, and Ernest Aimé Feydeau—who are conspicuous in an age that he marks as already “blasé, perverted, lethargic, and sick” (Baguley 1986 25). Another Le Figaro article by critic Paul Bonnetain et. al. (August 18, 1887) degenerates from a literary review to a call to diagnose Zola’s health:

70 Emily Apter also draws attention to the way cartoonists caricatured Zola during the Dreyfus affair that preoccupied France in the late 1890s, demonstrating that in anti-Semitic drawings Dreyfus and his supporters are reduced to animals (96-8).

71 And probably merde.
Figure 11: Caricature, André Gill. “Le Pot-Bouille à Zola.” *La Nouvelle Lune*, 1882
“Perhaps Charcot, Moreau (of Tours) and the doctors of the Salpêtrière Hospital who have given us studies of coprolaliacs might be able to hit upon the symptoms of [Zola’s] illness. [After La Terre], [w]e can expect nothing from the Rougon-Macquart [...] the famous genealogical tree spreads out its sickly arms and will henceforth bear no fruit” (qtd. in Baguley 1986 63). Others castigate Zola’s intellectual authority; for example, prominent critic Ferdinand Brunetière sneers that Zola seems to know every word in the French language but does not know how to use them (34), concluding, “Mr. Zola’s great misfortune is that he is absolutely lacking in a literary education and in a philosophical background” (36).

In Victorian Britain, even writers who enjoyed dismantling the establishment, like Algernon Charles Swinburne and Oscar Wilde, objected to Zola’s material and method. Swinburne expresses mortification that any poem of his might be printed in the same journal in which L’Assommoir was being serialized, arguing that Zola’s novels includes material “which might almost have turned the stomach of Dean Swift,” (Swinburne, in Baguley 1986 31). Wilde’s character Vivian, in the dialogue “The Decay of Lying,” finds Zola’s stylistic approach more distasteful than the supposed immorality of the subject matter: “[...] the modern novelist presents us with dull facts under the guise of fiction. [...] [The writer] has his tedious document humain, his miserable little coin de la création, into which he peers with his microscope’ ” (17; 6). Regarding Zola’s aesthetics (or lack thereof) Vivian pronounces, “‘Mr. Ruskin once described the characters in George Eliot’s novels as being like the sweepings of a Pentonville omnibus, but M. Zola’s characters are much worse. They have their dreary vices, and their drearier virtues. [...] We don’t want to be harrowed and disgusted with an account of the doings of the lower
orders’ ” (10). Vivian faults the reductive nature of Zola’s theory and method, both of which were more sociological in their approach than aesthetic. Yet a decided bias regarding class differences also informs this criticism; labourers and poverty-stricken outcasts are unworthy subjects of literature.

For renowned scholar Erich Auerbach, Zola’s inclusion of the working classes as subjects worthy of literature qualifies him as one of the central innovators in the development of realism. In the “Preface” to L’Assommoir, for example, Zola himself asserts the novelty of the material: “C’est une œuvre de vérité, le premier roman sur le peuple, qui ne mente pas et qui ait l’odeur du peuple” (18; “It is a work of truth, the first novel about the common people that does not lie and that smells of the common people” [3]). True, Zola is self-advertising here, but he is also giving the reader the “secret” to his innovations; it is an imperative that readers participate in the autopsy. Zola clearly wishes to appeal to the reader’s senses (“smells” of the people), although the appeal is indeed embedded in prejudices regarding the common people. Auerbach considers the mixing of styles, of high (tragedy) and low (comedy) literature, one of the hallmarks of Western mimesis, and regards Zola as one of the few writers who created art based upon the

72 Despite dismissing the fate of Zolian characters, some of Wilde’s characters are doomed and ultimately punished for their transgressions of Victorian mores; the obvious example is Dorian in The Picture of Dorian Gray. Zola’s Maxime Saccard, of La Curée, exhibits some of Gray’s qualities. With his ennui, his languid postures and luxurious tastes, and his preternatural, youthful beauty, Maxime mirrors a late-Victorian dandy in several ways.

73 Here, I echo Edward Said’s wonder (in his “Preface” to the fiftieth-anniversary edition of Mimesis) as to why British novelists were not explored in more depth. Several British Victorian novelists, Charles Dickens and Elizabeth Gaskell for example, feature working and poverty-stricken classes. Yet they do not dwell in detail, as Zola does in Thérèse Raquin, for example, upon the decay of a drowned body on display at the morgue. Novelists of later nineteenth-century Britain explicitly employed fiction for political ends, such as the New Women writers. The fifth chapter of this dissertation examines the transmutations of Zolian naturalism in the British writings of George Gissing and Sarah Grand.
socio-economic realities of the nineteenth century (491; 512). However, he holds that “[... ] Zola by no means put forth his art as ‘of the low style,’ still less as comic. Almost every line he wrote showed that all of this was meant in the highest degree seriously and morally” (510). French authors had already published fiction involving harrowed, poverty-stricken characters, like the Goncourt brothers with *Germinie Lacerteux* in 1865; but Zola remains particularly insistent and vocal in his aim to portray a vivid, multi-sensory portrait of the common people.

Schooled in the aggressive milieu of the French press, Zola frequently found himself writing articles about politics, art, and fiction, expounding his theory and method of fiction-writing in the process. These defenses frequently function as prefaces to his novels, most famously in *Thérèse Raquin* (1867) and *L’Assommoir* (1877). Fellow writer Gustave Flaubert was disgusted by these prefaces, criticizing them in a letter to Zola (1 December 1871): “You let your secret out too candidly, and you express your own opinion, a thing which, according to my poetics, a novelist has no right to do” (*Letters* 365). In the preface to *Thérèse Raquin*, Zola divulges the secret behind his oft-quoted method, comparing the writer to a scientist, and the story/text to a body/corpse that is subject to an examination or an autopsy: “On commence, j’espère, à comprendre que mon but a été un but scientifique avant tout [...] J’ai simplement fait sur deux corps vivants le travail analytique que les chirurgiens font sur des cadavres” (*Thérèse Raquin* 42: [... ] my objective was first and foremost a scientific one [...] I simply carried out on two living bodies the same analytical examination that surgeons perform on corpses”

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74 Auerbach analyzes Zola and the Goncourt brothers’ work together in *Mimesis*, opening his chapter with a study of the authors’ polemical prefaces.
In his desire to expel the subjectivity of the Romantics, Zola insists that scientific analysis is a thoroughly new and, more importantly, a modern method for aesthetic practice. Science exemplifies the century’s modernity, and could be “[...]l’outil d’enquête universelle [...] pour trouver l’avenir [...]” (45; “[the] universal investigative tool [...] to lay bare the secrets of the future [...]” [5]). Literary critic David Baguley reminds us that “[naturalist] art was very much in tune with the [scientific] spirit of its age” (62-3).

Thus Zola considered a text to be a body, a living body, and indeed vivisection remains a favoured metaphor throughout his theoretical writings. In the essay “Le Roman expérimental” (1880), he again turns to the medical model as the scientific frame for his narrative method, galvanized by the work of Claude Bernard’s *Introduction à l’Étude de la Médicine Experimentale* (1865). Zola believes it imperative that the modern writer assume the role of the doctor: “Le plus souvent, il me suffira de remplacer le mot ‘médecin’ par le mot ‘romancier,’ pour rendre ma pensée claire et lui apporter la rigueur d’une vérité scientifique” (2; “It will often be necessary to replace the word ‘doctor’ by the word ‘novelist’ to make my meaning clear and to give it the rigidity of scientific truth” [1-2]). For him, Naturalism marks a (re)turn to nature, following the scientific method of reasoning based on doubt, observation of material phenomena and living bodies, and an examination of the conditions under which the phenomena is produced.

Nonetheless substituting the word “doctor” with the word “novelist” is not as straightforward an action as Zola suggests. While he privileges observation, he does not entirely equate observation with objectivity. Rather, the observer is also an “inventor” who contributes to the experiment:
A contemptible reproach which [critics] heap on us naturalistic writers is the desire to be solely photographers. We have in vain declared that we admit the necessity of an artist’s possessing an individual temperament and a personal expression [...] the idea of experiment carries with it the idea of modification. We start indeed from the true facts which are our indestructible basis; but [...] it is necessary for us to produce and direct the phenomena; this is our share of invention [...]. (11; trans. Belle M. Sherman)

While Zola might be faulted for accepting a little too readily the “true facts” and “indestructible basis” of scientific findings, without considering that these findings themselves are mediated through social constructions, his reluctance to use the new technology of photography as a metaphor for Naturalism emphasizes that he rejects an approach to realism that views the work of art as merely a recording, or verisimilitude. Unlike his comrade Paul Cézanne, who declared that “l’artiste n’est qu’un réceptacle de sensation, un cerveau, un appareil enregistreur,” Zola accords the writer a degree of active power and creativity. Interestingly, although Zola eschews the idea that naturalism
emulates an “objective” photographing\textsuperscript{75} or copying of reality, Zola himself was an amateur photographer who often wrote about the author as an artist who actively mediates, “produces” and “directs” phenomena. The artist does not merely record reality; he or she subjectively invents or directs reality. Moreover Zola chooses medicine as a model because for him, medicine in the nineteenth century was still considered an \textit{art}.

Zola of course resisted the type of subjectivity fostered by the Romantic movement, which for him relied too much upon fantasy, feelings and the individuality of a particular man (43-44; 51); he views the aesthetic artifacts of the early nineteenth century as an illness, “notre maladie romantique” (“our romantic disease”) (34; 36). Zola rejects transcendence for the examination of immediate, material contexts that construct culture:

\begin{quote}
Et c’est là ce qui constitue le roman expérimental: posséder le mécanisme des phénomènes chez l’homme, montrer les rouages des manifestations intellectuelles et sensuelles telles que la physiologie nous les expliquera, sous les influences de l’hérédité et des circonstances ambiant, puis montrer l’homme vivant dans le milieu social qu’il a produit lui-même, qu’il modifie tous les jours, et au sein duquel il épreuve à son tour une transformation continue. (19)
\end{quote}

And this is what constitutes the experimental novel: to possess a knowledge of the mechanism of the phenomena inherent in man, to show the machinery of his intellectual and sensory manifestations, under the influences of heredity and

\textsuperscript{75} Zola was also a photographer, taking portraits (of individuals, groups, as well as his family), as well as street scenes and buildings of Paris. The Musée d’Orsay holds several photographs by Zola. He took many of his daughter, Denise, between 1898 and 1902. One photo shows the young girl holds two of her dolls, with an odd tripling of oval faces. A collection of Zola’s photographs can be found on the Musée d’Orsay’s website.
environment, such as physiology shall give them to us, and then finally to exhibit
man living in social conditions produced by himself, which he modifies daily, and
in the heart of which he himself experiences a continual transformation. (20-1;
trans. Belle M. Sherman)
Perhaps Zola assumes a little too readily a confidence in Darwinian determinism and
biology. Moreover, his argument here is predicated on an idea that knowledge can indeed
be “possessed.” For all the emphasis upon the mechanism, machinery, and physiology of
a human being, it is important, however, that Zola acknowledges that the human
environment is a construction that one has the power to transform (again, recall that
Zola’s artist can “direct” reality); some agency exists here, at least in theory, despite the
determinism of the fiction itself. As critic Philip Walker writes, “What [Zola] shows us
time and time again is not the world as it might appear to the eye of a camera. It is not
even the world as it might be perceived by a man completely awake and in full
possession of his reason. It is a vision resulting from the endless dialogue that goes on in
his fiction […]” (62). Zola attempts a fusion of science and art in an era that was already
demarcating disciplines, even as it was creating new ones, such as psychology, sociology,
and anthropology.

In a letter of 1864—pre-Raquin, pre-Rougon-Macquart cycle—Zola writes to his
friend Antony Valabrège about his aesthetic theory, which he himself deems “risky”:
[...] all works of art are like a window open on creation. A kind of transparent
Screen is mounted in the window frame. Through this Screen objects appear more
or less dis-torted [sic], as they undergo greater or lesser changes in their lines and
colors. These changes depend upon the nature of the Screen. Thus, one no longer
sees creation exactly and realistically, but creation transformed by the medium through which the image passes. (qtd. in Schor 1969, 38)\textsuperscript{76} The screen mounted in the window is the work of art itself; although Zola envisions the screen as “transparent,” it is remarkable that he expects and accepts that the objects of the “real” world will be distorted, a distortion that philosophers, writers, and scientists alike had worked to reconcile until the nineteenth century.\textsuperscript{77} Unlike analogies for perception and apprehension which emphasize clarity, Zola here embraces a skewed vision. At first, it would seem as if Zola is privileging a \textit{camera obscura} model of vision as outlined by Crary. But “the medium through which the image passes” does not mean the small aperture of the camera obscura or the darkened chamber that inverted objects, but another subjective artistic medium, the always already distorted physiology of the eye itself. Significantly, the window is mounted in a frame; while the frame (a framed painting) signifies an artistic commodity and containment, it also mimics an eyeball lodged in its socket, again emphasizing the role of visual perception. The artwork changes according to the perception of the artist-seer. Again, “modification” is key—the view of “creation” is transformed by the medium, the screen. Interestingly, while Zola rejects the photographic medium as a model for his artistic creation, he adopts here a more “cinematic” analogy: objects/images “pass” in front of a “distorting screen.” His new

\textsuperscript{76} Janet Beizer also discusses this quotation from the famous letter to Valabrègue.

\textsuperscript{77} For example, British empiricist John Locke remained suspicious about the distorting effects of the microscope: “And if by the help of such Microscopical Eyes, (if I may so call them,) a Man could penetrate farther than ordinary into the secret Composition, the radical Texture of Bodies, he would not make any great advantage by the change […]” (II.xxiii.186). He argues that in looking at parts or fragments only, the whole might be missed, and vice versa.
artistic vision does not embrace verisimilitude, but captures, as he states above, a shifting metamorphosis of “lines and colors,” perhaps the same zigzag lines, distortions and disequilibriums that plague the migrainous body.

Many critics of Zola’s time and critics of the twentieth-century object to Zola’s naturalist project, finding his work pseudo-scientific, his faith in positivist science too narrow, and his reliance upon hereditary flaws too reductive. An influential lens through which critics often view Zola’s work is the Marxist interpretation of Georg Lukács, who finds Zola’s method was not only reductive but monotonous: “a mechanical average takes place of the dialectic unity of type and individual.” Equally damning, in Lukács view, is that “description and analysis is substituted for epic situations and plots” (Lukács, as quoted in Baguley 1986 85). In his essay “Narrate or Describe?,” Lukács juxtaposes a horse-racing scene from Tolstoy’s *Anna Karenina* (1878) with one from *Nana* (1880), finding fault with the latter for its failure to advance the plot or to integrate insights about character within the narrative. Indeed, Lukács censures Zola’s writing as photographic stillness, a series of “still lives” or tableaux. As writers are reduced to mere observers, so too their characters are reduced to tableaux, “inanimate objects” (133, 130). Moreover, in description “details become important in themselves. With the loss of the art of narration, details cease to be concrete transmitters of concrete aspects of the action and attain significance independent of the lives of the characters” (132). However, Lukács’ objection regarding character is actually Zola’s aim—for Zola, humans do not have agency (or they do not have much, or as much as they would like to think)—remember

78 Timothy Bewes and Timothy Hall assert that photography in Lukács was basically a “byword for naturalism” (in *Georg Lukács: The Fundamental Dissonance of Existence (Aesthetics, Politics, Literature)* 206).
that they do modify their social contexts) but are subject to physiology, psychology, and environment—hence the (albeit sometimes heavy-handed) delineation of the matter that comprises that environment.

Literary critic Sandy Petrey highlights Zola’s insistence that words function as material objects, which, far from cluttering the narrative pace, serve to amplify the tenets of embodiedness: “Crucial to the naturalist vision associated with the descriptive method is the sensation that material objects count, that they receive textual prominence because they mould as well as fill the world chosen for the textual narrative” (45). Similarly, Roland Barthes, the proponent of “writerly” rather than “readerly” texts (and some critics would still consign Zola’s work into the “readerly” pot-bouille), categorizes Zola as an epic writer (Baguley 1986 91). For Barthes, Zola’s work “involves reducing the world to a few sensations, which become in the process like palpable essences [...] far from reconstituting hundreds of details and nuances by using the very proportions of the original, he digs deeply, makes a choice, looks for the essential theme and turns it into a kind of nail which he hammers powerfully from one end of the book to the other” (91).79 As with a pounding migraine, a nail pounding as it were into the work of art as head, the accumulation of words and images evokes sensations of weight as the reader’s eye is strained, and the sheer length of descriptive sentences and passages add to the sense of duration and oppressive atmosphere.

Numerous late twentieth- and early twenty-first century critics, including Henri Mitterand, David Baguley, Naomi Schor, and Susan Harrow (among others), have re-

79 The quotations included here are from Barthes’ essay about Nana, “The Man-Eater,” in Baguley’s compilation of critical essays on Zola.
evaluated Naturalism and its central proponent. While acknowledging that Zola’s defense of positivism remains problematic, these critics have convincingly demonstrated that Zola’s work, particularly in the Rougon-Macquart cycle, indeed holds aesthetic value in addition to its sociological substance. For example, Harrow’s central thesis in *Zola, The Body Modern: Pressures and Prospects of Representation*, posits that Zola’s texts articulate more than scientific (or pseudo-scientific) observation. She demonstrates that traditional readings of Naturalism rely too heavily upon critiques of its “straightforward” narrative method and unproblematic and over-determined plots (25), and argues instead that a Naturalist writer such as Zola—with his emphasis upon superimposed repetition of images and scenes, narrative frame-breaking and nesting, and representations of disjunctive and fractured bodies is actually more modernist in his work than a slave to verisimilitude, materialism, and scientific “objectivity.”  

She points out that “Zola’s narrative phenomenology is defined by cracks, fissures, dislocations, accidents, breakdowns, collapses, reversals and unnatural hybrids” (82). Inspired by Mallarmé’s reading of Zola (and by Barthes), she promotes a more “writerly” and less “readerly” approach to Zola’s work, and proposes that critics pay attention to the “oscillation between enfolded writing (plis) and stylistic fractures (cassures)” (84). French Studies scholar Göran Blix has also identified the “trou” or the “cracks, fissures, holes” in Claude Lantier’s paintings in Zola’s *L’Œuvre* not only as gaps/ lack in relation to desire, but also

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80 Examples from Zola’s works of such frame-breaking and nesting in narrative are offered below, in the extended quotation from *L’Œuvre*.

81 The quotation is from Mallarmé’s letter to Zola. The French poet remarks that he reads the novelist’s work twice; for it is “‘[le] hazard plein de plis et cassures’” (84).
as deconstructions of the naturalist method itself (298).\textsuperscript{82} In the following close reading of five texts, inspired by these critics, I return to the self-reflexive cracks, windows, distortions, breakdowns and migraine collapses in Zola’s writings to resituate the migraine case studies in a larger narrative of modernity, the body, gender and perception.

3.2 Renée’s Gaze in \textit{La Curée}\textsuperscript{83}

\textit{La Curée (The Kill)} appeared in 1872,\textsuperscript{84} after the fall of the Second Empire (1852-1870), the decimation of France in the Franco-Prussian war, and the carnage of the Paris Commune. Volatile political events no doubt account for some of the preface’s fury. Most of the anger, however, is leveled at the catalyst for the political and social collapse: the corruption of the Second Empire. In the novel’s preface, Zola denounces what he considered to be the era’s trinity of monstrosity: “l’épuisement prématuré d’une race qui a vécu trop vite et qui aboutit à l’homme-femme des sociétés pourries; la spéculation furieuse d’un époque s’incarnant dans un tempérament sans scrupule […] ; la détraquement nerveux d’une femme dont une milieu luxe et de honte décuple les appétits natifs” (372; “the premature exhaustion of a race which has lived too quickly and ends in the man-woman of rotten societies, the furious speculation of an epoch embodied in an unscrupulous temperament, the nervous breakdown of a woman whose circle of luxury and shame increases tenfold native appetites” [3; trans Belle M. Sherman]). Zola

\textsuperscript{82} While Harrow and Blix identify the “crack” as a narrative technique, Gilles Deleuze interprets the hereditary \textit{fêlure} in relation to genre (Deleuze’s reading of Zola is included below, in the analysis of \textit{La Bête humaine}).

\textsuperscript{83} My analysis of this novel is indebted to the debates put forth in Susan Harrow’s paper, “Myopia and the Model: The Making and Unmaking of Renée in Zola’s \textit{La Curée}.”

\textsuperscript{84} \textit{La Curée} appeared in serialized publication in 1871, but was subject to censorship.
emphasizes the hallmarks of the Naturalist concern with heredity and degeneration, gender, and illness; invariably all three signal Zola’s concern with a voracious female sexuality, and the breaking of sexual taboo. As David Baguley notes in *Naturalist Fiction*, the motif of the fallen woman is central to Naturalism (102), with the original sin and hereditary weakness (Aunt Dide’s affair, and mental illness) directly attributed to the female (Beizer 169-204).

Renée Saccard, the speculator’s trophy wife, is the migraineur (migraineuse) of the novel. Literary critic Harrow (2002) has argued that Renée’s migraines materialize for two reasons: her myopia (both literal and figural) and her inability (or unwillingness) to concentrate (Harrow does not fault Renée for these characteristics, but Zola’s narration does). Harrow finds that in a novel in which the heroine is implicitly asking herself about her own existence, subjectivity, and position (in relation to her own bourgeois family, in relation to her new family via her marriage to Saccard, in relation to “tout le monde,” the opulent Paris of the Second Empire), Renée shifts from “myopia to blurred vision to frustrated curiosity” (262). Regarding the two symptoms that trigger migraine, the first symptom, Harrow asserts is an overwrought gaze, “Renée’s gaze tires quickly, triggering migraine. Renée’s migraines mime the pain of thought, the self-torture of analysis, and signal the turning away from any form of engagement. Throbbing headaches are also the somatic price of pleasurable viewing, the punishment of excess.” (261). Harrow also posits that Renée’s experiences of a “foggy head” occur when she attempts to analyze her own position and the relations/actions of those around her; for Harrow, Renée’s mindful attempt at engagement “lead[s] invariably to migraine and a state of physical and mental shut-down. Migraine coincides with active disengagement from life, figured by Renée’s
retreat behind the closed doors of her bedroom. The flight from sight is a retreat from the
demands of thought” (261-2). Indeed Renée’s gaze, particularly when she is engaged in
“pleasurable viewing”—and such viewing almost always translates into an illicit
activity—overwhelms her, and migraine attacks result. Renée’s fractured head pains are
symptomatic indeed of a *méconnaissance*, and she remains scotomized to a certain
extent; however, I would suggest that her moments of sensory overload indicate an
awareness of her limited social role. She apprehends bodily, even if she collapses and
cannot articulate or name her discontent into existence.

The novel immediately establishes its obsession with windows and perception,
with looking and being-looked-at, with spectacle and speculation, as Renée and her step-
son Maxime (a mere ten years younger than she) return in a slow carriage ride (due to a
glut of riders and vehicles in a nineteenth-century “traffic jam”) after an afternoon of
leisure touring the Bois de Boulogne. The opening includes Zola’s characteristically
detailed, panoramic scenes, in which Renée gazes not only at courtesans and other rivals
of the fashion world, but also at the landscape.

Renée regardait, les yeux fixes, comme si cet agrandissement de l’horizon, ces
prairies molles, trempées par l’air du soir, lui eussent fait sentir plus vivement le
vide de son être.

Au bout d’un silence, elle répéta, avec l’accent d’une colère sourde: “Oh!
Je m’ennuie, je m’ennuie à mourir.

--Sais-tu que tu n’es pas gaie, dit tranquillement Maxime. Tu as tes nerfs,
c’est sûr.”
La jeune femme se rejeta au fond de la voiture. «Oui, j’ai mes nerfs» répondit-elle sèchement. (44)

Renée stared blankly before her as if this widening of the horizon, these gentle meadows, soaked in the evening air, made her feel more keenly the emptiness of her life.

After a pause, she repeated querulously: “Oh, I’m bored, bored to death.”

“You’re not much fun, you know,” said Maxime calmly. “You’re nerves are bad, obviously.”

The young woman threw herself back into the carriage.85 “Yes, my nerves are bad,” she repeated dryly. (9)

Renée’s empty stare—“les yeux fixes”—wavers closely to the medical belief that an “idée fixée” is a precursor to madness/ hysteria/ monomania.86 However the scene also emphasizes that sight is connected to feeling (even if numbness is that feeling). Renée registers bodily, emphasizing the nineteenth-century’s movement away from the mind/body split (gaze=logical apprehension) as outlined by Crary. Moreover, her own utterance regarding “boredom” (“Je m’ennuie, je m’ennuie”) and repetition of Maxime’s diagnosis “your nerves are bad” is not merely an echo, but a comment and a re-interpretation. She is acutely aware that Maxime’s diagnosis is flippant, an automatic assumption about female dissatisfaction under the category of “nerves.” Her response

85 While I use Brian Nelson’s translated Oxford edition of La Curée/ The Kill here for all quotations, the translation of this sentence is my own, for it does not appear in the English edition.

86 See Didi-Huberman’s text regarding hysteria, Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière.
demonstrates that even the “unseeing” Renée is aware of the medical classifications of her time, and betrays here some skepticism regarding the validity of such a cause—her feelings/ body tell her (this apprehension is not an instinct) that this diagnosis is not quite correct, that it does not illuminate her position at all. Zola proclaims that “the metaphysical man is dead,” in “The Experimental Novel,” however, the woman figured here belies that assertion (the emptiness of her life, “le vide de son être,” her being). Moreover, it is not through the male point of view, but through Renée and her visual perception that readers enter this scene. Her sensuous narrative voice in the long description of the landscape also outlines a dialectics of emptiness versus feminine fullness. She is blank and empty—perhaps a variation of Zola’s transparent screen—whereas the landscape is full and saturated. An element of gender inversion is also used to “frame” this scene when Renée picks up a pair of men’s double-eye glasses to view the landscape.\(^87\) The narrative has already described her as “boyish” (“Elle continuait à cligner des yeux, avec sa mine de garçon impertinent […]” [40]; “She continued to screw up her eyes in a way that made her look like a cheeky little boy” [5]). The panoramic catalogue of the landscape also ends with another inversion,\(^88\) as Renée examines Maxime, a male voyeur: “[…] levant la tête vers Maxime, dont les regards déshabillaient tranquillement les femmes étalées dans les coupées et dans les landaus voisins […]” (42; “[…] raising her head to look at Maxime, whose eyes were calmly undressing the women displayed to view in the adjacent broughams and landaus […]” [7]). Although Renée

\(^87\) This foreshadows how Renée will “play the man” in her sexual encounters with Maxim later in the novel.

\(^88\) I am grateful to Janelle Blankenship for her suggestions regarding gender and the gaze, here.
cannot see without borrowed lenses, her actions (even as she stares “blankly”) reveal her awareness of her environment, the gendered roles within it, and the power of looking.

Renée’s migraines appear fleetingly, couched in a long expository flashback about her husband Aristide Rougon, who whitewashes his “Rougon” inheritance by changing his patronymic to “Saccard,” and whose rapaciousness involves him in real-estate speculation during Haussmann’s leveling and reconstructing of Paris. As the following passage shows, Renée is leveled and reconstructed as well, from a vulnerable youth to the fashionable icon of her circle of the newly rich. The exposition also sets up the conditions for her nervous breakdown (recall that for Charcot, migraines could presage hysteria):

A vingt-huit ans, elle était déjà horriblement lasse. L’ennui lui paraissait d’autant plus insupportable, que ses vertus bourgeoises profitaient des heures où elle s’ennuyait pour se plaindre et l’inquiéter. Elle fermait sa porte, elle avait des migraines affreuses. Puis, quand le porte se rouvrait, c’était un flot de soie et de dentelles qui s’en échappait à grand tapage, une créature de luxe et de joie, sans un souci ni une rougeur au front. (149)

At twenty-eight she was already world-weary. Her boredom seemed to her all the more unbearable because her bourgeois virtues took advantage of the hours when she was bored to assert themselves and to trouble her. She bolted her door, she had terrible migraines. Then, when she opened the door again, a flood of silk and lace surged through it, a luxurious joyous being without a care in the world. (101)
The experience of migraine here is initially as insubstantial as the froth of her clothes, a part of her façade, a malady cultivated by the leisured upper-classes, as identified by Tissot. The quotation indeed supports Harrow’s interpretations of the migraine as a systematic shut-down, a deliberate disengagement from social roles and responsibilities. The door marks in spatial terms the split between public and private space, between Renée’s social façade and private restlessness. However, at this point in the novel, I believe Renée does not display a complete “retreat from thought,” to use Harrow’s words (262). Significantly, feelings rather than “rational” thought control Renée in the closed, dark room of the migraineur. Although the narrative initially undermines a sense of agency on Renée’s part, she is nonetheless aware that her sexual desires clash with her bourgeois upbringing (not that Zola puts much stock in bourgeois values). She is troubled, and the troubling demonstrates an awareness even in retreat. Significantly, Renée’s migraines here are instrumental symbols of her ennui (here we should recall Esther Lardreau’s note about the French verb “migrainer,” meaning “to cause a migraine, aggravate considerably, bore;” Bibliothèque numérique Medic@ n.pg.).

There are many things that aggravate this female character in the novel. In an example of sensory overload, Renée falls into a stupour from the suffocating smells of the flowers and foliage in her mansion’s hothouse: “[...] elle se crut malade. Elle fit fermer les rideaux, parla à son médecin de nausées et de douleurs de tête [...]” (168; “she fancied she was ill. She had the curtains drawn, spoke to her doctor of sickness and

89 Lardreau also notes that the Goncourt brothers’ writings are riddled with the verb “migrainer.”
headache [...]” [118]). Although headache may be “staged” here, her reactions are nonetheless prompted by the overwhelming sensory experience of the hot-house, an experience that mimics the heightened sensory experiences of the migrainous body. She is also “punished,” as Harrow suggests, for “pleasurable viewing.” At this point, the night before her migraine, she had been spying on Maxime and his (soon-to-be) fiancée from the hothouse, while biting into a leaf of a poisonous plant. However, the fact that she bolts her own door and opens it again in a flood of joy indicates that her illness could be staged; indeed, her ability to articulate only in vague sensations of “douleur” does not mean that she is not a perceiving body at this point. She instrumentally uses boredom and migraine to stage her dissatisfaction with her social milieu.

Quite often oppressive atmospheres and scents overload Renée’s perception, particularly when, as Harrow points out, Renée is exposed to sexual transgression:

C’était dans cet air que Renée respirait ses caprices, ses anxiétés sensuelles. Elle les raillait nerveusement.

“D’où venez-vous donc? leur disait-elle. Vous sentez la pipe et le musc …

C’est sûr, je vais avoir la migraine.”

90 Another discontented wife in French literature of this era, Emma Bovary, also pleads “migraine” when she desires to escape her husband’s company: “Quand Charles, à minuit, rentra, elle eut l’air de s’éveiller, et, comme il fit de bruit en se déshabillant, elle se plaignit de la migraine [...]” (Flaubert 162).

91 The hothouse invokes the Garden of Eden, but because this is Zola, the Eden is a secular, sickly and sickening one. A hothouse, of course, is an artificial means of supporting life; the stench of poisonous plants, stagnant water, and oppressive steam the hothouse here (also the site of Renée and Maxime’s illicit trysts) signifies “degeneracy.” Renée’s biting into the leaf recalls the Biblical biting into an apple, thereby conflating in her the role of Adam and Eve, another example of gender transgression. The scene of looking, desire, and “lack” further recalls another French works that thematizes the gaze and desire: Madame de Lafayette’s seventeenth-century narrative La Princesse de Clèves (although I do not believe Zola deliberately evokes this novel).
Et l’odeur étrange, en effet, la troublait profondément. C’était le parfum persistant de ce singulier foyer domestique. (158)

It was in this atmosphere [when Aristide and his son Maxime return from visits to their mistresses’ homes] that Renée developed her sensual whims and longings. She mocked them nervously.

“Where on earth have you been?” she asked. “You smell of musk and tobacco. I know I’ll have a headache.”

The strange aroma in fact disturbed her profoundly. It was the dominant perfume of this singular household. (108)

Again a glut of olfactory perception triggers dissatisfaction in Renée. While she may be coy in anticipating a migraine here, her self-diagnosis also indicates her awareness of an existence of a world of sexual freedom from which she is barred, even though her body is frequently disrobed for public visual consumption.

At a key point in the novel, Renée attempts to enter this field of illicit activity, and Maxime thus brings her to an evening party at an actress’ house, an activity that even Maxime believes will ruin her reputation. She remains unsatisfied, however: “Son régal de femme curieuse tournait mal, et elle se désespérait de rentrer ainsi avec une illusion de moins et un commencement de migraine [...] Renée, la tête à la portière, resta silencieuse, regardant la foule, les cafés, les restaurants, dont la file interminable courait devant elle” (174; “Her orgy of feminine curiosity was turning out badly, and she hated the idea of returning home disillusioned and with the beginnings of a headache. [...] Renée, with her head at the window [of the cab] remained silent, looking at the crowd, the cafés, and the restaurants as they scudd past” [122-3]). Here one might recall Harrow’s argument
regarding the excess of looking and the resulting punishment of migraine. The scene here also recalls Naomi Schor’s argument about the window symbolizing a neuralgic point for anxieties surrounding aesthetics, sexuality and politics. Schor extends this point, stating, “[a]s such the window is always related to vision; those who occupy the privileged position run the gamut from the artist-seer to the sadist-voyeur” (1969, 47). The rapid impressions that speed across Renée’s field of vision further exacerbate the heaviness of her body and mind, but she still registers the sensations of the street, the cacophony of modernity and mocks the male characters for their transgression. From her seat at the window, Renée is immobilized at this point, prohibited from wandering and absorbing all of the impressions that excite and intoxicate the Baudelarian flâneur. 92

Yet her gaze remains active; Renée is acutely aware of her surroundings. At another moment in the narrative her curiosity returns and she also becomes a voyeur. Here the excess of looking involves “studying” photographic portraits, Maxime’s collections of photographs of Parisian courtesans. Renée and Maxime take great pleasure in scrutinizing the images:

>[... elle s’arrêtait aux portraits de filles plus longuement, étudiait avec curiosité les détails exacts et microscopiques des photographies, les petites rides, les petits poils. Un jour même, elle se fit apporter une forte loupe, ayant cru apercevoir un poil sur le nez de l’Ecrevisse. [...] La loupe servit dès lors à éplucher les figures

92 In chapter four of this dissertation, I discuss the intersections of sensory overload, the flâneur and the migraineur in relation to Maximiliano Rubín of Fortunata y Jacinta.
des femmes [...] Et Maxime finit par cacher la loupe, en déclarant qu’il ne fallait pas se dégoûter comme cela de la figure humaine. (155)

[Renée] lingered longest over the portraits of the courtesans, studying the exact microscopic details of the photographs [...]. One day she even sent for a powerful magnifying glass, fancying she had spotted a hair on The Crayfish’s nose. [...] From then on the magnifying glass served to pick the women’s faces to pieces [...] until Maxime finally hid the glass, declaring that it was not right to become so disgusted with the human face. (105-6)

Their is an exercise in illicit looking. In this scene that thematizes magnification and prosthetic optics and seems to parody the critique of disgusting details or the grotesque in Zola’s naturalism, Renée is not the object to be looked at, as she so often is; she is transformed into a voyeur, similar to how she looked back at Maxime in the carriage. Renée again indulges in an excess of pleasurable looking. We see a shift in typical power relations. Instead of a male voyeur or analyst-physician who controls female bodies (like Charcot photographing and electrifying female patients at Sâlpetrière), here it is a woman who analyzes and deconstructs female beauty. Is Renée a naturalist who uses the photograph and the magnifying glass to study reality? Is the hair on the nose an accidental detail, a punctum, or a grotesque mark that distorts female beauty, a disturbing crack in the smooth façade? At any rate, it is clear that this scrutinizing behaviour is transgressive in bourgeois society. Maxime hides the magnifying glass, declaring it not “proper” behavior to be so “disgusted with the human face.”93

93 Many thanks to my thesis advisor Janelle Blankenship, for her articulate and insightful comments about this passage in Zola’s text.
Renée’s staged migraine, however, and her deconstruction of female beauty through her analysis of the photographs, prompts the question: might migraines be performed as well, in a manner similar to hysteria? The link between a transgressive sexuality, migraines and Renée’s excess of looking certainly points to ways in which the unsettled vision and body of a migraineur might in turn unsettle social codes of conduct. There is even a hint of masochism in Renée’s migraines. Contemporary criticism has demonstrated persuasively the way in which Charcot constructed and orchestrated cases of hysteria as much as he diagnosed and treated them. On the one hand, the question of performance undercuts the very real neurological conditions of hysteria and migraine; on the other hand, it gives Zola’s female character a new agency, also offering a constellation of symptoms that we, in turn, may read, or misread.

3.3  *Pot-Bouille*: Auguste’s Half-Closed Eye

“‘Quels gradins que les honnêtes gens!’ ” (377) artist Claude Lantier proclaims in the last line of *Le Ventre de Paris* (1873) (“‘Respectable people...what bastards!’” [275; trans. Brian Nelson]). Although *Le Ventre de Paris* is the third in the Rougon-Macquart cycle, Claude’s indictment looks forward to Zola’s own in *Pot-Bouille* (1882), the tenth novel. While *Le Ventre* is very much a narrative of the streets—with its depictions of the crowds, *flâneurs* such as Claude, Les Halles, the fishmongers, the gossip-mongers, the competition between various stalls and charcuteries—in *Pot-Bouille*, Zola moves cut-throat capitalist competition indoors, out of the labyrinth and into the geometric interiors.

94 In addition to Didi-Huberman and Showalter’s texts, articles by Borgstrom, Justice-Malloy and Marshall all analyze Charcot’s treatment, depiction and construction of the hysterical woman at the Salpêtrière. Medical diagnoses, public lectures, and photography all worked to identify and reinforce the symptoms.
of Haussmann’s ruthlessly designed Paris. The segregation of space in these new
domiciles does not assure, however, the bourgeois desire for rigid class separation;
instead, Zola uses closed doors and open windows to expose the corruption,
complacency, and hypocrisy of the middle class. Janet Beizer points out that while the
text exposes such hypocrisy, the narrative remains biased: “[T]he novel also implies that
it is the sins of the people that are visited upon the bourgeois. Because Zola cannot seem
to narrate bourgeois infamy without having recourse to the people as its thematic and
rhetorical source, his portraits in abjection cannot be unbound from class bias” (188). Her
point here is similar to Lukács’s;95 Zola the writer cannot divorce himself from his class.
While this is convincing, he nonetheless reserves his harshest criticism for the middle-
class tenants; Zola underlines the ineffectual existence of the class by making most of
them ill. Madame Campardon suffers from an unspecified uterine ailment that prevents
sexual intercourse with her husband, who in turn has an affair with one of his wife’s
relations (and she in turn is brought to live with the family in their apartment, acting as
nurse and surrogate-wife). Another tenant, Madame Vabre, evinces symptoms of full-
fledged hysteria (like the other women whom Charcot diagnosed as hysterical, Madame
Vabre is also sexually promiscuous, and repeatedly caught by her husband in adulterous
liaisons; she fools him every time, in some of the few comical passages in Zola). My

95 Despite Zola’s focus upon working classes, Lukács contends that Zola’s method, and the Naturalist
movement as a whole, divorced the writer from any participation within the class struggle of his era.
Lukács concedes that Zola and his contemporaries were trapped by their socio-economic circumstances,
particularly after 1848, when the bourgeois consolidated power in France and thus altered the position of
the writer: “[writers are] reduced to [...] mere spectator[s] and chronicler[s] of public life [...] Zola’s
naturalist ‘experimental’ novels were therefore merely attempts to find a method by which the writer [...] could
again realistically master reality” (qtd. in Baguley 1986 84).
focus, however, is upon Auguste Vabre, her brother-in-law, who is also saddled with an adulterous wife, a failing silk business, and migraines.

The Vabre brothers are, in a way, echoes of the Goncourts, who were obsessed with health; the latter set of brothers recorded in their journal, “We are now like women living together, whose healths are intermingled, whose periods are simultaneous: we get our migraines on the same day” (qtd. in Schor 128). Théophile’s chest colds and coughs are exacerbated when he confronts his wife with evidence of her affairs, while Auguste’s migraines manifest during periods of stress, particularly when dealing with his wife or his business. The synchronized illnesses of the Vabre brothers are meant to amplify the weaknesses of the bourgeois. The brothers, in addition to their physical ailments, are gendered female, and this crossing of gender boundaries in his work signals Zola’s anxieties regarding the fluctuating roles and positions traditionally designated “male” and “female.”

The narrative repeatedly draws attention to Auguste’s eye while he is experiencing a migraine. Like Maximiliano Rubín in Galdós Fortunata y Jacinta, Auguste suffers migraine pain before his wedding: “Auguste, très correct dans son habit noir, l’œil gauche rapetissé, souffrant d’une migraine, dont il se méfiais depuis trois jours, montait à ce moment prendre sa fiancée” (216; “Auguste, looking very smart in his evening coat, his left eye half closed by the migraine he had been dreading for the last three days, now arrived to take his fiancée to church” [141; trans. Brian Nelson]). Here Emily Apter’s argument, amplifying Lacanian theory by associating scotoma with a blind spot—that is, an (un)conscious denial, acknowledgement or misrecognition of an incident—becomes salient, for the male character’s inability to see clearly precludes his
ability to (fore)see the future problems of his marriage. As in Maxi’s experience, Auguste’s migraine presages his poor performance in the role of husband; Berthe, like Jacinta, will make a cuckold of her spouse. In case readers do not recognize this foreshadowing, another marital drama enfolds during Auguste’s wedding, his brother’s discovery and pursuit of his wife’s infidelity—a note with “proof” according to him; this drama entertains guests more than the actual wedding itself. The irony of one couple’s near-demise while another is being wedded in a church ceremony heavily underlines Zola’s indictment of bourgeois values (and the church which masks the hypocrisy), in one of those “hammering” themes Barthes describes.

However, the wedding ceremony simultaneously reveals the liminal status of the migraneur’s experience. While Auguste’s eye remains closed, figuratively and physically obscuring his vision, Auguste retains some awareness during the wedding ceremony: “[...] n’ayant pas perdu une parole du prêtre, tout à cette affaire, dérangé seulement par sa migraine qui lui fermait l’œil gauche” (222; “[he] had not missed a single word uttered by the priest but had given his whole attention to the subject, distracted only by his migraine, which had closed his [left] eye” [145]”). By emphasizing the partial awareness of the migrainous body, Zola’s indictment of the middle class is complicated by the demonstration that Auguste’s perception does not completely fail, but is an enactment of embodied perception. Auguste may not see completely, but he does hear. Rather than being a fool, Auguste is the only one who pays attention to the ceremony (although, not paying attention to his brother’s marital troubles does probably mark Auguste as a fool). Whereas Renée has the option to withdraw to her rooms, Auguste must remain on
display; indeed, the novel continuously depicts his grueling torment as he is forced to continue with his performance as male.

Although Auguste’s eye remains half-closed during every experience of migraine in *Pot-Bouille*, invoking the symbolism of blindness and méconnaissance, he nevertheless does demonstrate some awareness and self-recognition. When he learns about his wife’s infidelity, and unlike his relatively absurd brother, he decides to challenge Berthe’s lover, Octave Mouret, to a duel. Certainly, his resolve as well as his commitment to an outmoded display of masculinity is undercut again by the narrative. In a parody of a knight’s journey, Auguste is subject to one of literature’s slowest cart rides throughout the streets of Paris looking for his second, Duveyrier, before the duel. Not surprisingly, for the entire journey, Auguste suffers a migraine:

Off went the cab, an old landau, huge and dirty, rocking alarmingly on its worn-out springs. The gaunt white skeleton of a horse walked along with a remarkable expenditure of energy [...] drowsiness gradually overtook [Auguste]; he had had not a wink of sleep all night, and this dreadful cab only heightened his depression. Rocked about in it, all by himself, and deafened by the rattling of the cracked
panes, the fever which all that morning had sustained him now grew calmer. [...] His face went grey as he put both hands to his head, which ached horribly. (293)

The decrepit mode of transportation, in addition to the weakness of the poor horse that pulls it, reinforces Zola’s indictment of the bourgeois, and renders Auguste’s “chivalrous” quest ridiculous. The energy and mien of the horse are reflected in the landau’s occupant. Auguste’s heightened state of senses triggered by his migraine amplifies the tediousness of his journey. Yet the duration of the ride, and the heaviness of Auguste’s pain, weighed down by the sheer verbiage of the description, force readers to experience the oppressiveness of his illness.

The scene of the rattling carriage ride and the throbbing migraine is repeated several times in the narrative: “Une silence régna, le fiacre se balançait mélancoliquement. Auguste, dont la flamme s’éteignait à chaque tour de roue, s’abandonnait aux cahots, la mine terreuse, l’œil gauche barré de migraine” (432; “Then there was another silence, as the cab swayed dismally from side to side. Auguste, whose valour was ebbing with each turn of the wheels, submitted resignedly to the jolting, looking more and more cadaverous with his left eye half-closed because of his headache” [299]). Although his body is dulled by pain, he nonetheless remains cognizant of his condition: “Et Auguste avait dans l’oreille le phrase de son frère: ‘C’est bête, tu vas faire embrocher,’ une phrase importune et entêtée, qui finissait par être comme la douleur même de sa névralgie” (432; “His brother’s words rang in his ears: ‘It’s ridiculous; you’ll just get spitted!’ The phrase came back to him importunately, obstinately, until it actually seemed part of his headache” [299]). The narrative rhythms and repetitions are absorbed into Auguste’s migraine, as well as fragments of memory and speech; indeed, while
memories and uttered phrases are part of the stream-of-consciousness of regular thought (that is, one’s thoughts without being mediated by pain or illness), here the pulsating rhythms and repetitions of narrative (“brother’s words ringing in his ears”) mimic Auguste’s throbbing head. The narrative here does not pan or catalogue the landscape or outside world; there is an interior reverberation of words that mirrors the rocking and swaying of the carriage.96

Although his optical attentiveness here dissolves as he approaches a cadaverous state of migraine pain (“left eye closed”), Auguste’s auditory awareness, one could argue, is exaggerated in the passage as his brother’s words reverberate and create new rhymes and rhythms within his head; in Auguste’s liminal headache state he still shows some awareness, albeit hallucinatory, of the sensory images around him. Remember Sacks notes that “[t]he abnormal sensations of a migraine aura, as opposed to those of dreams, are likely to be experienced in full waking consciousness (although they may also occur in twilight states, or sleep), and most patients learn not to mistake them for reality” (66). While the aura and scotoma are recognized as symptoms of the migraine, the development of a full-fledged migraine can easily reduce a sufferer to a twilight state; the

96 Modernist and postmodernist literature also represent migraines as a flickering reverberation; however in the mid to late 20th and 21st century, it is compared to or emanates from a fluorescent flickering or the flickering of a computer screen. Consider, for example the first lines of Sylvia Plath’s 1962 poem “Lesbos”: “Viciousness in the kitchen!/The potatoes hiss/It is all Hollywood, windowless./The fluorescent light wincing on and off like a terrible migraine” or Francis Tokarski’s 2012 Tragick Tale of one Doktor Faustus: “Eternal Life!” Eternal Life echoed in his ears, over and over, hypnotically, unstoppably, like a church bell gone mad, with each heavy beat of his heart; and this time, not only in his mind’s eye, but before his very physical eyes, he could see equations and formulae streaming across his pupils... His stonecold countenance shone green, motionless, starring. He had been sitting there for hours now, and the flickering screen was causing his right eye to ache and form a migranous aura” (Tokarski 23-24).
migraineur is paradoxically cognizant and numb at the same time, as the following passage reveals:

Auguste’s indisposition seemed to have increased during the visit to Clarisse’s, where he had not uttered a single word. Now completely worn out by his interminable drive, his head throbbing, he collapsed in a corner. When Duveyrier asked him what he intended to do [regarding the duel], he opened his eyes, paused for a moment as if in anguish, and then repeated his previous phrase: “Fight, of course!” (304-5)

Auguste’s behaviour indicates that he is an empty automaton here, with his relative inaction and mechanical repetition of words which by this point are certainly divorced from intent and content, “Fight, of course!” Auguste’s chivalrous performance as “male,” by this point, is empty. Auguste’s migraine is also indicative of another breakdown, a retreat from his oppressive social reality.

As we have already seen in this chapter (further examples will be discussed in the section that follows), migraine experiences in Zola are often tied to modernity: carriage rides, railway travel, excessive sightseeing, gallery viewing and motion. Edward Liveing identified excessive motion as one of the causes or exacerbations of migraine: “the motion of a close carriage, and a rapid sensation of visual impressions, in upsetting the
sensorium and producing a vertiginous state allied to sea-sickness” (50). Zola himself saw the modern transportation of the train journey as having a stupefying effect, writing, “Mon impression sur la locomotive. D’abord une grande trépidation de la fatigue dans les jambes et un ahurissement à la longue produit par les secousses. La tête semble se vider” (“My impression on the locomotive. First, a lot of shaking, fatigue in the legs and finally stupor caused by the jolt. The head seems to empty out” [cited by Henri Mitterand in Zola, Carnets d’enquêtes: Une ethnographie inédite, 553; Mitterand’s translation]).

Auguste’s migraine is also triggered by an “interminable drive,” by transportation and the bumps of modernity.

3.4  L’Œuvre: Claude Lantier, “faiseur de taches”

The fractures and fragmentations of modernity again manifest in the self-reflexive play of L’Œuvre, the fourteenth novel of the Rougon-Macquart cycle. Bodies, intact or in parts, are interspersed throughout the narrative. As the novel begins, artist Claude Lantier lives on the Rue de la Femme-sans-Tête, a street name that predates the 1789

97 Claude Lantier is the son of Gervaise, who appears in L’Assommoir. Her children include Etienne, of Germinal, who tries to avoid falling into drink; Claude, of L’Œuvre, whose artistic genius is equated with failure, nervousness, and madness; and Jacques (who does not appear at all in L’Assommoir). Gervaise’s only daughter, with Coupeau, is the (in)famous and compelling performer in the eponymous novel Nana.

98 Today the Rue de la Femme-sans-Tête is the Rue Regrattier, which cuts across the Île Saint-Louis. The name dates back to the early eighteenth-century. The editor of the French edition of L’Œuvre, Marie-Ange Voisin-Fougère, explains the name’s origin: “Le nom de cette rue était dû à une enseigne représentant une femme sans tête tenant un verre à la main, avec pour devise «Tous est bon” (n.1 60; “The street was given this name by a sign representing a woman without a head, holding a glass in her hand, with the device ‘All is good’” [my translation]). The building on the street’s corner still houses the bottom fourth of a statue, with “rue de la Femme sans Teste” carved in the stone. In the late 1790s a revolutionary hacked off much of the body of the statue—a statue not of a lady, but of St. Nicholas. According to Voisin-Fougère, several artists lived in the Île Saint-Louis area in the nineteenth century, including Honoré Daumier; while Charles Baudelaire housed his mistress Jeanne Duval on this “rue.”
revolution, but also conjures up the horrors of the guillotine and the subsequent political volatility that ravaged the century. As we witness later, Claude also “loses his head” in his obsession to produce a masterpiece of modern painting. The novel thus immediately signals its obsession with heads (or lack thereof), and foregrounds Lardreau’s diagnosis of migraine as the malaise of France.

The first painting in the novel that receives much narrative focus, *Plein air*, initially is pieced together using sketches of various models, but its assemblage falters under Claude’s critical gaze: “‘Aussi, tonnerre de Dieu! est-ce qu’on plante la tête d’une femme sur le corps d’une autre! ... Je devrais me couper la main’” (189; “‘How in God’s name can you put another woman’s head on another woman’s body? ... I ought to cut off my right hand for trying to do it!’” [104]). Particularly when looking at women, Claude fixates upon fragments rather than intact bodies, as when he gazes at his model/partner (and later wife) Christine: “Souvent, déjà, pour camper les petites figures de ses derniers tableaux, Claude avait pris d’après Christine des indications, un tête, un geste de bras, une allure du corps [...]” (342; “Very often, when he was working on his smaller pictures and wanted to fix occasional details of the figures, Claude asked Christine to model a head, a gesture, or some particular attitude” [234]). Claude’s fellow artists also fixate repetitively upon the female form for artistic rendering, including the sculptor Mahoudeau, whose “Bathing Woman” collapses in the heat of his studio: “Et, brusquement, la tête s’inclina, les cuisses fléchirent, elle tombait d’une chute vivante […] En dégelant, la terre avait rompu le bois trop faible de l’armature. Il y eut un craquement on entendit des os se fendre […] la tête, détachée, roulait par terre” (324-5; “Suddenly the head dropped forward, the legs crumpled up and the statue began to fall forward in a
living mass [...] As it thawed the clay had broken the soft wood of the framework and it could be heard splitting and cracking like fractured bones [...] the head broke and rolled along the floor” [219]). The work of art becomes a fallen and hysterical female body. The violence with which female heads are treated not only echoes the violence and pain of migraines, but also points to concerns regarding gender and sexual politics in nineteenth-century France.

Although *L’Œuvre* does not document a specific migraineur, the visual disruption of a migraine is evoked as a mass phenomenon of spectators at an art gallery, the *Salon des refusés*. The dense description of the art gallery catalogues a visual spectacle that overwhelsms the spectators: blinding colors, miasma, dizzying atmospheres, and hallucination. 99 Crowded public spaces, the circulation of bodies, and overwhelming spectacle (and spectatorship) particularly induce throbbing migraine experiences at the Salon:

C’était l’étouffement embrasé de cinq heures, lorsque la cohue, épuisée de tourner le long de salles, saisie du vertige des troupeaux lâchés dans un parc; s’effare et s’écrase, sans trouver la sortie. Depuis le petit froid du matin, la chaleur des corps, l’odeur des haleines avaient alourdi l’air d’une vapeur rousse;

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99 Zola’s account of exhausted bodies and migrainous heads is in keeping with medical findings of the era. For example, Edward Liveing observes, “Evening entertainments of almost every kind are particularly trying; the concert, the playhouse, an evening assembly, and even church, present a combination of impressions—of sights and sounds, of glaring lights and impure air [...]” (461). Similarly, T. H. B. Dobson writes in the *British Medical Journal* of 1908, “Typical [immediate] causes [of migraine] are a cinematograph exposition, a tour round a picture gallery, and prolonged microscopical work” (314).
et la poussière des parquets, volante, montait en un fin brouillard, dans cette
exhalaison de litière humaine. Des gens s’emmêlaient encore devant des
tableaux, dont le sujets seuls frappaient et retenaient le public. On s’en allait,
on revenait, on piétinant sans fin. Les femmes surtout s’entêtaient […] D’autres,
n’ayant pas découvert le moindre s’appuyaient fortement sur leurs ombrelles,
défaillantes, obstinée quand même. Tous les yeux, inquiets et suppliants,
guettaient les banquettes chargées de monde. Et il n’y avait plus, flagellant ces
milliers de têtes, que ce dernier coup de la fatigue, qui délabrait les jambes, tirait
la face, ravageait le front de migraine, cette migraine spéciale des Salons, faite de
la cassure continuelle de la nuque et de la danse aveuglante des couleurs. (422-3)

The sweltering five o’clock crush was at its height, for by this time to mob was
worn out and dizzy with doing the round of the galleries and beginning to panic
and jostle like cattle making futile attempts to find the way out of a pen. The early
morning chill had gone, and the heat of human bodies and the smell of human
breath had made the atmosphere thick with a brownish-yellow vapour, while fine
dust kept rising up from the floor like mist to join the exhalations from the human
stable. Occasional visitors would still stop to look at the pictures, though only for
the sake of the subjects now; but in general people were either simply wandering
aimlessly about or marking time where they stood. The women, in particular,
were proving obstinate […] [O]thers, having failed in their quest for somewhere
to sit down, bravely propped themselves up on their sunshades, exhausted but
undaunted, and kept a keen or suppliant eye on the closely packed benches. Not a
head in all those thousands but was throbbing with the last symptoms of fatigue: legs turned to water, features drawn, foreheads splitting with headache, that brand of headache particular to Salons, brought on by perpetually staring upwards at a blinding conglomeration of colours. (304).

Notably, as is frequently the case, the English translation of Zola’s work employs the word “headache” in place of the French text’s “migraine,” which significantly reduces the effect of the scene. Moreover, the migraine is “cette migraine spéciale des Salons;” viewing artwork triggers a “special type” of migraine, and suggests that only a few privileged visitors occupy the position of artist-seer, even as this viewing is simultaneously undercut by the comparisons of the crowd and salon to cattle and pens. 

Human breath, heated bodies, and dust coalesce in a miasmatic effect that stupours the body and mind, while the glut of words and images force a sense of oppression and intoxication upon the reader. The accumulation of similar-sounding verbs and adjectives—“embrasé,” and “épuisée,” alternating with “s’effare” and “s’écrase”—reveal a “plis” in the narrative (as discussed by Harrow). The piling up of phrases also renders the oppression palpabe—“la chaleur des corps,” “l’odeur des haleines” “la poussière des parquets”—creating a heaviness in the narration, while the length of the description becomes exhausting.

The viewers here are exhausted by an excess of looking. They become blinded not only by gazing too long at the paintings, but also by the spectre of art itself. The French text renders the blurring of visual perception more fluid: “la danse aveuglante des couleurs.” Not only are the viewers’ eyes moving here, but the colours themselves swirl together, resisting any clear picture; such movement again invokes the colour-edged spots
of a scotomatic experience. Indeed the adjective “blinding” (“aveuglante”) highlights blotting out, the “méconnaissance” of scotoma. The masses attending the [art show] can neither recognize nor distinguish “true” works of art, such as Claude’s paintings.

Zola’s texts set up a specific connection between migraine, perception, and sensory overload, but the representation points to more than a cause-and-effect determination of migraine. In a footnote in her essay about La Curée, Harrow observes, “The body stages the experience of visual overload as a migraine. Likewise, the somatic translation of the interdiction on seeing, produces, literally, a ‘blinding’ headache” (261). The scenes also exemplify the paradox peculiar to migraine, in which senses are heightened yet vision is blurred, a liminal mind-body borderland that fragments and liberates, characteristic of the nineteenth-century nervous figure. Although Claude is not a migraine sufferer like Auguste and Renée, he does share symptoms of the fêlure embodied by his brother Jacques. In a manner similar to Jacques’, Claude panics regarding his psyche (physiology) and his talent:

Qu’avait-il donc dans le crâne, pour l’entendre ainsi craquer de son effort inutile?

Était-ce une lésion des ses yeux qui l’empêchait de voir juste? [....] Il s’affolait

\[100\] The working-class wedding party of L’Assommoir experiences similar fatigue and illness while viewing art at the Louvre: “Encore des tableaux, toujours des tableaux, des saints, des hommes et des femmes avec des figures qu’on ne comprenait pas, des paysages tout noirs, des bêtes devenues jaunes, une débandade de gens et des choses dont le violent tapage de couleurs commençait à leur causer un gros mal de tête” (101; “More pictures, and still more pictures, of saints, of men and women whose faces meant nothing to them, of very dark landscapes, of animals gone yellow, a confusion of people and things in such a busy riot of colours that everyone was beginning to get a nasty headache” [77; trans. Margaret Mauldon]).

\[101\] Zola was a champion of the Impressionists, and favourably reviewed paintings by Manet, Monet and others at the Salon in 1860s Paris. At the time, he referred to the artists as “Les Réalistes du Salon,” arguing, “Je me moque du réalisme, en ce sens que le mot ne représente rien de bien précis pour moi. Si vous entendez par ce terme la nécessité où sont les peintres d’étudier et de rendre la nature vraie, il est hors de doute que tous les artistes doivent être des réalistes. Peindre des rêves est un jeu d’enfant et de femme; les hommes ont charge de peindre des réalités” (69). Zola’s essays are collected in Salons.
davantage, en s’irritant de cet inconnu héréditaire, qui parfois lui rendait la création si heureuse, et qui d’autres fois l’abêtissait de stérilité [...] Et sentir son être tourner dans une nausée de vertige [...]. 114-5 

What could be wrong with his brain that he almost thought he could hear it snap under the strain of his futile efforts? Could there be something wrong with his eyes that impaired his vision? [...] What drove him to distraction was the infuriating thoughts of that hereditary something that sometimes made creation a sheer pleasure and at other times reduced him to such complete sterility [...] It was like being swept up into some sickening vortex [...]. (45).

Here the artist, like the spectators at the salon, is swept up into a dizzying “vortex.” Claude, however, is obsessively stepping outside his body, to hear the crack or “snap” of his own brain. The nervous narrative enacts a modernist mind-body split. While nausea and vertigo are physiological symptoms of migraine, Zola here extends the sufferer’s position by translating physiological torment into psychological terms. The nervous symptoms that contribute to the “snap” or his descent into madness and then suicide, are examples of hysteria rendered public by medical treatises such as Charcot’s. 102 Even though Claude cannot overcome his malaise, the questions he poses about his brain and vision exhibit heightened awareness in a moment of sensory overload.

It will be recalled from the first chapter’s discussion of medicine and migraines that the experience of the “failure of reality itself” is a modernist preoccupation of nineteenth and early twentieth-century aesthetics. Crary posits that French artists of the

102 Zola does not treat Claude as hysterical, but as a genius gone mad in his inability to create. Charcot does include analyses of male hysterics in his studies.
mid-nineteenth century, in particular impressionists, were preoccupied with this change in observation: “Manet was the first modern artist to understand what would become crucial in the late work of Cézanne: the ways that an optical attentiveness can dissolve and disorganize the world, thus requiring a fundamental reconstruction of it by the artist” (Suspensions of Perception 126). Claude obsessively works to reconstitute his visions of the world, but these works result in failure. The second half of the narrative details Claude’s quest to paint another vision of Paris, and he repeatedly revisits the site of his initial visionary experience. Often when Claude revisits the scene at port St. Nicholas, the view before him dissolves into a migraine-esque vision: “Paris allume s’était endormi, il n’y avait plus là que la vie des becs de gaz, des taches rondes qui scintillaient, qui se rapetissaient, pour n’être, au loin, qu’une poussière d’étoiles fixes” (461; “Paris was asleep, and the only signs of life were the street lamps, discs of scintillating light shrinking away in the distance to a dusting of fixed stars” [338]). One could argue that the gas lights mimic the appearance and movement of scotoma within Claude’s field of vision. The English translates “taches” as “discs,” which, I would argue, is rather misleading for the implications and sensations of the scene (sensations for both Claude and the reader). “Taches” in French denotes spots, stains, marks, patches—all of which reverberate/ signify the blurring of clear vision and scotomatic blots shivering across the visual field, also referencing the artwork of impressionism. “Discs” implies a circle that functions as a container, the circumference a clear division between the blot and the objects that are blotted out. The French meanings signify more the scotomatic experience itself, as spots/ blots blur and seep into the visual field, a blurring that is much less precise (here we are reminded of Zola’s aesthetic theory regarding artistic vision as a
“distorted” screen). Moreover, these migraine visions appear within Claude’s painting itself, signifying a persistence of vision or movement; according to literary critic Göran Blix, the holes and gaps in Claude’s paintings also mark an excess of vision: “[t]hese holes are at times less absences than excessive presences, uncanny phantasms that emerge from the fissures and spread their distortions across the sober, painted canvas” (293). Scotoma and the cracks, gaps, blots and holes in Claude’s obsessive looking, then, function not as a fault or flaw, but as another aspect of what might be perceived in reality itself (in impressionist art, paintings are sensitive to the passage of time, movement and light).  

Claude’s migrainous experiences and experiments with colour are reminiscent of Goethe’s own work with theories of colour, visual perception, and afterimages. Crary, in *Techniques of the Observer*, outlines the way in which Goethe’s work with the camera obscura helped generate a new type of observer in the early nineteenth century: “What is important about Goethe’s account of subjective vision is the inseparability of two models usually presented as distinct and irrevocable: a physiological observer [...] and [...] active, autonomous producer of his or her own visual experience” (69). Goethe’s experiments

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103 Much scholarly work exists regarding Zola and his contemporary artists. Several critics have noted the parallels between the careers of Cézanne, Manet, and Zola’s fictional depiction of Claude. It is well known that Claude’s painting *Plein air* drew inspiration from Manet’s *Déjeuner sur l’herbe* (1863) (which Zola defended after the painting was rejected by the 1863 salon, and much-derided by the public). The fictional account of the critical reception of Claude’s painting follows Manet’s experience with the public). Robert Lethbridge suggests that Claude (and via him, Cézanne) is not an aesthetic failure, but rather an example of an artist who does not fit Zola’s own terms of aesthetics (70-75). Martine Grantel argues that Zola’s doubled artists and writers (Claude/ Cézanne, Sandoz/ Zola) reveal the tensions in Zola’s own theory of naturalism, for the poetic “artistry” does dominate the supposed objective prose (97). Göran Blix, too, reads Claude’s “impuissance” not as an artistic failure, but as a demonstration of the contradictions within naturalism itself (296).
with a camera obscura yield results that sound hauntingly similar to Airy’s description of scotoma:

The hole being closed, let him look towards the darkest part of the room; a circular image will not be seen to float before him. The middle of the circle will appear bright, colourless, or somewhat yellow, but the border will appear red. After a time this red, increasing toward the centre, covers the whole circle, and at last the bright and central point. No sooner, however, is the whole circle red than the edge begins to be blue, and the blue gradually encroaches inwards on the red [...] (Goethe quoted in Crary 68).

The floating circles, combined with their fluidity and colours around their edges, all mimic the manifestations and movements of scotoma. What Crary finds significant in Goethe’s descriptions here is that the colours, rather than being considered as separate from the observer, are a part of the observer: “[...] they are ‘physiological’ colors belonging entirely to the body of the of the observer and are the ‘necessary conditions of vision’” (68). Crary also points out that transparency in vision does not hold the same significance for Goethe as it did for the thinkers of and before eighteenth century: “Perhaps most important is his designation of opacity as a crucial and productive component of vision. If discourse on visuality [...] repressed and concealed whatever threatened the transparence of an optical system, Goethe signals a reversal, and instead poses the opacity of the observer as a necessary condition for the appearance of phenomena” (71). This emphasis on the opacity of the observer echoes Zola’s own pronouncements regarding the subjective distortion that transforms the transparent screen
into art; in acknowledging the physiology of vision, Zola’s fiction works to incorporate the significance of modern viewing.

The narrative of *L’Œuvre*, however, relentlessly portrays Claude’s perception as flawed. In an odd act that may be read as Zola’s own scotomization of his text, the narrator faults Claude for introducing new scientific ideas regarding art and colour into his artwork: “Après quoi, lui-même, par la continuelle outrance de sa passion, s’était mis à exagérer ce principe scientifique qui fait découler des trois couleurs primaires […]” (353; “Then with characteristic overindulgence, he had begun to exaggerate the scientific principle which deduces from the three primary colours […]” (243). Perhaps one could say that what Claude does, in Zola’s text, is amplify or exaggerate blurry impressionist vision. His “overindulgence” and exaggeration of the play on scintillating light and colors swirling together leads to a “dizzying vortex” that is more pointillist than it is impressionist, anticipating new artistic discourses to come.104

### 3.5 *La Bête humaine*: Gaps, Splits, Cracks

In *La Bête humaine*, Zola continues his deterministic obsession as he tracks the “degeneration” of humanity in juxtaposition with the “progression” of technology, both symbolized by the railway, as Rae Beth Gordon points out. Zola clearly imbues technology with the organic, reading it as a nervous system: “C’était comme un grand

104 Neurologists argue that pointillist paintings often resemble stages of migraines with aura and mosaic vision; Sacks describes a “graininess” akin to pointillism in visual disturbances of the mosaic kind, while larger mosaic patterns are compared to “cubism” (see page 74 for both Sacks’ description and illustration). Klaus Podoll and Derek Robinson discuss “illusory splitting” as one of the visual disturbances attendant to migraine aura, in which objects appear cut in half or broken. They analyzed artwork from four Migraine Art competitions, concluding that some migraineurs experience illusory splitting with other forms of scotoma. See their article, “Illusory Splitting as Visual Aura Symptom in Migraine,” as well as *Migraine Art: The Experience Within*. 
corps, un être géant couché en travers de la terre, la tête à Paris, les vertèbres tout le long de la ligne [...]” (90; “[The railway] was like a huge body, a gigantic creature lying across the land, with its head in Paris and joints all along the line” [58; trans. Leonard Tancock]). Regarding this quotation, Gordon notes that “this description of the physiology of the railway is [...] precisely that given to the corporeal unconscious, a body governed by the spinal cord and nervous system at the expense of the head” (164).

Indeed, as cultural historian Wolfgang Schivelbusch (among others) demonstrates train travel irrevocably changed concepts of space and time; nineteenth-century citizens were quite conscious of analogies between the body and contemporary technology: “[...] when the nineteenth century saw the health and vitality of social institutions and processes as dependent on a functioning circulatory system [...] it based this view on a biophysiological notion of society and economy [...]” (194-5).

While nineteenth-century doctors were establishing new fields of medicine, discovering “new” illnesses such as hysteria, or re-writing the diagnoses of and discourses about different diseases and nervous conditions, the explosion of technology also confronted doctors with ailments that had not appeared before. Schivelbusch outlines the effect of the train’s motion on the body: “The muscles grew tired, and so did the individual sense organs. The rapidity with which the train’s speed caused optical impressions to change taxed the eyes to a much greater degree than pre-industrial travel, and the sense of hearing had to cope with a deafening noise ...” (117). Although Schivelbusch does not mention migraines, neurologists of the day such as Edward Liveing were well aware of the effects of train-travel on the sensoria of those predisposed: “A day of sight-seeing in town, a long railway journey, a public spectacle or
military review, are pretty sure to be followed in some individuals by one or more attacks” (461). Schivelbusch further points out that beyond the obvious trauma incurred in railway accidents (death, broken limbs, and so on), passengers also experienced other ailments due to aftershocks of an accident, even though they did not have visible injuries. For example, a condition identified as “railway spine” emerged, but “the purely pathological view was superseded by a new, psychopathological one, according to which the shock caused by the accident did not affect the tissue of the spinal marrow, but affected the victim psychically” (135-6). According to Schivelbusch, not only the medical profession but also the legal profession had difficulty diagnosing and defining physical pain that appeared after an accident, even though the person seemed initially unharmed, using terms such as “traumatic neurosis, fright neurosis,” “hysterical neurosis,” “libidinal neurosis,” and [...] “war neurosis” (146). Schivelbusch cites Dr. Erichsen’s record (charting conditions through the 1860s and the 1870s in Germany) regarding the differences between the train accident victims he treated, and those injured by other accidents: “I am disposed to think that terror has much to do with its production. [...] [R]ailway accidents have this peculiarity, that they come upon sufferers instantaneously without warning, [...] [and] the utter helplessness of a human being in the

105 Schivelbusch notes that the word “schock” first appears in the OED in the sixteenth-century, carrying a military meaning about a charged encounter with an enemy (150); the French word “choc” carried a similar meaning, while in Germany, “Schock” indicated “a piles of sheaves” and then slightly later, “[an] indefinite amount [...] in regard to crowds of people and hordes of soldiers” (150-1). Even when they are not travelling by railway, Zola’s characters are often experience (nervous) shocks and jolts in their everyday lives.

106 Eric Michael Caplan’s insightful article “Trains, Brains, and Sprains: Railway Spine and the Origins of Psychoneuroses” examines medical treatises of mid-to-late nineteenth century doctors, including the work of John Erich Erichsen, whose work on railway spine, according to Caplan, unwittingly set up parameters for psychoanalysis.
midst of the great masses in motion renders these accidents particularly terrible” (143). It is not surprising that Zola includes in his cycle of the Second Empire the effects of technology upon humanity. The terror generated by the new mode of rapid transport, combined with what Zola styles a “primal” hereditary taint, clash in La Bête humaine. Indeed “heads” as symbols of rationality and authority are undermined, for humanity is portrayed as more instinctual and bestial than logical.

As mentioned in the first chapter of this thesis, Liveing theorized that “nerve-storms” caused migraines, demonstrating the effects of hereditary links; he writes, “[...] the fundamental cause of all neuroses is to be found [...] in a primary and often hereditary vice or morbid disposition of the nervous system itself; this consists in a tendency on the part of the nervous centres to the irregular accumulation and discharge of nerve-force” (336). This morbid hereditary disposition, in conjunction with the nervous system of the railway, is paralleled in the figure Jacques Lantier in La Bête humaine. Subject to headaches and blinding rage, Lantier believes his murderous desires (specifically aimed at women) are a facet of the hereditary taint passed down from Tante Dide (58). His foster-mother, Tante Phasie, notes “[...] cette douleur qui te trouait le crâne, derrière les oreilles, et les coups de fièvre brusques, et ces accès de tristesse qui te faisaisent te cacher comme une bête, au fond d’un trou?” (89; “[that] pain [he] used to get in the head, behind the ears, and [the] sudden temperatures and fits of depression that made [him] hide away like an animal in its den” (57). Her question immediately foregrounds the “bête” of Jacques humanity, as well as the fact that he represses his illness.

Jacques is indeed aware of, and he recognizes, the Macquart inherited illness, which manifests differently in Gervaise’s children (herself the illegitimate daughter of
Tante Dide); in an example of Zola’s free indirect style of narrative, Jacques analyzes his family:

La famille n’était guère aplomb, beaucoup avaient une fêlure. Lui, à certaines heures, la sentait bien, cette fêlure héréditaire; non pas qu’il fût d’une santé mauvaise, car l’appréhension et la honte de ces crises l’avaient seules maigri autrefois; mais c’étaient, dans son être, de subites pertes d’équilibre, comme des cassures, des trous par lesquels son moi lui échappait, au milieu d’une sorte de grande fumée qui déformait tout. (98)

The family was really not quite normal, and many of them had some flaw. At certain times he could clearly feel this hereditary taint, not that his health was bad, for it was only nervousness and shame about his attacks [...] there were sudden attacks of instability in his being, like cracks or holes through which his personality seemed to leak away, amid a sort of thick vapour that deformed everything. (66; trans. Leonard Tancock)

Zola’s representation of Jacques’ headaches parallels Apter’s and Lacan’s argument about scotoma, cited earlier; the scotoma (the “cracks” and “thick vapour” as figured in the quotation) manifests in Jacques’ condition as a symbol of “blind spots” and repression, in addition to the liminal space of perception made and unmade.

In Logic of Sense (1969), Gilles Deleuze detects in Jacques’ condition a series of dualities that echo one another; while his essay focuses primarily upon La Bête humaine, his diagnosis of the fêlure or the crack in Jacque’s brain, radiates throughout the Rougon-
The dualities for Deleuze are located not in genealogy, but genre:

“But the ‘germen’ is the crack—nothing but the crack [...] the crack takes on the appearance of an epic destiny” (322). For Deleuze the dualities coexist but are not equal; these are the “small hereditary and grand hereditary, a small historical hereditary and a great epical hereditary, a somatic hereditary and a germinal heredity, a heredity of instincts and a heredity of the crack” (324). Critic Andrew Counter reads Deleuze’s theory through the screen of Freud’s *Totem and Taboo*, finding that both writers (Zola and Freud) figure patrilinearity as a series of ruptures, while Deleuze “[…] separates out what is contingent in the narrative from what is transcendent, the former being subsumed into the latter; hence the manias of individual characters are only ever expressions of la fêlure, the fault which is not merely generic, nor merely social, but somehow both of these and more than either” (31). If Zola indeed anticipates the ideas of Freud’s *Totem and Taboo* (as Counter persuasively argues), neither Deleuze in his analysis, nor Freud, consider what Zola himself insists upon, and what feminist critics such as Beizer, Baguley, Harrow, and Schor emphasize: the rupture is not *patrilinear*, but *matrilinear*.108

As Zola reminds his readers throughout the Rougon-Macquart cycle in a rhizomatic

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107 Susan Blood points out that unlike (some) literary critics, “[f]ilm critics maintain that naturalism, far from being a dead end, was crucial to the development of cinematic sensibilities” (49). Blood stresses that Deleuze himself contends that “‘the genius of the naturalists is cinematographic’ ” (qtd. in Blood 50). The paragraph with this observation, Blood notes, was eliminated in the Zola chapter in *The Logic of Sense*.

108 David Baguley claims that *fin-de-siècle* doctors and psychiatrists writing on hysteria, menstruation and heredity fueled the naturalists’ obsession with female bodies: “There is such a large corpus of naturalistic literature that turns on the workings of such ‘fatalities of the flesh’ and conveys disaster through the woman’s body with such an obsessive insistence that we are clearly dealing with a myth that is as imperious as any of the myths that fashioned ancient texts, the myth of catastrophic female sexuality. It was a myth fuelled by contemporary physiologists, doctors, psychiatrists, whose learned writings on heredity, hysteria and menstruation authenticated and sometimes directly inspired literary dramas. The fault was in the body, the woman’s body, which was associated with the social body […]” (103).
fashion, Tante Dide is guilty of double transgression—of having an affair, and of being mentally unstable. Indeed, Jacques himself thinks “[… qu’il payait pour les autres, les pères, les grands-pères, qui avaient bu, les générations d’ivrognes dont il était le sang gâté, un lent empoisonnement, une sauvagerie qui le ramenait avec les loups mangeurs de femmes, au fond des bois” (98; “he was paying for others, father, grandfathers who had drunk, generations of drunkards, that he had their blood, tainted with a slow poison and bestiality that dragged him back to the woman-devouring savages in the forests” [66; the translation renders the French “loups” or “wolves” as “savages,” which undermines somewhat humanity’s animalism Zola insists upon here]). Nevertheless Jacques directs his rage at women. Later in his thoughts, he wonders if his rage was “primordial”, if “du mal que les femmes avaient fait à sa race […]” (99; “some malady with which women had infected his race […]” (67)). Zola relentlessly underlines the feminine of la fêlure.

Although Jacques does not experience migraines per se—that is, he is not represented in extended scenes of suffering as is Auguste—nonetheless the aching of his head and the sensed split in his being are tropes drawn from the migraineur’s experience. Despite Jacques thinking, quoted above, he nonetheless experiences a Lacanian méconnaissance in his thinking and pain: “Son crâne éclatait sous l’effort, il n’arrivait pas à se répondre [...] le cerveau trop sourd, dans cette angoisse d’un home poussé à des actes où sa volonté n’était pour rien [...]” (99; “His skull felt like bursting under the strain and he could find no answer to his questionings [...] with too dull a brain in this anguish of a man forced into acts in which his will counted for nought [...]” [67]). Jacques may not experience fortifications or spots, but his visual field is obstructed during his rages: “Toujours le désir l’avait rendu fou, il voyait rouge” (95; “Desire had always gone to his
head and made him see red” [63]). The struggle between the eye and the gaze is played out further when Jacques witnesses, standing near a passing train, the murder of Président Grandmorin by Sévérine and her husband Roubaud: “Mais c’était une apparition en coup de foudre: tout de suite les wagons su succédèrent, les petites vitres carrées des portières, violemment éclairées, firent défiler les compartiments pleins de voyageurs, dans un tel vertige de vitesse, que l’œil doutait ensuite des images entrevues” (102; “But that was a flash—the whole line of carriages followed, the little square windows, blindingly light, making a procession of crowded compartments tear by at such a dizzying speed that the eye was not sure whether it had really caught the fleeting visions” [70]). Not only does Jacques experience a psychological split in these scenes, he also physiologically experiences the collapse of space and time as in migraine. The dizzying effect of technology mirrors the dizzying effect of migraine itself. Jacques experiences sensory overload—indeed, he hears the train before he sees it, and the images imprint themselves upon his eyes before he consciously realizes what he has seen. And he correctly recognizes that he has witnessed murder. 109

Jacques’ condition once again demonstrates the paradoxical nature of the migraine experience, in which there may be a Lacanian méconnaisance, but also a “double consciousness” in which a disruption of a sensory field—particularly the visual one—engenders insightful modes of seeing (here witnessing), even as technology itself (an uncanny disequilibrium, a crack in the narrative), is putting immense and violent pressure upon physiological perception.

109 The scene in which he witnesses the murder is played out immediately after his agonizing thoughts, and after he has transgressed himself by attempting to rape and to murder Flore.
3.6  Une Page d’amour: Allied Neurological Disorders

Another nervous figure appears in the character of young Jeanne Grandjean in Une Page d’amour. Susan Harrow rightly observes that despite a wealth of solid scholarly analysis regarding hysterics in Zola, it is striking that very little critical attention has been given to the twelve-year old child (“The Matter With Jeanne” 237). Indeed, the narrative focuses mostly upon Hélène, Jeanne’s widowed mother, who has an affair with Jeanne’s doctor; the couple meet when Hélène calls upon the doctor to alleviate the child’s sufferings. Her attacks are detailed throughout the novel, although the doctors themselves cannot precisely identify the ailment. Jeanne’s symptoms mimic hysteria: “Elle avait des violentes contractions, soulevée sur les talons et sur la nuque, comme pliée en deux. Puis, elle retombait, elle s’agitait dans un balancement qui la jetait aux deux bords du lit. Ses poings étaient serrés, le pouce fléchi vers la paume [...] Son pauvre ange [...] les yeux perdus dans leurs orbites, montrant leur nacre bleuâtre” (19; “She had violent contractions, raising her on her heels and the nape of her neck, like as was folded in two. Then she fell again, twisting [in a balance] that threw her against the two boards of the bed. Her grip was tight, her thumb bending against her palm [...] Her poor angel [...] [Jeanne’s] eyes were lost in their sockets, showing their bluish [whites]” [my translation]).

Critic Harrow observes, “By stressing the sick body’s visibility, Zola reveals not only the thematic importance of nerves, but the significance of nervousness as

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110 As a representative of the hysteric in Zola’s world, Jeanne’s illnesses and convalescences deny her any sense of agency. Indeed, Jeanne is compared with a doll that she is given; a passage in which her mother’s friend attempts to fix the doll (Jeanne) is paralleled with the role of doctor/narrator puzzling over Jeanne’s symptoms. These puzzles are not solved, thus consigning Jeanne to perpetual illness (and then death).

111 The narration at this point is mediated through Hélène’s perspective.
a form of narrative. Jeanne’s symptoms form a text to be interpreted and corrected by
good medicine and good mothering” (239). Since both medicine and mothering
eventually fail, the reader is left to ponder the strength of narrative, and the ambiguity
and tension involved in reading signs.

Baguley determines that the presence of the doctor as authority figure is one of
the central paradigms of naturalist fiction: “the (male) doctor—or his substitute, the
narrator himself—observing and analyzing the (female) patient’s physiological plight and
its devastating consequences” (Naturalist Fiction 106). The doctor’s ability to diagnose
and treat is illustrated in the following dialogue between Doctor Deberle and Hélène:

“A-t-elle eu des convulsions étant jeune? ”

--Oui, monsieur, mais ces convulsions on disparu vers l’âge de six ans […]

“Connaissiez-vous des maladies nerveuses dans votre famille?

--Je ne sais pas... Ma mère est morte de la poitrine.”

Elle hésitait, prise d’une honte, ne voulant pas avouer une aïeule enfermée dans
une maison d’aliénés. Toute son ascendance était tragique. (18)

“Did she have seizures when she was young?”

“Yes, sir, but the seizures disappeared around six years of age […]”

“Do you know about any nervous illnesses in your family?”

“I don’t know... my mother died of a weak chest.”

She hesitated, ashamed, not wanting to admit to a grandmother shut away
in an insane asylum. All her ancestry was tragic. [my translation]
The passage once again highlights the fėlure that haunts the entire Rougon-Macquart family. But the passage also demonstrates that doctors rely upon a full disclosure of symptoms for a diagnosis, and Hélène exercises her option to not reveal all of her familial story.

Narrative authority is simultaneously undermined and reinforced during the characters’ (mostly Hélène’s) reveries. Here let us return to scenes of excessive viewing, or reveries of panoramic viewing in the novel. Une Page d’amour’s chapters end with characters in their rooms overlooking Paris. The first four instances situate Hélène at the window; the last scene positions Jeanne at the window (who catches a cold waiting for her mother to return home from a rendezvous with the doctor, and eventually dies). In what follows I examine a passage wherein Hélène is at the window, and recall Naomi Schor’s point about the window as a “neurologic point.” Observation and reverie are fused; Hélène is in the privileged position of the observer or viewer, yet there is also a point—Hélène’s rather than the narrator’s—regarding the inability of the eye to perceive all. Blurring, growing and kaleidoscopic shifts in Zola signal not only migraine distortions, but also unique moments of aesthetic awareness:

C’était, jusqu’aux faubourgs [...] une fourmilière de becs de gaz et de fenêtres éclairées, comme une poussière qui emplissant les lointains de la ville de ces myriades de soleils, de ces atomes planétaires que l’œil humain ne peut découvrir. [...] Par ces moments, on aurait pu croire à quelque fête géante, à un monument cyclopéen illuminé, [...] dont les lignes de lampions traceraient en traits phosphorescents l’étrange et énorme architecture. Mais la sensation qui revenait
était celle d’une naissance de constellations, d’un agrandissement continu du ciel.

(216)

It was just as far as the suburbs [...] a hive of activity, of gas lamps and lit
windows, [as if dust-filled], far away from the city, this myriad of suns, these
planetary atoms that the human eye could not discover. In these moments, one
could believe in some giant festival, in an illuminated cyclopean monument [...] and architecture upon which the lines of [Chinese] lanterns traced their strange phosphorescent features. But the sensation came back to one of a birth of constellations, of a continuous growing of the sky. [my translation]

In cataloging a “myriad of suns, these planetary atoms that the human eye could not discover,” Helene is able to imagine what Walter Benjamin described as the “optical unconscious.” 112 Something is hidden to the eye, but as Hélène contemplates the view, the hidden reality of an “illuminated cyclopean monument” is revealed. The cyclopean eye in the sky does not signal surveillance, but rather Hélène’s own experience of heightened perception. The language also invokes an aura, the movement of scintillating scotoma during migraine, as in the merging of phrases as Hélène’s perception widens (“this myriad of suns, these planetary atoms”). This continuous cosmic explosion and “growing” of the sky (resembling a play of strange lines and shadows or Chinese lanterns) is both a distorted, dusty vision and a heightened narrative perception or “double awareness.” While perception is figured as embodied here—Hélène is looking and thinking at the same time—the passage also emphasizes the inability of the human

112 Again, thank you to Janelle Blankenship for pointing out that Hélène’s vision here can be associated with Benjamin’s “optical unconscious.” See Walter Benjamin, “A Small History of Photography.”
eye to apprehend every material item of this world (indeed, Hélène does not demonstrate
the need to perceive all, master all, through her eye – some objects remain “dusty”). One
recalls Zola’s analogy of the transparent screen, the window frame, and reality. In this
analogy, Zola is not deterred by “distortion,” nor Hélène hampered when the view is
distant and “dusty.” These examples suggest a relative freedom of the viewer to
dismantle and re-assemble visual fragments, perceived elements of reality.

The pervasiveness of migraine, with its accompanying scotomatic and strained
vision and exhausted bodies, throughout Zola’s Rougon-Macquart cycle signals much
more than the author’s concern with infusing scientific discourse, practice, and
innovation into his approach to making fiction more “modern.” Migraine in Zola also
becomes fraught with anxieties about social constructions regarding gender, politics, and
vision and aesthetic questions about art and reality. Undoubtedly scientists’ findings in
the fields of optics and physiology, in addition to Darwinist beliefs, inform his fiction,
sometimes rather too rigidly. In his analysis of Seurat’s paintings in Suspensions of
Perception, Crary points out that the artist forces viewers to recognize the duration of
vision, and that Seurat “test[s] the limits and possibilities of an observer attentive to a
heterogeneity and simultaneity of sensory data” (161). Zola also tests our observational
limits with his sheer accumulation of verbs and adjectives and lengthy descriptive
passages, which almost work as a type of pointillism. One of the ways in which Zola
demonstrates the need to better understand gender and society, the new technology of
modernity, “sensory data” and the fragmentation of modern consciousness is through the
figure of the migraineur.
Chapter 4
Maximiliano Rubín’s Dead Head: Benito Pérez Galdós’ *Fortunata y Jacinta*

“The metaphysical man is dead.” Émile Zola

“...a knight errant—to cut a long story short—is beaten up one day and made Emperor the next.”
Sancho Panza, *Don Quixote*

“*don Benito el Garbancero*” (“*Don Benito trader in chick-peas*”) Valle-Inclán

Benito Pérez Galdós (1843-1920) was an admirer of Zola, and many of the Naturalist concerns of Zolian fiction—the spirit of scientific inquiry, a Darwinian concept of human degeneration, the belief that hereditary illness as well as social milieu shaped (and usually destroyed) an individual—also surface in Galdós’ fiction. However, Galdós complicates Zola’s tenets of naturalism in several ways, particularly in one of his most read and critically acclaimed novels, *Fortunata y Jacinta* (1886-7). While Zola’s naturalism limits his depiction of humanity to biologically and environmentally determined positions, Galdós is not quite so ready to abjure metaphysical ideas and the notion, however problematic, of individual free will or human agency (though he does critique institutions such as Catholicism, like Zola). As critic Jo Labanyi states, the two writers’ concern with neurosis leads them both beyond materialism and physical limitations; she argues that “[a]s in Zola’s case, Galdós’ interest in neurosis would lead him from belief in the supremacy of the physical to an increasing interest in the psychic” (14). This chapter examines Galdós’ concerns with illness—specifically migraine—neuroses, and

113 Cited in the first line of Stephen Gilman’s “The Spoken Word and *Fortunata y Jacinta*.”
perception, and the way a subject negotiates the construct of himself, in conjunction with his adherence and resistance to naturalism. The chapter begins with a relatively wide scope, in order to situate Spain and Madrid in relation to Britain and France, then narrows in scope to examine the role of Maximiliano Rubín and his migraines in *Fortunata y Jacinta* in relation to discourses regarding medicine and neurosis, narration and perception. This character’s debilitating migraines represent wider concerns regarding subjectivity and subjects in late nineteenth-century Spain: fluctuating gender roles, the crisis of religion and faith, the growth of urban centres and the collapse of class structures. Galdós uses Maxi’s migrainous body as a narrative tool to trouble the seemingly straightforward mimetic Naturalist method. This body occupies a liminal position in which the sufferer’s conceptions of boundaries between consciousness and the physical body, between gaze and objects are erased, thereby challenging traditional Western notions regarding materiality and perception.

**4.1 “Peste nacida en Francia:” Galdós, Nationality, and Nationalism**

Spain in the nineteenth century did not view itself as unified; while Spain dominates the Iberian peninsula in a cartographic sense, linguistically and culturally, people in the countryside did not necessarily believe that the centralized government in Madrid represented them. For example, there were great differences in custom between cities like Madrid and Barcelona; and language differences existed also, particularly between Castilian, Catalan, and Basque areas. Furthermore, Spain—in its architecture, literature, art, and custom, always had to consider that it was not a solely Catholic country, but was greatly influenced by Arabic and Jewish traditions as well. Writers like Galdós wanted to
prove that Spain was liberating itself from the grip of both the Catholic Church and the “leyenda negra,” the Black Legend of Spain’s supposed “backwardness,” (Rodgers 2005; Ribbens 1993; Vincent and Stradling 1994). Political instability in the peninsula itself also generated anxiety; like France, Spain in the nineteenth century experienced revolutions and republics. Militaristic and republican challenges to the Spanish monarchy started to occur with the first Carlist War from 1833-1840; in 1868, the “Glorious Revolution” (“La Gloriosa”) saw the overthrow of Isabella II’s reign (1843-1878) with a military coup and rebellion. The first republic in Spain was established in 1868, but remained precarious, due to arguments regarding constitutional rights; another king was set upon the throne in 1871, Amadeo I (his reign lasted two years). Galdós places the action of *Fortunata y Jacinta* within this politically volatile period. Spain had already lost lands it had held for centuries in Europe, and was losing its colonies in Latin America; these losses generated political and economic instability, and a crisis of national identity. While this crisis began during the nineteenth-century, many intelligentsia and politicians considered the country in ruins by 1898, with the loss of the last colonies in the New World.

During this period Spain also faced challenges to its economy, social-class system, and cities as innovations in science and technology were brought to the peninsula, although their expansion occurred at a different rate than in Britain or in France. Galdós reveals some of this dizzying change as the newly married, upper-bourgeois characters of *Fortunata y Jacinta*, Juanito Santa Cruz and Jacinta, tour Spain
for their honeymoon, rather than travelling to France or to Italy. Perhaps because she has lived a sheltered life in Madrid, Jacinta’s perspective is the narrative filter, on the train, as they pass through Valencia: “[...] la cual se anunció con grupos de algarrobos, que de todas partes parecían acudir bailando al encuentro del tren. A Jacinta le daban mareos cuando los miraba con fijeza” (1. 217; “[...] carob trees [...] seemed to come forth to meet the train at every direction. They made Jacinta dizzy when she stared at them” [65]). As the couple explore different cities, the sight-seeing also comprises factories, such as the cloth-works in Batlló and Sert; again Jacinta registers fascination with the environment, here the noise and smoke of modernity: “[Sus preocupaciones] quedaron completamente olvidadas o perdidas en un laberinto de máquinas ruidosas y ahumadas, o en triquitraque de los telares. Los de Jacquard con sus incomprehensibles juegos de cartones agujereados tenían ocupada y suspensa la imaginación de Jacinta, que veía aquel prodigio y no lo quería creer” (1. 214; “[Her worry] was completely forgotten or lost in a labyrinth of noisy and smoky machines or in the clattering of looms. Jacquard’s, with their incomprehensible sets of punched boards, absorbed Jacinta’s imagination and kept her in suspense; the miracle right before her eyes, and yet she still couldn’t believe it” [63]). Her experience of modern technology here reflects the optimism and faith in “progress” invariably experienced in Victorian England, but also catalogues a startling shift in perception. Jacinta is in awe of the miracles of modern technology. Yet despite her positivist belief in progress and the material world, she almost cannot trust her vision (“yet she still couldn’t believe it”). Indeed, railway vision

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114 The action of the novel at this point is spring 1871. The entire action of the novel takes place from 1869-1875, although it is not always developed in a linear narrative.
is itself deceptive, depicting trees in a dizzying pattern as if they would meet or hit the train at every turn. Yet Jacinta also views the factories from a privileged, voyeuristic position; she can lose her senses in the labyrinth of noise and smoke because she does not have to work there. Jacinta herself recognizes her position in relation to the factory girls: “[...] su generoso corazón se desbordaba en sentimientos filantrópicos, y su claro juicio sabía cara a cara los problemas sociales. [...] ‘cuánta lástima me dan esas infelices muchachas que están aquí ganando un triste jornal, con el cual no sacan ni para vestirse. No tienen educación, son como máquinas [...]’ ” (1. 214; “[...] her generous heart overflowed with philanthropic sentiments, and her good judgement confronted social problems clearly. [...] ‘[...] how sorry I am for those poor girls who come to earn a measly salary that’s not enough to live on. They don’t have any education; they’re like machines [...]’ ”[63]). While Jacinta simply cannot believe the “miracle” of modern technology and says she cannot trust her eyes (the tools of scientific positivism), she does understand the machinery’s effects on the female workers (they are like machines) and has an emotional and intellectual rapport with the women. Undoubtedly some irony is directed at Jacinta here; upper-middle class women were expected to participate in philanthropic projects, as Jacinta does later in the novel, and these projects, as literary critics such as Teresa Fuentes Peris and Collin McKinney demonstrate, are designed to contain and control

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115 Peris’ Visions of Filth: Deviancy and Social Control in the Novels of Galdós (Chapter 1) analyzes the ways in which the upper-and-middle classes sought to contain the lower classes through a variety of discourses, particularly those regarding health and medicine. McKinney’s Mapping the Social Body: Urbanisation, the Gaze, and the Novels of Galdós also uses a Foucauldian framework to reveal the way members of the power apparatus, such as public-health regulators and criminologists, sought to impose moral and physical health upon Spain’s population.
the supposedly unruly lower classes. The scene also reveals Spain’s concern with class and women, the pressing “woman’s question.”

While sections of volume 1 of *Fortunata y Jacinta* take its characters and readers outside of Madrid, the action is very much situated within and stimulated by that city itself; Galdós’ novel is a phantasmagoria of urbanization, as much as Zola’s novels are about Paris and Gissing’s about London. As in other European countries, the rise of industrialization drew migrants from the rural areas of Spain to the cities; however, McKinney states that the level of industry did not coincide with the population growth, a common problem regarding urbanization that was exacerbated in Madrid (18). The railway appeared during the reign of Isabel II, while public gardens were established or expanded (McKinney, 24; Frost, 59-63). Institutions and social reforms to treat and to regulate the poor and mendicant, criminality, and prostitution were established from the 1850s. In 1851, for example, the Leganés insane asylum opened outside of Madrid, and was intended to be a model for the better treatment of its inmates; this ambition remained throughout the century. However, the asylum became an example of horror regarding the treatment of the mentally ill, particularly the poverty-stricken ones (Villasante 3-10). Institutions such as this served to regulate rather than treat its patients.

Born in the Canary Islands, Galdós too migrated to Madrid and immersed himself in the phantasmagoria of the city. A voracious reader and writer, Galdós aligned himself with other voracious readers and writers of the nineteenth century, particularly Honoré de Balzac (1799-1850) and Charles Dickens (1812-1870). Like Dickens, Zola, and Gissing, he contributed frequently to various journals. He bought *Eugénie Grandet* in Paris in 1868; when he went back to Paris the following year, he bought all of Balzac’s works. In
1868 he translated, from French to Spanish, *Pickwick Papers* in 1868. Literary scholar Jo Labanyi, among others (Bly, 2004, 7; Ribbans, 1993, 45), notes that Galdós discovered Zola’s writings in 1878, and the impact was such that he stopped writing for two years: “His unusual two-year gap in productivity before writing *La desheredada* (1881)—from 1876-1879 he had published two to four novels a year—coincided with the discovery of Zola, six of whose novels he bought (in French) in 1878” (13). Stephen Gilman adds that “Galdós was greatly influenced by Zola, especially between the years 1880-5, when he was starting to write his second series of contemporary novels” (1993, 68). Translations of Zola’s novels started to appear in Spain in 1880.

In addition to exploring naturalist themes identified by critic David Baguley, such as the “fallen” women, the poverty-stricken, and harsh urban environments, Galdós also employed naturalist techniques. In the Preface to the 1913 (French) translation of *Misericordia* (first published in Spain in 1897), he reveals that he conducted much “field research” particularly in the working class, marginalized, and poverty-stricken areas of Madrid:

[… ] hubo de emplear largos meses en observaciones y estudios directos del natural

[…] Acompañado de policías escudriñé las «Casas de dormir» de las calles de Mediodía Grande […] y para penetrar en las repugnantes viviendas donde

116 The information cited here is from the “Introduction” of Labanyi’s edited edition of *Galdós*.

117 Madrid’s poverty-stricken spaces were also designated by those in authority—from the police, to the Church, to a novelist like Galdós himself—as areas of vice, dirt, illness, and criminality. Galdós’ tone here seems to damn the marginalized populace, while his novels actually attack the general bourgeois’ ignorant and arrogant attitude toward the poor.
celebran sus ritos nauseabundos los más rebajados prosélitos de Baco y Venus,
tuve [que] disfrazarme de médico de la Higiene Municipal. (223)

[...] I had to spend months in observation [...] I went with a police escort to
investigate the lodging houses in Calle de Mediodía Grande [...] To gain entrance
to the disgusting places where the lowest followers of Bacchus and Venus
celebrate their rites, I disguised myself as a doctor from the Public Health
Department. (41; trans. Labanyi)

His observation here is not objective and transparent, but is clandestine and subjective,
under an art of disguise.¹¹⁸ In addition to admitting to the use of naturalist techniques in
this preface (Galdós also mentions that he had made copious notes for Fortunata y
Jacinta [(42; 224)], the preface further (and more ominously) betrays the way in which
he, as novelist, intellectual, and member of the bourgeois, held a privileged position in
relation to the lower classes, and that he took part in the disciplinary modes of
surveillance and discourse that identify, represent and control the urban population, as
represented by the police and constabulary presence.

Thirty-three years before this preface, however, Galdós was looking to the middle
class as a site from which the Spanish novel could be rejuvenated, made more “realistic”
rather than focusing upon “costumbrismo,” novels detailing customs of different rural
customs throughout Spain, or tales that could be equated with the penny-dreadfuls

¹¹⁸ Galdós also compares his visits to London with his study of Madrid: “Years earlier I had visited
Whitechapel, the Minorities and other districts near the River Thames in the East End of London. I am not
sure whether the misery there or that of Madrid’s slums is worse. Certainly, at least in Madrid the glorious
sunshine at least makes everything look more cheerful” (41).
published in Britain. In 1870, he published a seminal essay regarding authorship, “Observaciones sobre la novela contemporánea en España” (“Some Observations on the Contemporary Novel in Spain”). Like many politicians, intellectuals, and citizens of nineteenth-century Europe, Galdós was concerned with the construction of a national identity, and the ways in which writers and artists might shape that construction. For all his admiration of Balzac and Dickens (he had not discovered Zola at this point), in 1870 he decries the influence of foreign (read: French) novels in Spain: “[...] la sustitución de la novela nacional de pura observación, por esa otra convencional y sin carácter, género que cultiva cualquiera, peste nacida en Francia, y que se ha difundido con la pasmosa rapidez de todos los males contagiosos” (118; “[...] instead of a national novel based on observation, we are saddled with a bland variety churned out to order, a plague imported from France which has spread with the dizzying speed of all contagious diseases” [31]). Like Klemens von Metternich’s remark about revolution, Galdós frames the French influence utilizing a discourse of contagion. At this point, a time of revolutions, fallen monarchies, and relatively unsuccessful republics in Spain, Galdós considered the novel a genre of peace: “La novela es producto legítimo de la paz” (117; “the novel is a true son [daughter] of peace” [30]). He also considered the middle class to be the best subject for novels, because of the middle class’ variety and energy in the

119 Harriet S. Turner points to Galdós’ rejection of romantic and adventure novels, and aligns him with some of the scorn nineteenth-century authors held regarding popular reading habits.

120 Gifford Davis asserts that the debate about art, beauty, and realism in Spain was already contentious before the introduction of Zola.

121 The translations here are from an excerpt in Labanyi’s Galdós, pages 40-2.
domains of trade, commerce, and government: “Pero la clase media, la más olvidada por
nuestros novelistas, es el gran modelo, la fuente inagotable” (122; “It is the middle class,
so neglected by our novelists, which is our model, our inexhaustible source” [33]).

While he distinguishes the middle class as an ideal observational subject in 1870, his later
novels and essays demonstrate that he critiques the pretentious, controlling, and myopic
nature of this driving force of capitalism and consumerism.

Galdós’ allegiance to Naturalism was not absolute and changed considerably
during his career; for many literary critics, the expansive Fortunata y Jacinta plays out
these struggles. According to Arthur Carl Holmberg, “Maxi represents a battle ground for
two antagonistic attitudes that Galdós himself had not yet resolved: Romantic aspiration
and Naturalistic determinism” (134). In the article “The Consciousness of Fortunata,”
Stephen Gilman argues that by the time Galdós was writing Fortunata y Jacinta, the
author had significantly revised Zola’s naturalist program: he “[had] decided to undertake
what might be called a major Cervantine offensive against Zola. Hereditary and urban
environment are no longer to be allowed to determine individual lives and to distort or
shrink their consciousness[;]” (1970, 57). While Gilman makes this point in relation to
the character of Fortunata, the character Maximiliano Rubín too escapes such
determination—to a certain extent (although Gilman admits that Galdós did not abandon
Naturalistic techniques altogether [59]). Eamonn Rodgers, in the essay “The Reception of
Naturalism in Spain,” points out that there was a larger context to Galdós’ ambivalence

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122 Galdós is reacting against the Spanish Romantics’ writings on the peasants in different regions of
Spain, which he believed were too “picturesque” and did not offer a complete view of Spanish society.
Again, as Fortunata y Jacinta demonstrates, Galdós did not write solely about the middle class either,
although it is clear that he realizes that is the novel’s audience.
toward the naturalist turn in later nineteenth-century Spain and France; (in broad terms) Spanish nationalism invested in the development of the novel (Cervantes) and resisted external influences, especially French (125). Moreover, for Rodgers, intellectuals and gubernatorial attempts to introduce modernized thinking (in sciences, for example) were hampered by the still relatively strong Catholic church: “[...]the materialist assumptions associated with nationalism proved difficult to assimilate in a society where reality had traditionally been conceived of in religious, or at least spiritual, terms” (124). Yet, as Rodgers notes elsewhere (“Galdós’ La desheredada and Naturalism”), Spanish writers were attracted by the Naturalists’ resistance to Romanticism (283). Indeed, Galdós renders explicit this tension not only in the character of Maximiliano Rubín, but also in one of the chapters: Part 3, chapter 6 in Fortunata y Jacinta is entitled “Naturalismo espiritual.” For Stephen Gilman in Galdós and the Art of the European Novel: 1867-1887, the chapter injects “[...] Cervantine ‘incitation’ into the humdrum, contextual, milieu-oriented documentation of Zola was to produce an unprecedented ‘naturalismo espiritual’ capable of exploring regions of consciousness [in the transformation of Fortunata]” (135). Certainly Maxi and his migrainous body represent a battle ground for two antagonistic attitudes of the two literary movements of Romanticism and Naturalism. However, I would argue that this body does not harken back to Romanticism so much as he looks forward to proto-modernist concerns with fragmentation, perception, and play, as he uses an observational style to wrestle his way out of Naturalistic determinism.

4.2 “El trono y la tienda”: The Sign of Rubín

Maximiliano Rubín is a study in pain, often referred to by the narrator (sometimes fondly, sometimes ironically) as a “molusco” (1.457; “mollusc”) and "El pobre chico” (“poor
boy’). The novel devotes an entire chapter to introduce this character, providing a
detailed account of his genealogy, environment, and physical and psychological
development; however, the narrative sets up several frames (or shells) before the reader
reaches Maxi himself. Like many nineteenth-century novels, the first section reveals its
interest in familial contexts, historical and hereditary; the Santa Cruz clan and the Arnaiz
clans, with their status as flourishing upper-bourgeois members within the textile trade,
are contrasted with the genealogy of the falling Rubín family. While the Rubíns are also
members of the middle class, old Madrileña shopkeepers, their fortunes are falling with
the rise of industrial capitalism in nineteenth-century Spain:

La venerable tienda de tirador de oro que desde inmemorial tiempo estuvo en los
soportales de Platerías, entre las calles de la Caza y San Felipe Neri, desapareció,
si no estoy equivocado, en los primeros días de la revolución del 68. En una
misma fecha cayeron, pues, dos cosas seculares, el trono aquél y la tienda aquélla,
que si no era tan antigua como la Monarquía española, éralo más que los
Borbones, pues sin fundación databa de 1640, como lo decía un letrero muy mal
pintado en la anaquelería. Dicho establecimiento solo tenía una puerta, y encima
de ella este breve rótulo: Rubín. (1. 447)

The venerable shop of gold-plated bellpulls that had stood for time immemorial in
the arcades on Platerías Street between La Caza and San Felipe Neri streets
disappeared, if I am not mistaken, at the outbreak of the revolution in 1868. So in
the same year, two secular orders fell: the throne of the Bourbons and this shop,
which if it was not as old as the Spanish monarchy, was older than the Bourbons,
for it had been founded in 1640, as a very badly painted sign on a case of shelves
announced. Said establishment had only one door, above which was this brief
sign: Rubín. (227; trans. Agnes Moncy Gullón)

In addition to setting up the action of the story, this brief description situates the historical
moment of Spain as a period of flux, unrest, and revolution. The Rubín’s financial ruin is
ironically linked to the fall of the monarchy; both are situated by the narrator as relics of
past centuries (the date 1640 recalls the Spanish Golden Era of empire, art, and literature;
the store is established not long after Cervantes’ Quixote began to haunt the Spanish
cultural imaginary). The Santa Cruz family is similarly linked to the French monarchy
when the narrator facetiously dubs Juanito “el delfín,” or the dauphin, the first-born
inheritor of the French throne. The paragraph also demonstrates that while some middle
class families, like the Santa Cruces, flourish under the new capitalism, others fall;
Galdós’ historical point here is similar to Zola’s, as the latter records the sweeping
changes wrought by capitalism in Paris (for example the modernizing of small shop-
keeping, the growth of larger department stores, and consumerist capitalism in Au
Bonheur des dames). The narrative of decline and unrest is catalogued as a seismic shift
that sets the stage for the struggle to come.

Equally important for this analysis, the paragraph reveals how the narrative
complicates the often omniscient (but not always omniscient) perspective of the naturalist
narrator by engaging in a conversational manner, as if the narrator were reciting the story
in a tertulia or as a part of a gossiping session with Doña Lupe. As literary critic Stephen
Gilman maintains in his insightful article “The Spoken Word and Fortunata y Jacinta,”
the characters and the narrator are governed by orality (and of course to emphasize the
“oral” nature of the novel is also to draw attention to the fact that it is indeed a written
artefact, and that both are subject to the constructions of narrative). Gilman writes, “Taken as a whole, the language of the novel is that of table talk, the ‘peña’ (bar) and the ‘tertulia’ (social gathering). It is a semi-public, social language, situated midway between oratory and the verbal intimacies of private conversation” (61). According to Gilman, however, Galdós’ interest in and emphasis upon the oral nature of the novel moves beyond the naturalist method of recording every-day speech: “The naturalists transcribe dialogues and oral clichés as part of a written whole; they do not use them creatively. For the naturalists, it is typical for a character to betray his fundamental lack of consciousness through his limited capacity for meaningful speech. Whereas Galdós [...] focuses his intention on his characters’ consciousness” (69). While more recent critics, such as Susan Harrow in particular, have demonstrated that Zola and his fellow naturalists are more sophisticated in their narrative techniques than Gilman allows here, the conversational narrator in *Fortunata y Jacinta* disrupts the supposed objectivity of the Zolian project by setting up a jovial (sometimes misleadingly jovial) rapport, in a way that the French writer’s narrators do not. Yet the narrator’s language remains as colloquial as the characters’. Moreover, Galdós’ narration constructs itself in this novel in two ways that a Zolian narration never would: the narration is in the first person, and the narrator playfully draws attention to his fallibility (“si no estoy equivocado;” “if I am not mistaken”). Zola’s characters are fallible, all too fallible, but his narrators are not, since they strive to maintain the semblance of objectivity.

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123 Of course, as I pointed out earlier, Galdós did take notes from everyday life.

124 “Equivocado” in Spanish means “mistaken,” not equivocated. Nonetheless equivocation is one of the central narrative techniques of the novel, with parody and irony.
Critics have pointed out Galdós’ debt to Cervantes, and the comedy exemplified by the paragraph above reveals *Fortunata y Jacinta* as a comedic vision, at least when compared to Zola’s pessimistic, deterministic world view; the figure of Maxi, however, reveals a troubling comedy.\(^{125}\) This is important, because the position in which Maxi finds himself at the end of the novel (confined to the Leganés mental asylum) must be read through this introduction to his character, and what is important in this introduction to Maxi Rubín is the way the narrative frames incite *play* (Cervantine, certainly—but also Bakhtinian). Labanyi observes that Galdós borrowed from Cervantes, “his fascination with obsession and ironic self-reflexivity” (29). The example of Maxi’s lineage is but one point in which ironic self-reflexivity comes into play, with its emphasis upon signs. If the narrative play indicates a move to dialogue, the literal signs—fading, inscribed, old, new—indicate that the history is *written* as well, more fluid than fixed.

The conflation and the importance of reading, writing, and signs are noted further, as the narrator further situates Maximiliano and his family. The narrator refers to another writer of the Rubín familial history who insists, in his publications, that the surname is actually a Jewish one, adopted by converts to Christianity:\(^ {126}\)

\(^{125}\) David Baguley, in *Naturalist Fiction: The Entropic Vision*, demonstrates that Zola uses irony as well, particularly in relation to the tragic, fallen figures such as Gervaise in *L’Assommoir*. However, Zola’s ultimate determinism denies any free will (which is his point—individuals are not individuals, they do not have free will), while Galdós’ more playful narrative allows characters to move around more.

\(^{126}\) See Akiko Tsuchiya’s “Maxi and the Signs of Madness: Reading as Creation in *Fortunata y Jacinta*” for the myriad ways in which Maxi interprets incidents around him.
Federico Ruiz, que tuvo años ha la manía de escribir artículos sobre los Oscuros pero indudables vestigios de la raza israelita en la moderna España (con los cuales artículos le hicieron un folletito los editores de la Revista que los publicó gratis), sostenía que el apellido de Rubín era judío y fue usado por algunos conversos que permanecieron aquí después de la expulsión. «En la calle Milaneses, en la de Mesón de Paños y en la Platerías se albergaban diferentes familias de ex deicidas, cuyos últimos vástagos han llegado hasta nosotros, ya sin carácter fisonómico ni etnográfico.» Así lo decía el fecundo publicista, y dedicaba medio artículo a demostrar que el verdadero apellido de los Rubín era Rubén. Como nadie le contradecía, dábase él a probar cuanto le daba gana […] No quisiera equivocarme, pero me parece que todo aquel judaísmo de mi amigo era pura fluxión de su acatarrado cerebro […] según el tiempo y las circunstancias. (1. 448)

Federico Ruiz, who years ago was obsessed with writing articles on “The Obscure but Unquestionable Remains of the Israelites in Modern Spain” (articles that the editors of a magazine collected for a pamphlet they published at no charge to him), maintained that the name Rubín was Jewish and had been used by certain converts who stayed here after the expulsion. “Lodging on Milaneses, Mesón de Paños, and Platerías streets were various ex deicidal families whose youngest descendants are alive today and whose ‘physiognomical’ and ‘ethnographic’ character is gone.” Thus wrote the prolific publicist, and he devoted half the article to proving that the Rubíns’ real surname was Rubén. Since no one
contradicted him, he devoted himself to proving whatever he wanted [...] I wouldn’t want to be wrong, but it seems that all my friend’s Judaism was just a cold in his head or in his brain [...] depending on the weather and the circumstances. (227; trans. Agnes Money Gullón)

Once again the narrative revels in self-reflexive irony as the narrator’s citation and interpretation of a colleague’s writing invites comparison to his own chronicle of the Rubín family; either recital “proves whatever [it] wants.” The passage also reflects that in Spain journalism was as teeming and contentious as in France (Zola) or England (Gissing, Grand). Furthermore, the narrator draws attention to the era’s scientific and medical discourse and its concerns with physiognomy and ethnicity; the narrator himself has devoted a great deal of space to speculate about the Rubín’s ethnicity, and he will devote even more space (quoted below) to Maxi’s physical appearance. In this way, the newspaper writer Federico Ruiz becomes a naturalist himself. The narrator’s dismissal of his colleague’s claims by attributing them to variables like an ailment, or the weather, ironically undercuts not only Ruiz’s but his own argument, and underlines the fallibility of narrative. Finally, the narrator asks readers to ignore a facet of the Rubín family that actually cannot be ignored, for this new lineage further marginalizes them more than they already have been. These paragraphs insist upon locating Maximiliano and the Rubín family in a specific, marginalized Spanish history, and force its readers to recognize that the country’s population and national identity includes several ethnicities.127

127 The Spanish edition of Fortunata y Jacinta carries the following footnote: “La ascendencia judía de los Rubín—como en el caso de los Santa Cruz—es evidente” (447; “The Rubín family’s Jewish heritage—as in the case of the Santa Cruz family—is evident” [my translation]). Although almost many critics refer to Maxi’s ethnicity, I have not yet encountered a discussion of the Santa Cruz Jewish background.
4.3 “El pobre jaquecoso”: Martyr and Madman

After situating the Rubín fortune in the late 1860s to early 1870s Madrid, the narrator, in good naturalist fashion, catalogues the Rubín family, emphasizing the relationship between Maxi and his two older brothers, drawing attention to—and obfuscating—a genealogical splinter: “El motivo de la ruina, según opinión de todos los amigos de la familia, fue la mala conducta de la esposa de Nicolás Rubín, mujer desarreglada y escandalosa, que vivía con un lujo impropio y trapisondas” (I. 448; “The reason for the [family’s] ruin, according to all the family friends, was the wife’s misconduct. Nicolás Rubín’s wife was an extravagant and scandalous woman who lived in a style beyond her means and who caused a lot of talk with her love affairs” [227]).

Following naturalist tenets, the mother’s transgressive sexuality and love of luxury bring her family to ruin; yet unlike the naturalist novels of Zola, Galdós does not relentlessly chronicle her downfall. The usual focus upon a female body and fall is, in this novel, shifted to Maximiliano.128

The narrative slips into Naturalism again, however, with its focus upon heredity: “De esta heterogeneidad de las tres caras vino sin duda la maliciosa versión de que los tales eran hijos diferentes padres. [...] Algo tenía de común, ahora que recuerdo, y era que todos padecían de fuertes y molestísimas jaquecas” (I. 449); (“It was undoubtedly the heterogeneity of those three faces that gave rise to the malicious rumor that they were

128 Fortunata and Mauricia la Dura are examples of fallen women in the naturalist mode. Yet Fortunata is given more prominence and (worthiness) by the end of the novel, despite transgressing traditional social taboos: being separated from her bourgeois husband, making her violent attempt of a rival’s life, and giving birth to a child out of wedlock (whom she bequeaths to Jacinta and thus legitimates the child, and Fortunata herself). Stephen Gilman, in particular, emphasizes Fortunata’s transcendence in the essay “The Consciousness of Fortunata.” Mauricia la Dura remains an undomesticated woman of the streets, despite her time within the Michelas convent and despite her (supposed) repentance upon her deathbed.
sons of different fathers [...] They did have one thing in common, now that I think of it: they all suffered from severe and terribly upsetting headaches” [228]). As Kevin Larsen points out, here the narrator suggests that the mother’s promiscuity causes such “weakening” of the gene pool; Larsen observes, “migraine [...] is physiologically emblematic of the ongoing dysfunction of the home where they grew up” (413). On a meta-narrative level, the migraine is also emblematic of Galdós’ quarrel with Naturalism.

Indeed, Maxi is fashioned to bear the brunt of the supposed “weakening.” Juan Pablo, the eldest, is handsome and physically strong (228; 449), while Nicolás, the priest, is more “animal-like,” due to his abundance of hair (228; 449). At age nineteen, the youngest appears pale and weak, in comparison to his older brothers: “Maximiliano era raquítico, de naturaleza pobre y linfática, absolutamente privado de gracia personales. Como que había nacido de siete meses y luego me le criaron con biberón y con la cabra” (I. 449; “Maximiliano was rickety, weak, lymphatic, and completely devoid of physical charm. After all, he had been born at seven months and then brought up on a bottle and goat’s milk” [228]). In continued naturalist fashion, biology and environment shape the development of the body, but as we will see, Galdós uses migraine to complicate this approach to realism and the question of gender.

The text repeatedly dwells upon Maximiliano’s physicality, marking the signs of illness as well as the effects of an incipient modernity. In her essay *Powers of Horror*, Julia Kristeva identifies such a modern body as the site of constant instability, and a body which is expelled, rejected, or rendered useless: “It is thus not lack of cleanliness or health that causes abjection but what disturbs identity, system, order. What does not respect borders, positions, rules. The in-between, the ambiguous, the composite” (4). In
numerous passages, Galdós focuses on Maxi’s (migrainous) body; the ways in which it does not conform intensifies in the description of the young man as he embarks upon his studies to be a pharmacist:

Era de cuerpo pequeño y no bien conformado, tan endeble que parecía que se lo iba a llevar el viento, la cabeza chata, el pelo lacio y ralo. […] Su pelo era lustrosa, fina, cutis de niño con transparencias de mujer desmedrada y clorótica. Tenía el hueso de nariz hundido y chafado, como si fuera de sustancia blanda y hubiese recibido un golpe, resultando de este no sólo la fealdad sino obstrucciones de respiración nasal, que eran sin duda la causa de que tuviera siempre la boca abierta. Su dentadura había salido con tanta desigualdad que le cada pieza estaba, como si dijéramos, donde le daba gana. […] ¡pero si tenía el pobrecito cada dolor de muelas […] A los veintitrés años tuvo una fiebre nerviosa que puso en peligro su vida; pero cuando salió de ella parecía un poco más fuerte […] y sólo las jaquecas persistían. (1. 456-58)

He was small, not very well built, and so puny that it seemed the wind would blow him away; his head was flat; his hair, lank and thin. […] His skin was shiny and fine, baby skin, with the transparency that one sees in emaciated, chlorotic women. The bone in nose was sunken and blunt, like a soft substance that had been hit hard; it not only looked ugly, it also obstructed his nasal passages, which is probably why he went around with his mouth open. His teeth were so uneven that each tooth seemed to have made its appearance on a whim […] the poor boy had toothache after toothache […] At twenty-three he developed a fever due to his
nervous condition and it almost took his life, but when he got over it he seemed a bit stronger [...] and only the headaches persisted” (1. 232-4).

This is the first of several instances in which the narrator simultaneously infantilizes and feminizes Maximiliano Rubín, as exemplified by the focus upon his fine skin and smaller frame; his scant hair (and inability to grow a moustache) also renders him less “masculine” than his older brother. Readers are forced into a physiognomic reading, or interpretation of symptoms, that had medical currency at the time. Maxi is also associated with ailments that in the nineteenth-century were considered specifically female conditions, such as chlorosis (anemia). The unspecified “nervous condition” also invokes one of the many symptoms of hysteria, again typically associated with woman. Sander Gilman observes that Jewish bodies, particularly male Jewish bodies, were designated as hysterical sites by physicians of the late-nineteenth century: “The Jew is the hysteric; the Jew is the feminized Other; the Jew is seen as different, as diseased. This is the image of the hysteric with which the Jewish scientist was confronted. His ‘startle’ effect was to see himself as the Other [...]” (411). More specifically regarding Maxi, literary critic Stephen Gilman finds that Maxi, as a “nineteenth-century ‘loco-cuerdo,’ [n]aturalistically handicapped to the point of being grotesque [...] is a creature of caricature” (169). Indeed

The “startle effect,” according to Sander Gilman in the essay “The Image of the Hysteric,” was one of the ways in which Charcot imposed a re-inscription of hysteria upon his female (and male) patients. Charcot’s extensive use of photography is well known; after taking photographs to document, regulate, and systematize hysteria, he asked the women to look at the images of themselves, to see themselves (or herself) in the picture. The “startle effect” occurs when the subject recognized him/her “self” in the picture, which consequently forces him/her to acknowledge the hysteria. Although Gilman specifically discusses Freud in this passage regarding the scientist as forced to recognize himself as other (when the Jewish Freud travelled to France to study with Charcot), I think the passage also reverberates for Maxi because his he is persistently singled out by the narrator and other characters as an Other. He is forced to recognize this difference when he marries Fortunata, but as his daydreams and wanderings demonstrate, he is very aware that he does not constitute what is considered a normative, masculine role.
in characteristic naturalist narration the body, particularly its abject elements, is
magnified for display, but Galdós’ (mocking) humour (‘‘which is probably why he went
around with his mouth open’’) and qualifiers of sympathy (‘‘poor boy’’) undercut the
portrayal. Remember that for French writers, as critics such as David Baguley have
demonstrated, “falling” characters, abject characters, in French naturalism, were more
often than not the female characters (examples include Gervaise in L’Assomoir or the
Goncourt brothers’ Germinie Lacerteux in their homonymous novel). While abject,
“fallen” females certainly appear throughout Fortunata y Jacinta, characters like
Fortunata and even Mauricia la Dura are far less abject than Maxi; he carries every sign
(stigma) associated with the naturalist fallen woman.

Based upon this passage regarding Maxi’s body, critics have already analyzed the
signs of Maximiliano Rubín’s various ailments, diagnosing him with everything from
congenital syphilis to epilepsy. Michael Stannard’s dissertation, which focuses upon the
ways that Galdós incorporates degeneration theory into his fiction, unequivocally asserts
that Maxi’s body displays all of the signs of congenital syphilis (for example, the
evidence of the sunken and blunt nose). \( ^{130} \) Joan Connelly Ullman and George H. Allison,
in “Galdós as Psychiatrist in Fortunata y Jacinta,” diagnose Maxi with “borderline
psychotic personality” (8) and believe that his migraines and respiratory problems are
psychosomatic in nature (11). Other critics focus on literary precedents for the character,
looking particularly to Zola and naturalism; for example, Stephen Gilman, in Galdós and
the Art of the European Novel: 1867-1887, suggests Camille Raquin (of Zola’s Thérèse

\(^{130}\) Stannard’s dissertation mentions migraine once, in passing.
Raquin), based on both characters’ weak physical condition, and Auguste Vabre from Pot Bouille (212-13; chapter three of thesis offers associations between Auguste and Maxi).

E. Dale and A. Randolph suggest that Maxi Rubín was inspired by a reading of Maudsley’s The Pathology of Mind, first published in 1879 and subsequently translated into French and Spanish (51-3). The fact that Maxi’s abject body may be read and diagnosed so differently, and so plausibly, further reveals Galdós’ troubling of Naturalistic determinism.

Yet there is more to this depiction than caricature or grotesquetry. Galdós was interested in medicine, and several of his friends were physicians (Stannard 2) or prominent psychiatrists in the Spain of the late nineteenth century, for example José María Escuder (Bly 7) and Luís Simarro, who observed Charcot’s practices in Paris (Stannard 117; 124). In making Maxi a pharmacist, Galdós insists upon the Naturalist motif of conflating the doctor with an interpreter of a text: “Maximiliano quería saberlo todo. Era como el buen médico que le pide al enfermo las noticias más insignificantes del mal que padece y de su historia para saber cómo ha de curarle” (484; “Maximiliano wanted to know everything [about Fortunata]. He was like a good doctor who asks his patient about the most significant details related to the illness being suffered and wants a complete history so as to know how to treat the case” [252]). As Maxi interprets Fortunata, so readers and the narrative interpret Maxi; if Maxi becomes intrusive and controlling in his role as “good doctor,” so do readers self-reflexively become intrusive
and obsessive with Maxi’s body.\textsuperscript{131} As Akiko Tsuchiya argues in her seminal article, “Maxi and the Signs of Madness: Reading as Creation in \textit{Fortunata y Jacinta},” Maxi is the most sophisticated interpreter of signs in the novel. She points out that Maxi’s role as doctor (and educator of Fortunata) also aligns him with an authorial perspective: “Maxi’s role as interpreter is central to the project of the novel [for it] represents a self-conscious process of interpretation,” (54), and by extension, construction of a narrative. For Tsuchiya, “Of all the interpreters within the novel [...] Maximiliano Rubín maintains the greatest consciousness of the signs around him; consequently he is better able to produce his own fictions” (56).

Significantly, however, even as Maxi grows slightly stronger as he grows into his twenties, “sólo las jaquecas persistían” (“only the headaches persisted”). As Kevin Larsen points out (411), Galdós does specifically use the Spanish word, “jaqueca,” deriving from the medieval Persian word “shaqhiqheh” meaning “unilateral headache” (Gorji and Ghadiri 510), for migraine throughout the novel. It is not a word that is used interchangeably with “headache,” “neuralgia,” or “bilious headache” (and this diverges sharply from what Liveing has shown, that in the nineteenth century there was a tendency to conflate “migraine” with these other terms in English). When addressing the use of the migraine in \textit{Fortunata y Jacinta}, Larsen offers a persuasive argument that “[...] migraine in the novel is not just a picture of pain, but articulates, aesthetically and biologically, a

\textsuperscript{131} While Maxi plays the role of doctor in his surveillance of Fortunata, the women around him act as his care-takers when he falls ill with migraine, depression or mania. On their wedding night, Fortunata administers the laudanum for his migraine, but not in the dose that he prescribes: “Fortunata cogió el cuenta gotas y acercando la luz preparó la pócima. En vez de siete gotas no puso más que cinco. Le daba miedo aquella medicina” (1. 676); “Fortunata picked up the eyedropper and, drawing up the lamp, she prepared the potion. Instead of [seven] drops she added only five. The medicine frightened her” (394).
trance-like state of altered awareness in the characters and perhaps in the reader” (419). Indeed, Maximiliano’s migraines induce such states of altered awareness, but so do his mystical reveries, his hallucinations, and the drugs he takes to combat his pain.

Importantly, Franz R. Thomas reminds us that Maxi’s work in the Samaniego pharmacy not only put him into contact with drugs that would ease his migraines, but would also likely produce symptoms that would appear as if Maxi were experiencing a migraine.132 Why insist on migraine, then, when so many other medical diagnoses make sense, and how do these migraines contribute to Maximiliano’s perception and the troubling of the real?

Although Galdós adheres to the naturalistic emphasis upon physicality and degradation or degeneration of that physicality, the migraine as he employs it also points to a modernist sense of fractured experiences. While the narrative is linear and rather “materialist” (to employ Virginia Woolf’s term) in the Naturalist manner, the very same accumulated, repeated detail and imagery heighten the experience of pain:

132 The narrative shows that Maxi often treated himself with new potions, as he learned more about working in the pharmaceutical trade: “[…] se administraba el ioduro de potasio en todas las formas posibles, y andaba siempre con un canuto en la boca aspirando brea, demonios o no sé qué” (1.456; “[…] he started to mix his own remedies, doctoring himself with potassium iodide in all possible forms; he went around with a little stick of it in his mouth, reeking of pitch or God knows what” [232-3]). Elsewhere, Maximiliano’s idealism is fueled by hashish pills; Fortunata notices “[…] que el enfermo se animaba extraordinariamente, llegando hasta mostrarse alegre, locuaz y poniendo un singular calor en sus proyectos de apostolado” (2. 379; “[…] that the sick man was getting extremely excited, reaching the point of being happy, talkative, and enthusiastic about his apostleship projects” [700]). Notably, the “farmacia” in which Maximiliano works also carries ergot of rye, a fungus known for its hallucinogenic properties. Maxi knows about this drug, as one of his colleagues asks, “¿Ha preparado usted el cornezuelo de centeno?” (2. 424; “Have you got the ergot of rye ready?” (731). Ergot is used to battle vasoconstriction, as occurring in migraine; ergot was synthesized in the twentieth-century (and also became the basis for lysergic acid diethylamide [LSD]). For a history of ergot, see P.J. Koehler and Isler, H. Isler’s article, “The Early Use of Ergotamine in Migraine: Edward Woakes’ Report of 1868, Its Theoretical and Practical Background and Its International Reception.” These authors identify English doctor Edward Woakes (1837-1912) as the first to use ergot in the treatment of migraine (687-9).
Provocado sin duda por los emociones de aquellas días, por el largo debate con su hermano Nicolás, y más aún quizás por los insufribles ronquidos de éste, apareció el temido acceso. Desde medio noche sintió Maxi un entorpecimiento particular dentro la cabeza, acompañado del presagio del mal. La atonía siguió, con el deseo de sueño no satisfecho y luego una punzada detrás del ojo izquierdo, lo cual se aliviaba con la compresión bajo la ceja. […] Resolvíase luego la punzada el dolor gravativo, extendiéndose como un cerco de hierro por todo el cráneo. El trastorno general no se hacía esperar, ansiedad, náuseas, ganas de moverse, a las que seguían inmediatamente ganas más vivas aún de estarse quieto. Esto no podía ser, y por fin le entraba aquella desazón epiléptica, aquel maldito hormigueo por todo el cuerpo. Cuando trató de levantarse, parecióle que la cabeza se abría en dos o tres cascos, como se había abierto la hucha a los golpes de la mano almirez. […] Había aparecido el clavo, que era la sensación de una baquetilla de hierro caliente atravesada desde el ojo izquierdo a la coronilla. Después pasaba al ojo derecho este suplicio, algo atenuado ya. (1. 557)

Provoked, undoubtedly, by the long stress he was under, the long debate with his brother, and more so, perhaps, by Nicolás’ insufferable snoring, the feared attack had materialized. From midnight on, Maxi felt that peculiar deadening in his head, accompanied by the warning. The debility continued along with his frustrated desire to sleep, and then he felt the darting pain behind his left eye that he relieved a bit by pressing the skin below his eyebrow. […] Then the sharp pain grew heavy, spreading itself like an iron blockade advancing through his skull. The general malaise developed shortly thereafter: anxiety, nausea, restlessness,
and then an intense need to rest. It couldn’t go on like that and finally he was
overcome by that epileptic uneasiness of his, that cursed tingling he felt all over.
When he tried to get up, he felt as if his head were splitting in several places, just
as his piggy bank had split open when he smashed it with his pestle. [...] He felt
something like a nail, a hot iron rod, crossing from his left eye to the crown of his
head. Then the torture shifted to his right eye, somewhat milder this time. (308)
The “split” of migraine is presented with excruciating naturalistic verisimilitude. For
example, Maxi feels “that peculiar deadening in his head, accompanied by the
warning”—although the text does not explicitly mark a scotoma here, he certainly
experiences the aura, with the combination of the “entorpecimiento”/ “dead[en]ging of his
head,” as well as the “presagio del mal” / ‘warning.” He also experiences “aquel
hormigueo epiléptico” / “that epileptic tingling”; as Esther Lardreau explains, in
nineteenth-century thought, one was starting to distinguish between the aura that
accompanied migraine and the aura that accompanied epilepsy. Maxi experiences a
particularly tactile aura here. Yet the eyes and vision are also emphasized, through pain;
there is a seismic shift between the pain from his left to his right eye. He is rendered
abject in modern terms: the “splitting” of his head and the searing pain of the “hot iron
rod” echoes the sense of fracture induced by the “general malaise” and anxiety of
industrial modernity (one might also think of the women working in the noisy factory or
modern warfare symbolized by the iron blockade).133

133 Note also the way in which Maxi is framed as a martyr here, as the pain stabs through the crown of his
head, like thorns. Maximiliano’s suffering and “incomprehensible” mutterings mark him as a messianic
figure in the text (see volume 4, chapter 5, “La razón de la sinrazón;” “The Logic of Illogical Thinking”).
This example of migraine also reveals a repetition in Maxi’s consciousness, an example of the “double consciousness” (Gowers) of the migraine experience. The passage quoted immediately above forces Maxi, and readers, to recall a scene in which Maxi breaks open his piggy bank (without the knowledge of his domineering aunt) in order to give money to Fortunata, the prohibited “fallen” woman. Galdós prefigures this scene of Maximiliano’s first transgression, as a migraine: “Los cascos esparcidos semejaban pedazos de un cráneo, y el polvillo rojo del barro cocido que ensuciaba la colcha blanca parecióle al criminal manchas de sangre” (1. 475; “[the] broken shell [of the piggy bank] looked like pieces of a skull, and the fine red clay dust dirtting the white bedspread was stains of blood in the criminal’s eyes” [246]). Again, critics have persuasively read this smashing as Maxi’s rebellion against his aunt, and as a transgression of the bourgeois social expectations. Indeed, the stains of dust which transform, for Maxi, into stains of blood symbolize the loss of virginity, in addition to a “crime;” the narrative mocks Maxi’s action and imagination by having Maxi behave as a criminal. Yet he is also smashing himself here—attempting to free himself from his narrative “naturalistic” determinism. Together the fractured head and fractured piggy bank represent Maxi’s struggle with his self—a very (European) modernist concern. Moreover, his recollection of this repetition—the simile that compares his broken head to the broken piggy bank—indicates not a Lacanian “méconnaissance,” a scotomized perspective, but a very acute awareness/perception of the way his fractured head poses a threat to social rules.

After the smashing of his piggy bank his anxiety heightens in a manner that intensifies the nervousness and fallibility of the narrator: “Lo que desconcertó a Rubín
cruendo creyó concluida su faena, fue la aprensión de advertir que la hucha nueva no se parecía nada a la sacrificada. ¿Cómo antes del crimen las vio tan iguales que parecían una misma? Error de los sentidos” (1. 476; “What disconcerted Rubín when he thought his deed had been concluded was his apprehension that the new piggy bank didn’t resemble the sacrificed one at all. How could they have looked so alike before the crime? A perceptual error. The difference he noticed now might be an error too” [247]). Although Maxi believes he may be experiencing an “Error de los sentidos,” a “perceptual error” here, this confusion only serves to further Galdós’ complication of the naturalistic project, questioning the positivist faith in observation (the visual field) alone as a method for experiencing truths.

Maxi’s fractured perception and glut of sensory pain manifest again on his wedding day, when he falls ill with a migraine.134 Both his aunt and his new wife simultaneously recognize his suffering: “—Tú tienes jaqueca—le dijo su tía. —Sí que la tengo—replicó él con desaliento, elevándose la mano a los ojos--; pero quería olvidarla a ver si no haciéndole caso, se pasaba. Pero es inútil; no me escapo ya. Parece que se me abre la cabeza. Ya se ve [...]"[...] Todos dirigían al pobre jaquecoso miradas de lastima [...]” (1.673-4; “‘You have a migraine,’ his aunt said. ‘You’re right, I do,’ he replied downheartedly, putting his hand over his eyes. ‘I wanted to see if it would go away if I ignored it. [...] My head’s splitting. I knew it would happen [...]’ Everyone looked piteously at the poor migraine victim [...]” (392). Once again, the “splitting” head—

134 As mentioned in Chapter 3 of this dissertation regarding Zola’s Pot-Bouille, Maxi’s fellow migraineur Auguste Vabre, falls ill with a migraine on his wedding day.
“Parece que se me abre la cabeza”—signifies fragmentation. Although he covers his eyes, in a gesture to repress and to ignore his pain, the migraine forces him into a liminal position once again; as doctor and patient this time, he knew that the migraine would manifest itself relentlessly at a crucial juncture in his life.135

His wedding-day migraine continues throughout the day and into the night: “La tarde pasó la Maxi muy mal; le dieron vómitos y se vio acometido de aquel hormigueo epiléptico que era lo que más le molestaba” (1. 675). “Maxi had a very bad afternoon; he vomited and had that epileptic tingling which caused him discomfort more than anything else” (393). When he is left alone with Fortunata, the narrative mercilessly renders him abject in the marriage bed:

Maxi no acababa de tranquilizarse, por lo que fue preciso apelar al remedio heroico. El mismo enfermo lo pidió, dejando oír una voz quejumbrosa que salía de entre las sábanas, y que por su tenuidad no parecía corresponder a la magnitud del lecho. […] Tomó [la medicina] Maxi y al poco rato se quedaba dormido con la boca abierta, haciendo una mueca que lo mismo podía ser de dolor que de ironía. 1. 676.

Maxi’s condition didn’t improve, which made it necessary to resort to the extreme: laudanum. The patient asked for it from between the sheets in whimpers so faint they didn’t seem to fit the magnitude of the [double] bed. […] Maxi [took the dose] and fell asleep open-mouthed, making a grimace that could have been interpreted as one of irony or pain. (394)

135 On this wedding night, Fortunata returns to her lover Juanito Santa Cruz. Maxi’s apprehension of this affair (apprehension in the sense of his worry about it, as well as his discovery of Fortunata’s subsequent affairs with Santa Cruz), is determined through a process of hallucinatory “reasoning.”
Once again, he is infantilized, as signified through his weakened voice in the large bed; he cannot consummate the marriage. What is particularly significant here, however, is the way the narration leaves its medical examination open-ended. Maxi’s grimace (“mueca”)\(^\text{136}\) (or, open mouth) through both the migraine pain and the laudanum, could be (“podía ser”) irony or pain. While the translation offers an either/or interpretation, certainly Maxi’s visage signifies both an irony of pain (the migraine) and the pain of irony (Fortunata leaves him for Santa Cruz on the wedding night).

The migrainous body keeps Maxi’s perceptions in a state of perpetual liminality, even when he is not actually suffering an attack. If Maxi does not embody strength and health, his mind remains very active; as the narrative continues its exposition when introducing Rubín, the narrative itself imposes a mind-body split upon Maxi: “[...]
aquella imaginación, que al desarrollarse tarde, solía desplegar los bríos de que dan muestra algunos enfermos graves” (1. 460; “[his] imagination [...] having blossomed late, displayed the kind of energy found in sick people” [235]). Just as the body (or exterior shell), the source of so much pain, fails, the imagination and the mind “blossom” and give way to heightened “inner” perception. The narrator concludes, “De esta manera aquel misántropo llegó a vivir más con la visión interna que con la externa. El que antes era como una ostra había venido a ser algo como un poeta. Vivía dos existencias, la del pan y la de las quimeras” (1. 461; “So it was that our misanthrope took to using his internal vision more than his external vision. The same young man who had resembled an oyster had grown into something like a poet. He lived two lives: one based on bread and

\(^{136}\) The English translation offers “grimace” for the Spanish, “haciendo una mueca,” or, “pulling a face/making a face.” The English choice is an effective echo of the “grimacing image” identified by Lardreau.
the other on dreams” [235]). The examples of migraine establish that Maxi’s awareness continues even as his physical body is wracked with pain; the continuation of his double consciousness continues as well. Additionally, the struggle between Romanticism and naturalism remains prominent; the narrator draws upon the Western European popular culture imagination, starting with the Romantic era (although these eras varied in time in England, France, and Spain), of the ethereal poet whose mind/inner life thrives while the physical body remains fragile. The split, or méconnaissance, is not quite a misrecognition, even if the narrator positions Maxi as an unreliable figure.

Moreover, the narrator and Maxi himself filter reality, dreams, and moments between sleep and awakening, as extensions of his migraine experiences:

Well, as I’ve said, he got so wound up be believed all this. And if it lasted, he would have gone as mad as any of the inmates in Leganés. His luck was that it all passed, like a headache, but the hallucination reconquered its kingdom while he slept [...] Upon awakening, when normal thoughts weave together with deceitful
images from dreams and the brain is a twilight zone holding a vague discussion on the true versus the untrue, the deception lingered a bit, and Maximiliano did what he could to preserve it by closing his eyes again in an effort to attract the scattering images. 236. (my emphasis)

The phantasmagoria of the hallucination and the dream state generate a liminal space (“un crépusculo”/ “twilight”) that echoes the double consciousness of a migraine (even though the English translation, once again, employs “headache” rather than “jaqueca”). Again the narration consciously associates migraine with hallucination and dreams to throw into question the legitimacy of reality. The narrative “I” functions as a physician’s gaze here, observing explicitly that Maxi experiences some difficulty in distinguishing hallucinations from material reality. Even though Maxi’s thoughts are mediated by the narrator here, the passage reveals that Maxi is indeed aware of fragmentation. He closes his eyes, to see, a conscious attempt to reconcile and re-collect the “imágenes mentirosas”/ “deceitful images;” he is aware that his reality is a constructed image. While the naturalistic narrative strives to reproduce detail and diagnose illness, Maxi’s descent into sickness with his heightened perception renders an almost surrealist and hallucinatory stream of images.

In rendering Maxi “infantile,” the narrative not only reinforces him as an infertile, ecstatically mad figure, it aligns Maxi with another figure of the threshold that begins to haunt mid-nineteenth century imagination, the flâneur. In his essay “The Painter of Modern Life,” Charles Baudelaire associates the convalescent and the child in the figure of the mobile artist: “The child sees everything in a state of newness; he is always drunk” (8). Baudelaire further hazards a theory rooted in neurology: “I am prepared to go even
further and assert that inspiration has something in common with a convulsion, and that
every sublime thought is accompanied by a more or less violent nervous shock which has
its repercussions in the very core of the brain” (8). For Baudelaire, neurological and
creative paroxysms appear startlingly similar.

Baudelaire suggests that the *flâneur* is a “kaleidoscope gifted with consciousness”
(9), and certainly Maximiliano’s fractured perceptions during migraine overlap with the
flâneur’s creative wanderings:

Por esto le gustaba más, cuando el tiempo no era muy frío, vagar por la calles […]
viendo escaparates y la gente que iba y venía parándose en los coros […] y
mirando por las ventanas de los cafés […] La calle con su bullicio y la diversidad
de cosas que en ella ven, ofrecía gran incentivo a aquella imaginación […] se iba
en seguimiento de alguna [mujer], por puro éxtasis de aventura […] 1. 460

So he preferred, when the weather wasn’t too cold, to wander through the streets
[…] looking at shop windows and the people passing by, or to pause outside a
courtyard […] to peer into café windows […] With their hubbub and variety, the
streets were a great incentive to that imagination […] he would pursue [women]
for the sheer ecstasy of the adventure […]” [234-5])

Like Baudelaire’s figure, Maxi distills hallucinatory images of the city through his own
phantasmagoric consciousness, a fugitive amidst capitalist industry (“[The flâneur] is the
spy of the capitalists, on assignment in the realm of consumers,” Walter Benjamin writes
in the *Arcades Project*, 427). This “spy” turns stalker while following women, a turn perhaps in attempt to gain optical mastery as flâneur, when his visual field is so disrupted as migraineur.

Again like Baudelaire’s flâneur, Maxi’s wanderings induce reverie: “Tenía Maximiliano momentos en que se llegaba a convencer de que era otra, esto siempre de noche y en la soledad vagabunda de sus paseos. Bien era oficial de ejército y tenía una cuarta más de alto, nariz aguileña, mucha fuerza muscular y una cabeza … una cabeza que no le dolía nunca […]” (1. 461; “Maximiliano had moments when he believed that he was, indeed, someone else; they always occurred at night, during the loneliness of his roamings. He became either an army officer and was inches taller, with an aquiline nose, great muscular strength and a head … a head that never hurt” [235-6]). Although the narrative voice is omniscient here (even though an “I” narrator is writing), looking at Rubín, and not registering Maxi’s own consciousness, the passage suggests that Maxi is aware of his imaginings of his changed persona. Baudelaire writes of the flâneur, “He is an “I” with an insatiable appetite for the ‘non-I’ […]” (9), pointing to the Lacanian split

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137 Walter Benjamin notes a split in the sensory perceptions of the nineteenth-century and the twentieth: “Possession and having are allied with the tactile, and stand in certain opposition to the optical. Collectors are beings with tactile instincts. Moreover, from the recent turn away from naturalism, the primacy of the optical that was determinate for the previous century has come to an end. […] The flâneur optical, the collector tactile” (*The Arcades Project* 206-7). Poised between late-nineteenth century’s realism (or extreme realism, in the guise of Naturalism) and the modernist movement toward fractured art, Maxi may be read as the embodiment of both the flâneur and the collector, although Benjamin places these two beings in slight opposition. For an example of Maxi the collector, consider the scene before he cracks open his piggy bank, to give money surreptitiously to Jacinta. “[…] lo único que había hecho, años atrás, era robarle a su tía botones para su coleccionarlos. ¡Instintos de coleccionista, que son variantes de la avaricia! Alguna vez llegó hasta cortarle los botones de los vestidos; pero con un solfeo que le dieron no le quedaron ganas de repertirlo” (1. 471; “The only thing he’d ever done, years ago, was to steal buttons from [his aunt Doña Lupe] for his collection. He had a collector’s instinct, which is a form of greed. He’d even cut buttons off her dresses, but he got such a spanking that he never felt like doing it again” [243]). Perhaps the flâneur and the collector are not as bifurcated as Benjamin suggests.
that Maxi is attempting to reconcile. Yet he “doubles” himself as well, and “doubling” is a Romanticist and a modernist motif. Although the migraines he experiences often lead to states of double consciousness, here he yearns for a life without migraine, another “doubling.”

By the end of the nineteenth century, Galdós’ faith in the middle class disappears; the doubt is imminent in the sign of Rubín. The final passage quoted above ironically foreshadows Maxi’s fate; as the narrative complicates the (not so) “vague discussion on the true versus the untrue,” Maxi will be committed to Leganés at the end of the novel. His dreaming, his metaphysical quests, his hallucinatory experiences, and his “sickly” nature cannot be adequately incorporated into the bourgeois class his aunt represents. Yet via Maxi’s naturalist agony, the question of modernist agency appears—his liminal position, as foreshadowed by his migrainous body, anticipates anxieties about fractured selfhoods and societies.
Chapter 5

Modernity, Gender, and Perception: The Case of the New Woman

“We walk by the electric light: our ancestors had only oil-lamps.” Grand, “The New Aspect”

“The whirlpool way of life [...] ‘Round and round they go; brains humming until they melt or explode.’ ” Gissing, The Whirlpool

“I interest you now! I am a case! [...] If only you could cure me.” Grand, The Heavenly Twins

5.1 Naturalism and New Woman Fiction in Fin-de-siècle Britain

At the end of Galdós’ Fortunata y Jacinta, Maximiliano Rubín is sent to a mental asylum—his dreaming, his metaphysical quests, his hallucinations and his “sickness,” partially embodied by migraine, cannot be incorporated into the bourgeois class his aunt represents. Exhausted, fractured, nervous figures also populate the pages of British fiction in the late-nineteenth century, as the Empire struggled with destabilizing social issues involving class, population, health, industry, and economy. This chapter employs two late nineteenth-century “Naturalist” and “New Woman” novels as case studies, to scrutinize the ways in which questions of perception, the body, and modes of seeing, particularly the ways in which perception is gendered, and who has access to “seeing” are foregrounded in this period. George Gissing’s New Grub Street (1891) is used to locate the anxieties surrounding the modern body and modes of perception, while Sarah Grand’s The Heavenly Twins (1893) complicates this situation by interrogating the construction of women, education, and the ways in which such constructions inform the modern body and modes of perception. Gissing’s figures are nervous and exhausted, while Grand’s are syphilitic and (possibly) hysteric. Blinding headaches appear in both novels; however, a
comparison of the two reveals that while the principal trope of hysteria is speech, with its figure of the talking body, the principal trope for migraine is vision.\textsuperscript{138}

As mentioned in the first chapter of this dissertation, migraine may appear with symptoms of other neurological disorders, or might underlie other conditions, making either difficult to diagnose. Both Charcot and Freud recognized migraine as either a harbinger of hysteria (Charcot) or an aggravating factor.\textsuperscript{139} One clear characteristic of the migraine is its invisibility. It is not as readily leant to the spectacular as is hysteria; it is not always visibly written on the body as is (sometimes) syphilis (the twin illnesses of

\begin{flushright}
\textsuperscript{138} Many thanks to Professor Christopher Keep for his insight on hysteria, migraine and the senses, and for suggesting I examine Grand’s novel in this thesis.
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\textsuperscript{139} For Freud and Breuer (especially Freud) repression and recovery are two particular aspects that mark the hysteric’s dialogue/narration and memory, as outlined in the cases of \textit{Studies in Hysteria} (1895). As Rachel Bowlby explains, Freud and Breuer were pioneering because they did not only observe the patient, but also shifted focus from looking to listening to the patients’ words (although scholars such as Didi-Huberman, Showalter, and Beizer, to name a few, have demonstrated, in 1895 the master/servant, doctor/subject, male/female dichotomies nonetheless still impose an unstable interpretation upon the hysteric’s narrative). Perhaps because he was a migraine sufferer himself, Freud recognized and annotated a “quiet” or “mistranslated” symptom in Frau Emmy von N’s case: “In the afternoon she had what she called a ‘neck cramp,’ but ‘only for a short while, a couple of hours’” (54). Freud’s sixth note to the case identifies the neck cramp as “[a] form of migraine” (97); he elaborates this interpretation in note 20:
\begin{itemize}
\item On subsequent reflection I cannot help thinking that these ‘neck cramps’ may have been an organically determined condition analogous to migraine. In medical practice one sees a number of conditions of this kind which are not described, but which bear such a striking similarity to classic cases of hemicrania that one is tempted to broaden the definition of the latter and attach only secondary importance to the localization of the pain. As is well known, many neuropathic women tend to combine hysterical attacks (spasms and deliria) with migraines. Whenever I saw Frau Emmy with neck cramp, it was always accompanied by an attack of delirium. (103)
\end{itemize}

Freud’s assessment here echoes novelists’ representations before him (Zola’s Auguste and Galdós’ Maximiliano) by linking the neurological conditions of migraine and hysteria, although the psychiatrist is more troubled than the creative writers about distinguishing the two.
Sarah Grand’s *The Heavenly Twins*). Yet this very “invisibility” lends migraine, and its concomitant illnesses of the nineteenth-century its symbolic force.¹⁴⁰

Émile Zola and Benito Pérez Galdós were intrigued by the ways in which scientific methods and innovations of the late-nineteenth century might inform literary “experiments” (to employ Zola’s concept) and aesthetics, although Galdós’ later work betrays misgivings regarding positivist science and the Naturalist process. Galdós’ British contemporaries shared this interest in and suspicion of the new sciences—neurology, pathology, and the various fields of pseudo-sciences such as mesmerism, phrenology (and nascent psychiatry). The impact of Darwin’s theories of human genealogy and survival also radically altered previously entrenched religious and social beliefs (or offered “evidence” to reinforce such beliefs; for example, to justify the divisions of classes). Furthermore, European and British neurologists of the fin-de-siècle were all deeply involved in the mapping of the brain and the nervous system. According to Anne Stiles in *Popular Culture and Brain Science in the Late Nineteenth Century* (2012), the new medical findings also fascinated and repelled artists, intellectuals, and the public:

¹⁴⁰ Much scholarship regarding this era focuses upon the psychiatric aspects of neurologists’ work, particularly regarding hysteria and woman. Georges Didi-Huberman’s *Invention of Hysteria: Charcot and the Photographic Iconography of the Salpêtrière* (1982) interrogates the observations, methods and interpretations of Charcot, the apparatus (including the photographers themselves) of photography that fixed positivist science’s definitions and display of hysteria, as well as the power structures inherent in knowledge: the gaze, the object, gender relations. Elaine Showalter, in *The Female Malady: Women, Madness, and English Culture, 1830-1980* (1985), examines hysteria, its treatment, subjects, and definitions, in the context of the English-speaking physicians and literature; like Didi-Huberman, but more pointedly, she underlines an aspect of the power structures of medicine and discipline that Foucault does not always address: gender. As seen in this thesis’ second chapter, Janet Beizer examines female bodies, narrative and hysteria in *Ventriloquized Bodies: Narratives of Hysteria in Nineteenth-Century France* (1993); this text examines the gendered power structures inherent in the doctor-patient relationships in French literature, taking a cue from Irigaray’s argument that woman’s hysterical voice may be recuperated through gesture, scars, and other narrative marks on the body.
One might easily add neurology—specifically, cerebral localization theories—to the list of fin-de-siècle scientific discourses that undermined a sense of human stability. By suggesting that certain parts of the brain controlled specific emotions and behaviors [sic], localizationalists contradicted the popular belief in a unified soul or mind governing human action, thus narrowing the possibilities for human agency. (10)

Medical fields, while operating under the guise of reputable authorities, also fueled the anxieties around agency circulating toward the end of the nineteenth century. The rejection of naturalism as an aesthetic mode is likely concomitant with the anxieties pinpointed by Stiles, for naturalist novels, in their examination of the human as animal and culture as constructed and ruthless, also forced questions regarding notions of free will and human autonomy.

As Stiles demonstrates (2012), popular narrative of 1880s and 1890s Britain was dominated by genre: gothic fiction, detective fiction, science fiction, and adventure. While aesthetes and decadents distinguished themselves from mass culture in the “art for art’s sake” movement (this thesis’ third chapter reveals that both Swinburne and Wilde guarded against the contamination of Continental naturalism), other writers concentrated on socio-political concerns, following the psychological and social realism of the High Victorians and utilizing some aspects of naturalism’s techniques and polemics. The author sometimes associated with British naturalism is George Gissing (1857-1903), even while literary criticism today often maintains the British fin-de-siècle resistance to the movement/genre. On one hand, David Glover asserts that Gissing is “[...] England’s nearest approximation to a Naturalist novelist” (78), and Deborah Parsons contends that
while Gissing exhibits naturalistic tendencies, he does not prescribe wholly to its tenets (107). On the other hand, Joshua Taft eschews the British author’s place in naturalism: “Gissing instead celebrates Victorian realism as a genre that helps writers avoid what he sees as the disastrous false choice between naturalism and commercialized sensation fiction” (363). Aaron Matz maintains that Gissing’s approach to realism is profoundly ambivalent: while Gissing, in letters and journal articles, defended realism (Matz 216), he also resisted it: “He did not want to be regarded as a sociologist of the slums, or as a mere chronicler of his day; he did not seek the imprimatur of science that Émile Zola had advocated […]” (221). Matz argues that Gissing deploys and satirizes realism, particularly in *New Grub Street* (1891), with his ambivalent sympathy toward realism existing awkwardly with the satire (215; 232). According to Matz, Gissing argued that it was “the novelist’s duty ‘to show life its image as he beholds it’ [which] is not simply an aesthetic preference: it is nothing less than a moral imperative” (222).141 Yet it cannot be denied that Gissing kept pace with developments in science, technology, and medicine (Glover 78; 80), although he did not necessarily accept that the laws of science need govern aesthetic production (Matz 221). Nor did he espouse a “naturalismo espiritual” in the manner of Galdós (Gissing also does not share Galdós’ comedic spirit). Martin Ryle and Jenny Bourne Taylor further contend that he exemplifies the pessimism of the fin-de-siècle: “[Gissing was] concerned to diagnose the ‘pathology’ of both masculinity and femininity as a ‘disease of civilization’” (10-11). Many critics cite Gissing as one of the

great pessimists of Victorian fiction, and it is as difficult for readers, as for his characters, to escape the claustrophobic environs and atmospheres of his texts.

His contemporary critics regarded Gissing as a “serious” writer, and Gissing at times in *New Grub Street* shares some distaste for the popular literary market of late-nineteenth century Britain. Yet this novel demonstrates that he would not ignore the social debates of his era. One of the most contentious was the “Woman Question” played out in the press and the “New Woman” novels; these were as fractious and vitriolic as the campaign against Naturalism and Zola in France. Proponents of women’s rights were intense in their interrogations and representations of access to knowledge and power, and social investments in class, education, politics, and economics. Indeed, as scholar Lyn Pykett maintains, the controversies of sexual politics and aesthetic politics produced one another; subsequently they cannot be divorced from each other’s milieu and discourse (36). According to this scholar, New Woman novels too were diagnosed as “pathological” (43): “Like French (or French-influenced) naturalism, the New Woman novel was seen as the literary expression of destabilizing democratic tendencies, or even of revolutionary excess. It was a part of a general invasion of culture by the feminine, a symptom and cause of degeneration, disease, and effeminacy, and a threat to the nation’s safety” (42). Although female writers were just as serious about the business of writing fiction as Gissing, their (often best-selling) fiction was relegated to “popular” culture. In *fin-de-siècle* Britain, the anxieties apprehended regarding the challenges to class (not to mention the challenges to Britain’s empire), religion, free will, and gender were deflected onto sexual and textual bodies.
Sarah Grand (1854-1943)—the self-fashioned pseudonym of Frances Bellenden-Clarke, who married an army surgeon, David McFall—was one of the most vocal participants in women’s rights movements, particularly advocating the reform of law, education, marriage, and even dress. Although Grand ascribed to Social Darwinist theories which permeate Zola’s naturalism (discussed below), she explicitly eschewed a relationship between her fiction and the French movement in *The Heavenly Twins*. Like Zola and Galdós, Grand actively wrote polemical pieces for journals and magazines. Twentieth and twenty-first century literary critics seeking to recuperate the “New Woman” novel from its marginalized position in the British canon (and its marginalized position in relation to Modernist aesthetics) have also credited Grand with christening the “woman-question”-centred novels of the 1890s, “New Woman” novels. Grand too considers it a moral imperative to “‘show life its image as [s]he beholds it.’”

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142 Critic Anna Maria Jones draws attention to Grand’s very deliberate feminist “self-fashioning.” In her “Introduction” to the Michigan Press edition of *The Heavenly Twins*, Carol A. Senf emphasizes (echoing Elaine Showalter’s *Sexual Anarchy*) that Grand deliberately styles herself “feminine” (xxxii); unlike Acton, Currer, and Ellis Bell, or the assorted Georges—from Eliot to Sand to Edgerton—Grand does not seek gender neutrality (Senf xxxiii).

143 As many historians of the women’s movement recognize, dress was an important political tool for women of the late nineteenth-century. Literary critic Lauren Simek reminds us that Grand was a member of the Rational Dress Society (341 n. 9), a society that criticized the corset as an obvious symbol of containment.

144 Later in her life, after she stopped writing novels, Grand’s commitment to politics would lead her to become a mayor of Bath (although the position was a shared one).

145 See Ardis, Jones, Ledger, Lloyd, Nelson, and Pykett for but a few examples of this tremendous scholarship.

146 See Nelson (1), Kennedy (259), Simek (337), Farmer (10; “Introduction” to *The Story of A Modern Woman*) and Bernstein (17: “Introduction” to *The Romance of a Shop*). Angelique Richardson avers that Grand herself claimed that she coined the term “New Woman” (Richardson 227).
Like Gissing, Grand employs exhausted, fractured, nervous figures in *The Heavenly Twins*, who are preoccupied with the work and pleasures of reading, writing, and interpretation. Grand throws into relief the patriarchal construction of perception and seeing, as exemplified by the medical discourse of the later Victorian era; Gissing too interrogates the construction of classes and the value of intellectual labour in a society that is shaped, dominated, and ground down by material objects. In the following section, I find it constructive to read these novels together to explore the interplay of intellectual production, textual media, and gendered bodies.

5.2 George Gissing and Humming Brains

“Life is not a series of gig-lamps symmetrically arranged; life is a luminous halo, a semi-transparent envelope surrounding us from the beginning of consciousness to the end,” Virginia Woolf proclaims in her insightful and influential 1919 essay “Modern Fiction.” Although Woolf’s assessment of modern fiction occurs approximately two decades after George Gissing’s death, writers within 1890s Britain were struggling with the (supposed) exhaustion of realism and some of the more specious polemics of naturalism. As noted above, Gissing straddles the fissure between realism and modernism. He is evidently not a modernist in technique like Woolf herself or James Joyce, but his novels nonetheless mark the conditions and contentions of modernity, with his fractured characters and vertiginous atmospheres. In using specific urban spaces and lengthy narrative details, Gissing is a “materialist” (Woolf’s term to disparage the writings of Wells, Galsworthy

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147 In a nuanced discussion of *New Grub Street*, Joshua Taft argues that the state of realism in 1890s Britain was not as dire as recent critics have argued; for Taft, Gissing’s novel provides evidence that Victorian realism had not exhausted itself.
and Bennett); yet the “overloaded” narrative creates a sense of claustrophobia as well as produces a sensory overload, in the manner of a migraineur’s heightened perceptions. For Deborah Parsons, Gissing’s work signifies the urban “phantasmagoria” of modernity which undercuts any such “materialism” that is associated with naturalism: “[like Gissing], it is often at the point of Zola’s most overloaded descriptions that both protagonists and readers most removed from actuality. Naturalism [...] when faced with a glut of accumulating sense impressions [...] reaches surfeit” (110). However Gissing’s narrative gig-lamps may be symmetrically arranged, the excess of the lamps tend to blur and compromise his characters’ and readers’ fields of vision, like a migraine aura itself.

Such embodiment and hyper-awareness often exemplify the unease and ruptures experienced by characters in his novels. Often he deals with issues of socio-political concerns such as the “Woman Question,” as well the economy and class structure, particularly the marginalized or “unclassed.” Gissing viewed intellectual labour as one such marginalization, and both male and female characters in New Grub Street (1891) endure privation in a society that values money and things, more than its people. The novel is often read as a self-reflexive meditation on the labour of writing and literary

148 The title of one of Gissing’s novels, published in 1884. His novel The Odd Women (1893) explicitly deals with the contentious public debate regarding the status of women in late-Victorian society. The Madden sisters suffer the fate of many New Woman fictional characters of the 1890s: after the death of the father (a doctor, in this case, whose adherence to bourgeois values regarding the restricted education of women severely impairs his six daughters’ survival), the unmarried, displaced daughters must earn a living in the metropolis. Chapter two, “Adrift,” summarily dispatches half of the characters: “Gertrude and Martha were dead; the former of consumption, the other drowned by the overturning of a pleasure boat” (40). Isabel, a teacher in a Board school, suffers almost immediate exhaustion: “Isabel was soon worked into illness. Brain trouble came on, resulting in melancholia. A charitable institution ultimately received her, and there, at two-and-twenty, the poor hard-featured girl drowned herself in a bath” (41). Those who live do not necessarily survive: the youngest, Monica becomes a shop-girl apprenticed to a dress-maker before her marriage to the suffocating Edmund Widdowson, while Virginia, working in the purportedly respectable but glutted market of paid companionship, falls into alcoholism.
production. Indeed, Gissing’s novel anticipates Theodor Adorno and Max Horkheimer’s theory of the culture industry, with its interrogation of the ways in which the British publishing industry and reading marketplace (re)produces and circulates literature. For Adorno and Horkheimer, cultural producers—from academics, to highbrow authors, to journalistic hacks (all featured in *New Grub Street*) cannot exist outside of the culture industry: “anyone who does not conform is condemned to an economic impotence which is prolonged in the intellectual powerlessness of the eccentric loner” (106). While many of the characters recognize and understand the literary marketplace, some choose to play the game and others do not. Jasper Milvain produces what sells rather than attempting anything artistic (indeed, he realizes that he does not have literary talent); others who refuse to pander to the market end up like the Madden sisters—obscure, poor, or dead.149

Following the theory of Bourdieu, critic Stephen E. Severn argues that cultural capital is leveraged, exchanged, and devalued as readily in *New Grub Street* as much as actual currency (175-6). Indeed, in an aside, the narrative itself distinguishes the intellectual as another class: “They [Reardon’s novels] dealt with no particular class of society (unless one makes a distinct class of people who have brains) [...]” (93). Severn persuasively establishes that cultural/intellectual capital grants poor writers such as Reardon access to the bourgeois and upper-class meeting places (175-8). Nonetheless, many of the men of *New Grub Street*, trading in cultural currency and literary labour, are

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149 For example, Edwin Reardon refuses to write the “sensation” novel suggested by Jasper Milvain, or anything else popular. To be sure, Reardon himself recognized that his literary talents rest in scholarly rather than creative writing. But he recognizes that his world is a capitalist one which will not tolerate products that cannot be used: Reardon tells his status-conscious wife, “The world has no pity on a man who can’t do or produce something it thinks worth money” (230). Reardon exemplifies Adorno and Horkeimer’s claim regarding economic impotence and intellectual powerlessness.
also crushed by the culture industry. As Reardon struggles to write, his days are governed
by the inexorable chimes of two Victorian institutions: the church (represented by the
Marlyebone parish church) and the workhouse (attached to the church): “No sooner had
the workhouse bell become silent than he began to toil in his weary imagination” (152);
“When the striking clocks summoned him remorselessly to rise and work he often reeled
with dizziness” (222). These chimes painfully measure out his gradual decline. In
addition to such symbolism, the narrative relentlessly recycles his mental and physical
exhaustion: “At times he was on the borderland of imbecility; his mind looked into a
cloudy chaos, a shapely whirlpool of nothings” (153). Chaos, phantasmagoria, whirlpool:
Gissing frequently invokes these symbols of surfeit sensory impressions to convey the
vertiginous modernity in which his characters exist. Even supposed sanctuaries become
claustrophobic environs for Reardon. Early on, Reardon gains access to the British
Reading-room: “The Reading-room was his true home; its warmth enwrapping him
kindly: the peculiar odour of its atmosphere—at first a cause of headache—grew dear and
delightful to him” (90). Once again, as in Zola’s L’Œuvre, public spaces lead to glutted
sensory impressions that provoke illness, dizziness, and headaches.

Migraineur and author, Alfred Yule, embodies another degree of thwarted literary
enterprise in the novel. A man of determination but limited ability, he is one of the few
characters openly derided by the narrator: “It would be difficult to mention any
department of literary endeavour in which Yule did not, at one time or another, try his
fortune. Turn to his name in the Museum Catalogue; the list of works appended to it will
amuse you” (126-7). This address invites the reader to participate in the derision, while
deploying a semblance of realism by suggesting that Yule’s name will indeed appear in
the Museum Catalogue. Yule too suffers mental and physical exhaustion, but the narrative makes clear that his ill-health is a result of circumstance and constitution. Yule is the only character explicitly endowed with migraine: “Already a martyr to dyspepsia, and often suffering from bilious headaches of extreme violence [...]” (124); “Throughout the month of July, [Yule] suffered much from his wonted bilious attacks [...]” (311). Moreover, he is losing his vision; significantly, he is the novel’s most scotomatized subject. Already a domestic tyrant, Yule’s physical deterioration and emotional bitterness further constrict the welfare of his wife and daughter.

Marian Yule, his daughter, dwells at the intersection between the “New Woman” question and the culture industry (although the former of course is not a category removed from the latter). A quick glance at her in the British Museum reveals that she is an emancipated woman: she wears her hair short (“She has a capital head!” exclaims Jasper Milvain [101]) and has access to the collection and works within the British Reading-room. The men who also work there view her not as an “odd woman” but as a colleague: “‘I have seen you several times, Miss Yule,’ [Jasper] said in a friendly way, ‘under the great dome’” (50). One could make the case that Jasper’s masculine gaze identifies Marian as a specifically female body; as feminist critic Ruth Hoberman stresses, the Reading-room in the 1890s was a contested space and women’s bodies were “painfully and problematically visible” (498). Yet Jasper, in quotation above, remains inclusive; in recognizing Marian, he not only identifies her but also identifies with her.

Ruth Hoberman points out that female patronage of the Reading-room increased during the nineteenth century, although middle-class women tended to prefer circulating libraries (494).
Theirs is a camaraderie of intellectual labour (although as the novel concludes, such mutual recognition cannot exist for long).

Marian’s existence is severely constrained, doubly so, by the culture industry and by her gender position. She has access to the Reading-room through her father, for whom she works, painstakingly and unpaid, copying out passages for his literary research; sometimes she composes articles for him, although these are not published under her name. Whereas Reardon considers the Reading-room a refuge, Marian finds that it stultifies her senses and intellect. She is acutely aware that she is doubly reduced to an inanimate object, by her father who considers her a writing machine, and by the culture industry itself: “[...] here [in the Reading-room] she was exhausting herself in the manufacture of printed stuff which no one even pretended to be more than a commodity for the day’s market” (137). Even in her exhaustion she recognizes what her father cannot, although this recognition does not render her any less powerless.

In an echo of the vertiginous public spaces of Zola (L’Œuvre), Marian’s sense of oppressive drudgery generates a site of ill-health: “[...] she sat with books open before her, but by no effort could fix her attention upon them. It was gloomy, and one could scarcely see to read; a taste of fog grew perceptible in the warm, headachy air [...]” (137). As her vision dulls, Marian apprehends her surrounding with other senses, “tasting” the fog (whereas Reardon sense of smell is affected). At this point her perceptions alternately dull and intensify; Marian’s liminal perception here is embodied by the narration. As the atmosphere becomes leaden, readers move from looking at Marian’s movements, into her mind:
The fog grew thicker. She looked up at the windows beneath the dome and saw that they were a dusky yellow. Then her eye discerned an official walking along the upper gallery, and in pursuance of her grotesque humour, her mocking misery, she likened him to a black, lost soul, doomed to wander in an eternity of vain research along endless shelves. Or again, the readers who sat here at these radiating lines of desks, what were they but hapless flies caught in a huge web, its nucleus the great circle of the Catalogue? (138)

In this passage Gissing moves from a “materialist”—using a third-person limited focalisation, registering Marian’s sight and thought—to a modernist perspective, with a hint of stream-of-consciousness technique. Marian’s “grotesque humour” incisively apprehends that she is indeed within a panopticon\textsuperscript{151}, subject to surveillance by the official (who also represents her father, as well as the non-productive research she performs for her father). The surveillance is somewhat attenuated as the narration becomes Marian’s own: the directions of her vision (“she looked up”; “her eye discerned”; “she likened him”) indicate her own cultural labour, her own mind thinking, comparing: “Or again [...] what were they but hapless flies [...]”. The narrative shifts from third-person into Marian’s own consciousness. However dulled her senses are becoming, she is also able to see the “radiating lines of desks” as if she could reverse the

\textsuperscript{151} Hoberman also emphasizes the domed structure of the Reading-room and the way in which its architecture fosters hegemonic control: “[...] the superintendent, from his raised central platform, could effortlessly survey the reading room benches [...] [He] represented Britain’s image of itself as benevolently exercising power in the interests of knowledge, progress, and civilization. This panopticon thus epitomized the efficiency of British social surveillance and the centralization of British knowledge and administration” (492).
panopticon. Her comparison of the official to a “lost soul” renders him spectral, like transient hemiopsia in her field of vision; she “discerns” his presence but blots it out as well.

Marian’s descent into the fog and the reader’s descent into her consciousness are maintained as the passage unfolds. Again her perception (vision) is obscured yet simultaneously heightened: “Darker, darker. From the towering wall of volumes seemed to emanate visible motes, intensifying the obscurity [...]” (138-9). Although Marian is not prone to migraines, her mental and physical exhaustion generates an experience that simulates scintillating scotoma in the “headachy atmosphere”: “But then flashed forth the sputtering whiteness of the electric light, and its ceaseless hum was henceforth a new source of headache. [...] [T]he pages were blue and green and yellow before her eyes; the uncertainty of the light was intolerable” (138-9). The pages flashing “blue and green and yellow” certainly mimic an experience of Airy’s spectral hemiopsia as the very modern light relentlessly generates a headache. Of course Gissing here inverts the common trope of “light” as knowledge; the artificial electric light clouds Marian’s visual field as much as the naturally occurring darkness. Neither one, it seems, is adequate for Marian’s position. Her place in the proto-modern world (signified by electricity) provides nothing but a fragmented sense of perception. The narrative becomes invasive too; shortly after readers “sink” into Marian’s consciousness, they are suddenly, as suddenly as the effect

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152 The official’s surveillance is also attenuated somewhat through Marian’s apt comparisons: the “black, lost soul” forever circling the dome in a vain quest for knowledge evokes Dante’s damned souls who futilely run after the flag at the start of the Inferno: “[...] I would not have believed death had undone so many” [(I. 3. 56-7: “[...] i’ non avrei creduto/ che morte tanta n’avesse disfatta.” Translation: Robert M. Durling). T.S. Eliot, of course, long after Gissing, incorporates Dante’s line into his portrait of a stultified London in The Waste Land [1922]).
of the electric light upon Marian, snapped back into a third-person point-of-view that remains close but yet outside of Marian’s perspective. Other senses in addition to sight are also disturbed; the ceaseless humming of the light imposes more pain.

Of course, the dome itself signifies a head (its “radiating desks” perhaps signifying cranial nerves), as Virginia Woolf brilliantly observes: “[...] one stood under the vast dome, as if one were a thought in the huge bald forehead which is so splendidly encircled by a band of famous names” (33). As Ruth Hoberman points out, in Woolf’s time that band of names were all male; the Reading-room makes explicit that the knowledge it contains is gendered male (489). While Marian Yule suffers in the modern light and the effluvia of paper, her male fictional counterparts like Jasper Milvain embrace and try to exploit the culture machine.

5.3 The Importance of Reading Evadne: Migraine and Perception in Sarah Grand’s The Heavenly Twins

In his article about Gissing’s ambivalent realism, Matz ponders the significance of the title of Gissing’s 1891 novel: “‘Grub Street’ announces an Augustan precedent; ‘New’ clarifies that the story will transpire in the present day. One might say that ‘Grub Street’ bestows the satire and ‘New’ provides the realism” (223). But the “New” signals something else that was very much a celebrated and contested figure in 1890s Britain: the

\[\text{In this engrossing essay, Hoberman argues that women (authors and readers) of the 1880s and 1890s used the Reading-room with a sense of freedom and enterprise; by the 1920s, female writers like Woolf considered the space quite constrictive. Editor Susan David Bernstein further notes that both Amy Levy (fin-de-siècle) and Woolf recognized the Library’s place in the “culture machine” (“Introduction” to Levy’s The Romance of a Shop, 22-3). Finally, Woolf includes the British Museum as a department in London’s factory (A Room of One’s Own, 33).}\]
“New Woman.” Sally Ledger writes, “The New Woman was very much a fin-de-siècle phenomenon[,] contemporary with the new socialism, the new imperialism, the new fiction, and the new journalism” (1). As twentieth and twenty-first century scholarship reveals, New Women were very active (and successful) in the literary marketplace of Gissing’s *New Grub Street*: they participated in the fields of journalism, literary criticism, poetry, short stories and novels, using politics and aesthetics to design a “room of their own” in the dome of traditionally male-gendered knowledge. According to Ann L. Ardis, New Women and their fictional counterparts constructed a new realism: “[... ] New Women novelists anticipate the reappraisal of realism we actually credit to early-twentieth-century writers” (3). For Ardis, writers such as Sarah Grand forge a new realism with subjects that challenge traditional conventions such as marriage, as well as through the form and technique of the fiction, by dismantling omniscient narrators and by employing multiple points-of-view (3).

As I have already pointed out, Sarah Grand’s polemics and prose persuasively contributed to the age’s concept of the New Woman. Grand’s article “The New Aspect of the Woman Question,” published in 1894 in the *North American Review*, not only reveals the transatlantic appeal of her writing and dissemination of ideas, but also identifies two areas to which she is committed to reform: marriage and women’s education. In this essay she argues as pugnaciously as Zola, deploying the rhetoric of science and medicine—Social Darwinism—to emphasize that a woman’s role for the new century is to secure a comprehensive education for themselves (although the education intended to inform women on how to better choose a husband): “The man of the future will be better, while the woman will be stronger and wiser. To bring this about is the whole aim and
object of the present struggle, and the discovery of the means lies in the solution of the Woman Question” (272). Grand does not hesitate to leverage a traditional stereotype of woman in the Victorian age, the woman as moral compass: “[...] the new woman is a little above him [a member of the ‘Bawling Brotherhood’], and he never even thought of looking up to where she has been sitting apart in silent contemplation all these years, thinking and thinking [...]” (271). Arguably, placing the New Woman as “morally superior” to men is as short-sighted as any of the arguments that privilege masculine authority; but Grand’s main target (in this essay, and The Heavenly Twins) is the Victorian sexual double standard that permits male sexual desire (and “profligacy” according to Grand) while denying any such license or knowledge of sexuality to women. However, Grand advocates not sexual freedom but sexual purity for both women and men. Critic Meegan Kennedy places Grand in the “purity” movement (260), and Carolyn Christensen Nelson reminds us, “Although she was criticized as revolutionary, in her call for sexual purity Grand revealed herself to be one of the more conservative of the New Woman writers” (10). Nonetheless, Grand’s new woman was not afraid to argue rationally and frankly about sexual matters in public arenas. Thus, while the New Woman is “a little above” the “Bawling Brotherhood,” she is not transcendent, for she does not eschew the material/ practical realities of her position; she acts—thinking and thinking (and speaking, and writing).

“New Aspect” contains Grand’s version of the New Woman, a version representative of but certainly not encompassing all of the “definitions” of New Woman. As Anna Maria Jones points out, the New Woman figure was inchoate; one of the difficulties for critics (from critics of the 1890s, to the 1990s and beyond) is the
“definition” of the genre (218), for the salient theme throughout the New Woman novels was resistance to social definition. If female sex is not “one,” neither is the New Woman genre, although several themes and techniques harmonize them. Generally, the novels appeared in the late nineteenth century, predominantly in the 1890s;\textsuperscript{154} Ardis calculates that approximately one hundred novels about the New Woman were published between 1883 and 1900 (4). Like the heroines of Jane Austen’s novels eighty years earlier, the young protagonists of the New Woman novel have fathers who are ineffectual, dead, or otherwise absent. Also like Austen’s women, the heroines of the 1890s are quite concerned with marriage and money. In generic terms, however, Austen’s novels are comedies; the New Woman is not allowed comedy (or tragedy), for they are imbued with a sense of urgency, and are subject (like their male counterparts) to a bleak, anxious, fragmented modernity. While the New Woman feels the pressures of capitalism and new technologies, she also finds that the innovations of the new technologies—photography, transportation (the metropolitan subway system, trains, bicycles)—also contribute to her advances in enfranchisement and education. New Women do not rely on men (father, brother, husband) for socio-economic survival, but must earn their living; (generally) this is figured as agency rather than drudgery, a liberating factor from the confinement of marriage and the domestic sphere (undoubtedly, however, sometimes this new freedom is

\textsuperscript{154} Critics (see Pykett, Nelson, Farmer, Bernstein, and Senf) consider texts such as Amy Levy’s \textit{The Romance of a Shop} (1888), Sarah Grand’s \textit{Ideala} (1888), \textit{The Heavenly Twins} (1893), and \textit{The Beth Book} (1897), George Gissing’s \textit{The Odd Women} (1893), and Ella Hepworth Dixon’s \textit{The Story of a Modern Woman} (1894) representative of the genre. Carol A. Senf argues that the New Woman novel fell out of favour after the turn of the century for two reasons. The first reason includes the militant Edwardian suffragette movement; they felt that the generation immediately before had not been “active” enough in the campaign for women’s rights. The second reason involves the rise of modernism, which “[...] replaced the didactic New Woman novels with works that were more subtle and psychological” (xxxiii).
viewed equivocally). New Women live independently of men, via means of new technologies—for example, by owning and operating a photographic studio (as in Amy Levy’s *Romance of the Shop*), by educating others (as in Gissing’s *The Odd Women*) or by writing novels (physical labour or working as a shop girl were not options; although they destabilized the (predominantly) male work environment, the women did not necessarily cross class lines).

Although Grand ascribed to positivist, Social Darwinist theories (discussed below), her fiction explicitly rejected a relationship between her own aesthetics and the French naturalist movement. For example, consider Mr. Price’s remark in *The Heavenly Twins* (Price is represented as a male sympathetic to women’s cause) regarding an aristocratic ship-captain: “Their minds are hopelessly tainted with exhalations from the literary sewer which streams from France throughout the world, and their habits are not nicer than their books” (209; additional examples regarding Grand’s treatment of French novels will be cited below, in relation to Evadne’s reading). Another character representative of female autonomy, Mrs. Malcomson, offers an alternate definition of Naturalism: “She was a simple artist, educated in the life-school of the world, and desiring above everything to be honest—a naturalist, in fact, with positive ideas of right and wrong [...] she endeavoured to represent things as she saw them, things true, not imaginary [...]” (361). Readers cannot seize upon Mrs. Malcomson as a *porta-voce* for Grand herself; in a self-reflexive, almost modernist move, the novel nixes such an interpretive act when the narrative mocks critics for reading Mrs. Malcomson’s novel as autobiographical (362). Yet Grand cannot have used the word “naturalist” naively, particularly when so much of the narrative works to destabilize Zola’s mode. Grand
knows her work is grounded in a materialism—“things”—and wants the representations to be honest—“things true.” In this sense, Grand resembles Zola in writing what is “seen” and Gissing resembles Zola in his accumulation of print that overloads the (characters’ and readers’) senses.

Often critics (both current and Grand’s contemporaries) point to the form of The Heavenly Twins as symbolic of its unconventionality. Initially critics decried its formlessness, lack of narrative cohesiveness and transgression of perspectives. The Heavenly Twins was one of the last of the triple-decker Victorian novels; one section, “The Tenor and the Boy,” had been written earlier and separately, added only when the book was re-issued in 1899. Today, several critics regard this section—with its play with gender boundaries and transgression of hetero-normative relationships—as Grand’s anticipation of modernism. Adam Seth Lowenstein, for example, asserts that the novel’s form is a generic hybrid of allegory, fable, and “medical” documentation that undermines the outwardly realist mode (431); he concludes that the novel was avant-garde in form and structure for its time (433). He further finds the novel’s fragmented structure an aspect of the “epistemological crisis that Grand’s novel dramatizes” (438). Indeed, the separate books and generic modes do encourage different reading strategies—for example, utterances and episodes from one book are replayed in another, prefiguring and commenting upon one another, thereby anticipating some techniques of modernist aesthetics.¹⁵⁵

¹⁵⁵ Ann Ardis offers a similar argument regarding technique, form, and content. Still I am reluctant to consider the novel “avant-garde.” I am also sensitive to Sally Ledger’s caution that New Woman texts need to be considered as products of their time, without assuming that “radical” writers like Grand would accept contemporary feminist theories.
Contemporary critics emphasize the importance of reading in the New Woman novels, a crucial facet of the protagonists’ education. Teresa Magnum asserts that “to survive the New Woman must learn first and foremost to be critic of her culture. Her failure or success depends on how well she learns to read—men’s books, men’s reasoning, men’s means of control, and the masculine privilege that organizes the marriage plot” (Married, Middlebrow, and Militant 90; quoted in Lowenstein, 435). Anna Maria Jones argues that the New Woman novels sought “[...] to fashion new women (and men) through the very process of reading New Woman novels. [These, then] offer the possibility of activism through reading” (217). New Woman novels have been accused of sacrificing aesthetics to agenda, yet as Magnum, Jones, and Lowenstein demonstrate, the two are not inextricable. However, Gissing’s Marian Yule would seem to pose an exception to this argument regarding reading and perception. Even though she adeptly deciphers her cultural context—she recognizes her father’s limits and Jasper Milvain’s agenda to marry for money—she remain powerless to modify her position. Nonetheless Grand’s text, with its emphasis upon action and participation, remains more optimistic than Gissing’s.

Grand signals the importance of reading, from the novel’s start: “At nineteen Evadne looked out of narrow eyes at an untried world inquiringly. She wanted to know. She found herself forced to put prejudice aside in order to see beneath it [...]” (18). Evadne studies the cultural artefacts and people’s actions around her, but accepts the knowledge of them presented to her—and her own perception/ interpretation of them—only “ provisionally” (18). Evidence of Evadne’s self-education appears in a “commonplace book” which she starts keeping in childhood. She reads eighteenth-
century literature (an age in which education—particularly woman’s—was also deeply contested and revised), and tests her opinions—and trusts her own opinions—by writing her impressions and more importantly (privileged by the text itself) interpretations (28-9). Evadne, thus, is not a passive reader; even though she reads and critiques, she does not want to write creatively (a relative oddity for a new woman). Grand emphasizes that fiction alone is not enough for Evadne’s education: “Evadne was never a great reader in the sense of being omnivorous in her choice of books, but she became a very good one. [...] After studying anatomy and physiology, she took up pathology as a matter of course [...]” (39). Nor are texts and intellectual rigour adequate for her education: in the outdoors, “her intellectual activity was suspended—her senses awoke” (63).

While Grand celebrates senses and desire (albeit, sublimating them through spirituality), she also presents them as dangerous. For example, Evadne’s undoubted sexual attraction to Colonel Colquhoun impairs her ability to read him. Immediately after the wedding ceremony, Evadne learns, via another written text (an anonymous letter), about Colquhoun’s sexual activity and contraction of syphilis; she then leaves him altogether. She tells her aunt, “‘It was a mere affair of the senses [...] after reading the

156 Exemplars from the eighteenth century include Oliver Goldsmith’s *The Vicar of Wakefield*, and Henry Fielding’s *Tom Jones*. Evadne interprets these as cultural objects rather than narratives of aesthetical value (which perhaps explains why she prefers Goldsmith to Fielding; unfortunately Evadne misses the humour and satire of Fielding altogether). In her commonplace book, she underscores the way women are uneducated, then decried for being so, in *The Vicar*, and she condemns the sexual double standard she finds in *Tom Jones*: both of which she herself criticizes in her own late-Victorian society.

157 To be fair to Evadne, she is not the only character who cannot read Colonel Colquhoun. Her parents cannot gauge his reaction to Evadne’s desertion because “[h]e had always cultivated an inscrutable bearing” (83), while his attitude to his recalcitrant wife is “enigmatical” (101). He frequently twists his blonde moustache, however (surely even in Grand’s time a cliché of a “scheming” male?). He also smokes tobacco—for Grand, a sure sign of his moral decrepitude. The tobacco, however, clearly aligns him with the army men he commands, rather than the “decadent” fin-de-siècle aesthetes, who only smoke cigarettes.
letter [...] I could see him as he is. I noticed at once—but it was for the first time—I noticed that, although his face is handsome, the expression of it is not noble at all” (97).

The novel lays bare the point: even Evadne, who has read her medical texts well, cannot recognize the signs of (syphilis) because society “protects” its women from sexual knowledge before marriage.

Only after Evadne’s marriage is her reading material policed and censored. When Evadne refuses to live with Colonel Colquhoun immediately after their marriage, her father searches her room for clues regarding her transgressive stance; a ray of sunlight directs his gaze to “the row of well-worn books, [with] the scars of use and abuse on them” (123). The sun directs him to the books with an “uncompromising clearness” (123). The “scars” appear as if Evadne is performing vivisection on knowledge itself, but she does not hide her activities, even though her parents did not know what she was reading. The books are an archive of Evadne’s self-education: “‘histology, pathology, anatomy, physiology, prophylactics, therapeutics, botany, natural history, ancient and outspoken history, not to mention the modern writers and the various philosophies” (123). 158 The narration registers her father’s reaction: “He could not have been more horrified had the books been Mademoiselle de Maupin, Nana, La Terre, Madame Bovary, and Sapho [sic] [...]” (123). This list of the usual suspects again reflects Grand’s censure of French viral novels.

158 After the book list, the narration moralizes. “yet, had women been taught to read the former [the non-fiction] and reflect upon them, our sacred humanity might have been saved sooner from the depth of degradation depicted in the latter” (123). Grand iterates the argument later in the novel via Evadne’s “twinned” heroine, Edith, who also marries without sexual knowledge, but she refuses to “know;” she will not listen to Evadne’s advice, and contracts and dies of syphilis as a “punishment.”
In another moment of irony, the books mentioned above are the very ones that appear in Evadne’s marital home in Malta, as Evadne’s father and her husband conspire to persuade Evadne to behave as a “correct” wife by directing her reading. Novel-reading, in the nineteenth century, is usually blamed for corrupting women’s minds and addling their senses, and her husband hopes that fiction—specifically French fiction—will affect Evadne in the same manner. In an incredibly misguided idea on Colquhoun’s part to dismantle Evadne’s moral stance, he attempts to appeal to her emotions rather than her intellect through “sensuous”/“sensational” texts. Colonel Colquhoun tells her,

“I had a great fight with your father about the books. He said you’d got all your nonsense out of them, but I suggested that it might be a case of a little learning being a dangerous thing, so I captured all the old ones, and I’ve got a lot more for you; see, here’s Zola and Daudet complete, and George Sand. You’ll like them better, I fancy, when you get into them than [sic] Herbert Spencer and Francis Galton, but I’ve got you some more of their books as well [...]” (197-8).

The fact that Colquhoun admires Zola, Daudet, and Sand, authors already explicitly damned elsewhere in the novel, serves to emphasize Grand’s portrait of a “degenerate”—the syphilitic colonel is passing on “diseased” reading material, in the same way that he would have “infected” Evadne’s body had she agreed to consummate her marriage.

Needless to say, Colquhoun’s reading project backfires. Later he asks,

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159 The Victorian era’s perceived dangers of female novel-reading appear in many cultural texts of the nineteenth century. Madame Bovary is but one fictional example.
160 Critics such as Kennedy, Richardson, and Jones also analyze Grand’s concern with the dangers of reading French fiction.
“By the way […], have you read any of those books I got for you—any of the French ones?”

Her face set somewhat, but she looked up at him, and answered without hesitation: “Yes, I have read the 

*Nana*, *La Terre*, *Madame Bovary*, and *Sapho*.”

[...] “Well,” he said at last, “what has struck you most in them?”

“The suffering, George,” she exclaimed—“*the awful, needless suffering!*”

It was a veritable cry of anguish […].

When next Evadne went to her bookshelves she discovered a great gap.

The whole of those dangerous works of fiction had disappeared. (245-6)

The removal of the books lends some compassion to Colquhoun’s otherwise one-sided character; at the same time, his action further demonstrates his prerogative as husband to control the texts that appear in the house. The gap is not a liberating crack in the narrative but another sign of censorship, pointing to how Colquhoun sanitizes Evadne’s reading.

Fortunately for Evadne, Colonel Colquhoun dies in Book 6 (heart failure),\(^{161}\) freeing her for a (somewhat) healthier marriage with the (relatively) benign Dr. Galbraith. Yet after marrying her, Dr. Galbraith also censors Evadne’s reading. After finding her in the library with a book on “the hereditary of vice,” he “took it from her gently, remarking […] ‘I would rather you did not read these just now, Evadne [… ] promise me […] not to

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\(^{161}\) Grand ascribes to Social Darwinism, and health is equated—problematically—with morality here, and throughout *The Heavenly Twins*. A troubling aspect of the novel includes Grand’s advocacy of eugenics. Evadne’s readings in natural science taught her not only about physiology and anatomy, and diseases such as syphilis, but also about Social Darwinst thinking. Readers learn from Colonel Colquhoun that Evadne’s youthful reading included the scientists, Herbert Spencer—proponent of positivist science—and Francis Galton—proponent of eugenics. Regarding Colonel Colquhoun, Evadne observes, “‘He for one should never have been born. With his ancestry, he must have come into the world foredoomed to a life of dissipation and disease’ ” (701). Edith makes similar remarks regarding her husband and her child, who is born with syphilis.
look at any of these books without consulting me. I shall be having you like the medical students who imagine they have symptoms of every disease they study" (700). Moreover, the novel had alerted readers much earlier that Evadne had already read scientific positivists such as Herbert Spencer and Francis Galton, as well as medical documents, without suffering nervous affectations: “[...] she read of all the diseases to which the heart is subject [...] without fancying she had one of them” (39). However, as readers are aware, the six books that comprise The Heavenly Twins create a dialogue, and the hysterical Evadne of Book 6 is quite altered from the Evadne of Book 1.

In spite of the indictment against Galbraith in Book 2 (discussed below), this character gives voice to the last section in which he analyses Evadne’s medical case—and becomes her husband. 162 Many scholars (Driscoll, Lowenstein, Senf, Kennedy, Jones, Richardson) have explored the narrative shift from omniscient/third-person limited, to first-person in the novel. Lowenstein contends that the shift “reveals a profound mistrust of conventional epistemological models” (438) even though Grand does not disrupt master narratives. Lauren Simek argues against the widely held view that the shift to a male-narrated, first-person point-of-view interrogates the objectification of subjects by a clinical gaze (351 n. 18). Rather, she argues “the narrative shift provides

162 Any reader familiar with Charlotte Perkins Gilman’s “The Yellow Wallpaper” will recognize that an intellectual woman in a late-nineteenth century work of fiction, with a doctor-husband, could be in some danger. “The Yellow Wallpaper” was published in 1892, just a year before The Heavenly Twins, and much of the latter had already been written long before publication. The novel does not mention the short story, and I have not yet discovered if Grand had read it; however, given that Grand published in journals on both sides of the Atlantic, was a doctor’s wife as well as a vocal critic of education and marriage, and had a presence in America with the best-selling The Heavenly Twins, she probably was very aware of the transatlantic exchange of ideas regarding the Woman Question (and the rest cure). In Gilman's modernist text madness is portrayed as writing itself (“florid arabesque” flourishes she ‘reads’ on the wallpaper) and as a budding feminist consciousness – the protagonist’s hypersensitive consciousness projects a double, a vision of a caged woman who is liberated by the female protagonist.
Grand a prime opportunity to demonstrate her simultaneous commitment to the feminist critique of patriarchy and the active self-questioning essential to her model of moral agency for women” (351 n.18). I argue that the shift in narrative point-of-view is more problematic, not for aesthetic but for political reasons, for it critiques the clinical, male gaze which objectifies. While Grand herself may have faith in medicine, the novel’s emphasis upon education, reading, and interpretation serve to disrupt patriarchal narratives, such as medicine. But Gailbraith’s presence as both husband and doctor severely restricts Evadne’s perception, for he imposes a medical discourse upon her that hinders her ability to see.

Dr. Galbraith is also a reader, the medical man particularly trained to read the body: “The sign [Evadne] made was deceptive, and probably only a man of my profession, accustomed to observe, and often obliged to judge more by indications of emotion than by words, would have recognized its true significance” (607). This observation occurs near the beginning of Galbraith’s narrative, before his marriage to his patient. Galbraith styles himself a superior reader here, and draws upon the authority of his medical profession to justify his right to “observe” and “judge” Evadne. Nonetheless, he qualifies Evadne’s “sign” as deceptive, demonstrating the slipperiness of symptoms themselves, as well as of interpretations (like Charcot, Freud, and Breuer in their attempts

163 Grand, like Zola, saw the role of the novelist as similar to the role of the physician; however, rather than perform literary vivisections, she wanted to “cure” her society. Literary critic Angelique Richardson points out that Grand considered her novels to be medicinal (244), citing Grand’s own Preface to the 1923 edition of The Heavenly Twins; Grand wanted to “‘compound an allopathic pill […] and gild it so it would be mistaken for a bonbon and swallowed without suspicion of its medicinal properties’” (Grand, qtd. in Richardson 242).
to quantify and qualify the varying registers of the hysteric, Galbraith expects
deception).  

The narrative, however, does not allow the doctor his first-person point-of-view
without an editorial of its own; after pointing out that the doctor does not have access to
Evadne’s “early history” the narrator places the power of knowledge and interpretation
into the reader’s hands:

[...] the reader, better informed than [Dr. Galbraith] himself with regards to the
antecedents of his ‘subject,’ will find it interesting to note both the accuracy of his
insight and the curious mistakes which it is possible even for a trained observer
like himself to make by the half light of such imperfect knowledge as he was able
to collect under the circumstances. (588)

Clearly Grand undercuts patriarchal master narratives with this caveat—Galbraith makes
“curious mistakes” in his interpretations, and even he, the guardian of medical
knowledge, does not have access to every facet of Evadne. As doctor, and then as
husband, he may access her body, but not her mind/ consciousness. Yet even as Grand
offers some amount of agency and access to knowledge to her readers, as we will see
below, this agency is undercut as well—for if Galbraith is fallible, surely by the same
logic so is the reader.

Aside from the “Note” that simultaneously alerts readers to the danger of
misinterpretations while attempting to control or at least shape readers’ interpretations of
Dr. Galbraith’s interpretations, two other episodes in the novel, occurring in Book 1 and

164 See Didi-Huberman regarding the neurologists’ suspicions of the hysteric as fraud.
Book 2, are designed to place readers on guard against Dr. Galbraith. In Book 1, Mr. Ellis says to divert the Heavenly Twins, “Is it true that Dr. Galbraith is going to try some horrible experiments in vivisection this afternoon?” (153). The episode is short, and treated with humour—the ever-curious twins desert the drawing room for the doctor’s estate, and the text remains quiet about whether or not they are treated to a vivisection demonstration. Presumably they are not, but the episode demonstrates that doctors are allowed to gaze (invade) in detail at the most intimate workings of the body—and ultimately mind—in order to “know,” however readers are not. By denying readers an episode of vivisection, Grand also forces the reader to experience the ways in which medical knowledge—and by extension, all knowledge—is organized, packaged, autopsied, or denied to woman. While Dr. Galbraith is generally viewed by the characters and presented by the author as a benign figure, this episode plants some concern regarding Dr. Galbraith, concerns that cannot be overlooked when readers encounter his case file regarding Evadne in the sixth and final book of *The Heavenly Twins*.

The qualification used by Mr. Ellis—“horrible experiments”—is shared by the narrative. The young twins have divined that Dr. Galbraith is performing something forbidden, and they adopt the position of detectives, wanting to (in Diavolo’s words) “‘catch [him] at it’ ”(156):

They never doubted but that they should discover him hard at work, in some underground cellar most likely, to which they would be guided by the cries of his victims, and would be able to conquer his reluctance to allow them to assist at his experiments, by threats of exposure, and they were considerably chagrined when, having carefully concealed themselves in the thick shrubbery, in order to
reconnoitre the house, they came upon him in the garden, innocently occupied in
the pursuit of pruning rose trees. (155)

Although the scene is focalised through the active and playful imaginations of the twins
here, their youthful play draws attention to the adult world’s concealment, surveillance,
and (measured) distribution of knowledge. “Vivisection” is the metaphor Zola deploys in
his essay “The Experimental Novel” to argue that the author is indeed a doctor; here
Grand grants this same stature to the doctor, with reservations.

The second episode that indicates Dr. Galbraith is a figure of whom one should be
wary appears in Book 2, in the oft-quoted scene in which the dying Edith indicted the three
representative figures of late-Victorian patriarchal society: the church (and family—the
bishop is her father); the physician, the guardian of bodily/ secular knowledge; and the
class system, embodied in her husband, Sir Mosley Menteith. Because the scene is
focalised through the teen-aged Angelica (the transgressive half of the heavenly twin, and
the third heroine of the novel), who is being kept away from the scene, the reader too
only receives a partial glimpse of Edith’s accusation:

There were three gentlemen present, the bishop, Dr. Galbraith and Sir Mosley
Menteith. Edith was looking at her father. “That is why I sent for you all,” she
was saying feebly—“to tell you, you who represent the arrangement of society,
which has made it possible for me and my child to be sacrificed in this way. I
have nothing more to say to any of you—except”—she sat up in bed suddenly,
and addressed her husband in scathing tones—“except to you. And what I want to
say to you is—Go!” (325-6)
Edith’s direct address isolates the father (religion) and the husband (ownership/class) as
the most strongly condemned in this triumvirate. Nonetheless, Dr. Galbraith’s presence
here cannot be ignored. As a medical man visiting Edith on her syphilitic death bed, he is
complicit with the social structure that denies Victorian women knowledge of a (healthy)
sexuality.

Syphilis and hysteria are the two salient illnesses in *The Heavenly Twins*, as they
were in British and European cultures in the 1890s. Generally, both illnesses were
interpreted as signs of a “degenerate” society; in *The Heavenly Twins*, Grand shares this
diagnosis. While Galdós inflicts both illnesses on Maximiliano Rubín’s body, Grand
divides them between the sexes, in a medically symbolic “battle.” Yet Meegan Kennedy
contends that *The Heavenly Twins* maintains an eerie, euphemistic silence regarding the
bodies of the male syphilitics, a silence she finds deeply problematic:

[…] this odd combination of shocking speech and conventional concerns results
from Grand’s attempts to construct a “healthy” naturalism, a realist aesthetic
grounded in clinical facts but anxious to only “properly convey” the infectious
material of syphilis, shifting the emphasis of the novel from the problem of
syphilitic men to that of hysterical women (262).

Indeed, the male body is not often on display, although Evadne and Edith are clearly both
physically attracted to their future husbands. As noted above with Evadne, who misses
the “signs” of illness in Colquhoun, the syphilitic symptoms are not detailed; or, when
they are, they are euphemistic (Kennedy 266) or placed upon the female body.

I return, for example, to the body of Edith. The scene is focalised through
Angelica, the heavenly twin now in her adolescence: “Edith was lying on her back, with
her face turned towards Angelica. There were deep lines of suffering marked upon it, and
her eyes glittered feverishly, but otherwise she was gray and ghastly, and old. It was the
horrible look of age that impressed Angelica” (325). Perhaps syphilis is not mentioned
explicitly here because the reader views Edith via Angelica; though she wants “to know”
what is happening to Edith—again, the scene in which Edith condemns patriarchy is
couched within Angelica’s thwarted attempts to learn about Edith’s illness and its
cause—she cannot yet “read” the signs. Yet Angelica’s inability to read the scene
corresponds to the reader’s own lack of access. In keeping with Kennedy’s argument,
here, Grand creates a “healthy,” but sanitized, naturalism here.

Nonetheless, to return to Kennedy’s argument—the female body is rendered
“visible,” rather, a spectacle in The Heavenly Twins, with its focus upon the sexual
double standard. The body is particularly rendered spectacle through forms of madness—
“ravings” in the case of Edith, and hysteria, in the case of Evadne. Literary critic William
Driscoll aptly identifies syphilis as a metaphorical weapon (par.42) in Grand’s
narrative, 165 arguing, “By rendering these innocent deaths visible [the deaths of Edith and
her child born with congenital syphilis], Sarah Grand ruptures the accepted perception of
the disease and forces the reader to create a new metaphor that can absorb new realities”
(5; par.19). Here syphilis is no longer sinful “contamination” transmitted by female
prostitutes, but rather a visible sign (as Driscoll writes, couched in a larger Christian

165 Driscoll also effectively argues that Grand criticizes class structures as well, particularly the middle-to-
upper class women who refuse to recognize or acknowledge their complicity in the sexual double standard:
“Edith, an angel of the house, must suffer the same degradation as a ‘French dressmaker.’ [...] This
contradiction is not harmful because both readings strike at the same target—the sexual double standard”
(par. 37).
discourse) of patriarchal oppression of the innocent female body and spirit. In one sense, the move to hysteria is generically and politically unavoidable for Grand; as Elaine Showalter observes, “[...] of all the nervous disorders of the fin-de-siècle, hysteria was the most strongly identified with the feminist movement” (145). Evadne, the exceptional reader, is denied written communication (Colquhoun asks her to abstain from writing down her “ideas” or transmitting them in public); therefore, she, like other hysterics before her, uses her body—specifically the paralysis of her body—to articulate.

Book 6 documents or witnesses Evadne’s illnesses (she is often viewed through a doctor’s gaze). Many of the illnesses are concentrated in her head: “‘I have a cold,’ she said, ‘and a pain under my right clavicle, and the posterior lobe of my brain [...]’” (661). She is as knowledgeable as Dr. Gailbraith in her clinical observation, but Galbraith, like any good nineteenth-century physician-psychologist, wants access to Evadne’s mind: “‘Tell me about this mental malady,’ I begged.” Evadne displays a combination of shrewdness and coyness in her response: “‘Ah,’ she began, laughing up at me, but with a touch of bitterness. ‘I interest you now! I am a case! You do not flatter me. But I mean to give you every help in my power. If only you could cure me!’” (669). Galbraith finds her

166 Driscoll also refers to this as a perversion of the “angel in the house” modesty and innocence (par. 25).

167 Pykett echoes the observation: “The New Woman was persistently represented as an hyster, whose degenerate emotionalism was both symptom and cause of social change. [...] It was also thought to be a form of brain poisoning induced by the pressures of modern life and by women’s attempts to resist their traditional roles” (141).

168 Other critics have also linked the representation of illness in nineteenth century literature with heightened feminist consciousness or insight. In Bodily and Narrative Forms: The Influence of Medicine on American Literature, Cynthia J. Davis discusses the case of the author Margaret Fuller who associates her headaches “with a potential surmounting of bodily limits, enabling a loftier transcendence and a deeper insight free of gender’s persistent distortions and obfuscations” (Davis, 41).
“bitter” but she is critiquing power structures here, while struggling to maintain some sense of autonomy.

In addition to organic pains in her head, Evadne believes that her daydreaming is another form of illness: “[...] and now I am their puppet, and they are demons that torment me. [...] At first it was not incessant, but now the trouble in my head is awful” (664). Her ability to read and “see” clearly degenerates the more Galbraith attempts to diagnose her. These conversations with Galbraith, as well as his training, lead him to one interpretation: “When I opened my case book to make a note of her visit and a brief summary of the symptoms she had described and betrayed, I hesitated a moment about the diagnosis, and finally decided to write provisionally for my guidance, or rather by way of prognosis, the one word, ‘Hysteria!’” (664). Beizer would contend that Galbraith “ventriloquizes” Evadne here, and certainly the body/text quoted here bears [bares] this understanding. Galbraith admits that his diagnosis is hesitant and provisional; he leaves space for revision. He also, at this moment at any rate, recognizes the indeterminacy of the condition, which perhaps allows some expression for Evadne’s mind and body after all. Nonetheless, he pathologizes Evadne’s perceptions with a specifically feminine illness of the time; the medical discourse cannot recognize or admit any other finding.

This thesis has employed Freud and Lacan as important proponents of psychoanalytic theory, however, feminist (re)interpretations of their work is significant here as well. Luce Irigaray’s works interrogate the phallogocentric psychoanalyses of Freud and Lacan, as Grand’s works interrogate the order of knowledge of the 1890s.169

169 Of course, Grand is far more conservative than Irigaray.
When reading hysteria, Irigaray argues, “ [...] there is a revolutionary potential in hysteria. Even in her paralysis, the hysterical exhibits a potential for gestures and desires” (“Women-Mothers” 47). Dr. Galbraith records that Evadne “betray[s]” symptoms, symptoms that for him, cannot—or will not—speak for themselves, as Irigaray notes is the register of the hysterical. If syphilis becomes a metaphorical weapon (as noted above, by Driscoll), also pushing innocent Edith into a new awareness of her social position, so too does hysteria.

With the twin illnesses of syphilis and hysteria, Grand demonstrates and refuses the notion of the sacrifice of women for the common weal. Again, Edith condemns this sacrifice: “‘you who represent the arrangement of society, which has made it possible for me and my child to be sacrificed in this way’” (325). Similarly, Evadne contends, “I see that the world is not a bit better for the centuries of self-sacrifice on the woman’s part and therefore I think it is time we tried a more effectual plan. And I propose now to sacrifice the man instead of the woman” (99). While Evadne’s “effectual plan” is rather reductive, one can see why she refuses to participate in her society’s roles. One of Irigaray’s central arguments regarding psychoanalytic theory is that Western culture is not founded upon patricide, as Freud contends with the Oedipal-model of (un)conscious development, but matricide (Whitford 25). Irigaray contends that “the whole of our western culture is based upon the murder of the mother” (“Women-Mothers” 47) and that “The murder of the mother results, then, in [...] the burial of the madness in women—and the burial of women in madness [...]” (“Bodily Encounter” 37; 44). While Evadne is steadfast in her refusal to accept her sexual sacrifice, she agrees to maintain some (public) silence regarding the real reason for the rift in her first marriage. Still her head and her body
cannot contain the socially sanctioned silence: “‘but now the trouble in my head is awful’” (664) she tells Galbraith.

For Freud, the mark of the hysterical (in addition to repetition) was repression, particularly the repression of an early, painful sexual experience. While Freud dismissed the term “scotomization” for repression, Lacan favoured the term “scotoma” and its relation to perception because of its function of misrecognition—for Lacan, the subject always mis-recognizes himself or herself. Here one must note that even in her “hysterical” state, Evadne is the figure in *The Heavenly Twins* who most often clearly perceives and interprets her social position; she refuses to scotomize, or to be scotomized, completely. Evadne may indeed be a hysteric, but the way in which Grand dramatizes this affliction as a “New Woman” case study aligns her condition more closely with the problem of the migraine sufferer than has been otherwise recognized. Focusing on the unraveling of a wife and passionate reader, Grand’s novel shifts the discourse away from what the body says or what Victorian discourse says the female body says, and instead asks what the eyes see. In this way, it is the migraine’s dominant trope of vision rather than the trope associated with hysteria, speech, that proves more powerful; even though medical discourse indeed restricts Evadne, it cannot do so completely.¹⁷⁰

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¹⁷⁰ Molly Youngskin, in *Feminist Realism at the Fin de Siècle: The Influence of the Late Victorian Women’s Press on the Development of the Novel*, argues that Angelica is able to “speak up and take action” in the novel, whereas Evadne and Edith are not. She writes, “While both Angelica and Evadne gain awareness of their marginalization in Victorian culture and while Angelica is able to speak up and take action at least some of the time, Evadne cannot move successfully from awareness of her cultural status to speech and action that might make life better” (45). If a new feminist consciousness or awareness is paradoxically introduced through Grand’s vision of suffering female bodies, it is important that this consciousness alone does not lead to social justice or feminist transformation. However, due to space limitations, I am not able to fully address Angelica’s new agency and feminist awareness in Grand’s novel.
Conclusion

“Health means for me the maintaining of my usual route without let or hindrance.” Montaigne, *Essays*

“It is your soul that is attacked by a burning fever, cast to the ground by epilepsy, dislodged by an intense migraine and, in short, struck senseless by those illnesses which attack all the humours and the nobler organs.” Montaigne, *Essays*

In a 2002 review entitled “Pathologizing Victorians,” Kirstie Blair ponders why recent studies of Victorians’ concepts of the body, health and disease, focuses upon illness rather than health: “[...] to focus only on disease [...] gives the impression of a society so concerned with the pathological that the ‘normal’ alters or disappears. [...] what would happen to our sense of Victorian culture if disease was seen as the norm and health as a deviation[?]” (138). Yet as this dissertation reveals, illness was a central preoccupation of the mid-to-late nineteenth-century Britain and Europe. Intriguingly, in her 1930 essay “On Being Ill,” Virginia Woolf writes that illness hardly appears in literature as does love or war; of headaches, she writes, “[...] let a sufferer try to describe a pain in his head to a doctor and language at once runs dry. [...] He is forced to coin words himself, and, taking his pain in one hand, and a lump of pure sound in the other [...] so to crush them together that brand new word drops out. Probably it will be something laughable” (9-10).

Certainly, Woolf positions the sound-and-fury experience of headache and its inarticulate state as an absurdity, a reflection of modernist thinking. But she also addresses the


172 Woolf discusses mainly novels here. Of course, Western literature contains narratives of illness, from Boethius’ *The Consolation of Philosophy* (524) to Michel de Montaigne’s *Essays* (1580; 1592), John Donne’s *Devotions* (1624), and Harriet Martineau’s *Life in the Sick-Room* (1844). These above mentioned authors, however, believed in a religion that Woolf did not.
creative potential of illness and the possibility of illness to open up a new world of imaginative play. Illness, as Alice Hall writes in a short piece in the University of Nottingham’s “Madness and Literature” online forum, opens up an “alternative perspective through which both literary form and mental illness can be re-imagined.” As Hall notes, at a key moment in Woolf's essay, “The narrator is depicted as lying on her back, staring at the swirling clouds, a ‘gigantic cinema play[in] perpetually to an empty house’ (14). The meandering sentence structures reproduce the narrator’s thought processes, moving fluidly between images, perceptions, past and present” (Hall, “On Being Ill,” n.pag.).173

In my dissertation, the illness of migraine has also been communicated through a play of perceptual shifts, narrative shifts, repetitions and reverberations, inner thought processes, and "thick" description. Certainly literature and science are closely linked through the figure of the migraineur: as much as authors such as Émile Zola turned to medicine for models of creating fiction, physicians of the mid-to-late nineteenth century often looked to literature to lend substance or credence (and aesthetic value) to “imagine” the perceptual alterations of illness in the conditions they were diagnosing and cataloguing. This turn to literature suggests that the boundaries between medical studies and art at this time were more porous than we might allow. Nineteenth-century literature was greatly influenced by positivist science or “objective observation,” but it was also shaped by the discovery of an embodied perception, as Jonathan Crary argues. Indeed,

173 See Alice Hall, review of Virginia Woolf, “On Being Ill,” Mental Illness & Literature Network,” available at http://www.madnessandliterature.org/literature.php?id=162&resultpage=1. While several differences exist between a general construction of “madness” and migraine, we should note that the former, in the nineteenth century, was at times “allied” with the latter; Galdós’ Maximiliano Rubín conveys such a conflation, as his creator infuses the material-based naturalism with concerns of the “espiritual.”
“subjective vision,” was a term that Gowers coined in his 1895 address to the Ophthalmological Society, “The Bowman Lecture on Subjective Visual Sensations,” in which he outlined the sudden appearance of spectra fortifications and optical illusions in the context of migraine and other neurological illnesses. Here one might recall that Zola’s “transparent screen” mounted in the window frame is not an objective mirror of reality, but sees the world anew through a “distorting” or “distracting” lens, like the experience of migraine itself.

As mentioned in the introduction and first chapter of this dissertation, both Edward Liveing and John Hughlings-Jackson cite Charles Dickens’ *David Copperfield* (1850) to illustrate the phenomenon of “double-consciousness” (as Esther Lardreau points out in her article on the “dreamy state”). In this passage from Dickens’ novel, the narrator diverges from the action to ponder the fluctuations of impressions and sensory experiences: “We have all some experience of a feeling which comes over us occasionally, of what we are saying and doing having been said or done before, in a remote time—of our having been surrounded, dim ages ago, by the same faces, objects, and circumstances—of our knowing perfectly what will be said next, as if we suddenly remembered it” (566). Readers of the twentieth and twenty-first centuries, schooled in stream-of-consciousness literary techniques and psychological theories, might recognize that Dickens is delineating the sense of “déjà vu,” even though it was not named as such in 1850. Not long after this date, though, neurologists were attempting to identify the parts of the brain that prompted such thoughts and sensations; the condition of “double-consciousness” experienced during migraine (and epilepsy) lent scientists and artists alike a new vocabulary for studying the human mind and body.
Edward Liveing was a member of the audience at the 1870 reading of Hubert Airy’s paper “On a Transient Form of Hemiopsia.” His *On Megrim* contains an interesting testimony of the discussion after the reading, not only because Airy junior provided a riveting account of scintillating scotoma, but also because attendees exchanged stories about their own experiences with migraine or sick-headache, curious experiences that Liveing himself had noted in his cases. After Airy’s lecture, an older man, according to Living, shared his story of transient hemiopsia: “[he] experienced a singular disorder of ideation; circumstances and events which had occurred long before were brought back to him as if actually present; his consciousness appeared to be doubled, and the past and present confounded” (109). In a footnote, Liveing refers the reader to a page from Dickens’ work. Similarly, Hughlings-Jackson, in “On a Particular Variety of Epilepsy” differentiates vertigo and aura from what he calls a “dreamy state” (a term he prefers to “Intellectual Aura”) that sometimes occurs in patients before an epileptic attack. He stresses that

> [...] *loss* of consciousness is not essential for the diagnosis of epilepsy; there may be *defect* of consciousness only; and, as we have been saying, there may be ‘over-consciousness’ (‘dreamy state’) co-existing with the defect of-consciousness; with defect of consciousness as to present surroundings there may be a rise of consciousness as to some other and often quasi-former surroundings (‘dreamy state’). (183)

Even though Hughlings-Jackson focuses upon a supposed deviation from the “normal,” repeatedly referring to a “defect” of consciousness, in the idea of “over-consciousness” he describes a state of awareness similar to the one recounted by Liveing. Hughlings-
Jackson, too, quotes the same passage from Dickens’ novel to exemplify the medical condition. Dickens’ is not an oscillating stream-of-consciousness expression for literary critics, but, as these physicians’ references reveal, his “materialist” narrative looks forward to modernist fractures of consciousness and representations of “reality” through technique as well as theme.

As discussed in the introduction and first chapter of this thesis, “migraine” appears under various names with relatively similar symptoms throughout the annals of Western medicine. Even though migraines (or “sick-headaches” or “biliousness”) make fleeting appearances in European literature before the nineteenth century, as this dissertation has shown, it is first in the nineteenth century novel that a new figure suffering from “paroxysms” of migraine begins to appear. Esther Lardreau has suggested that nineteenth-century France was a nation of migraineurs, and that migraine reflected “[...] a grimacing image of the various fractures in the country, be they social or sexual” (“La migraine,” Bibliothèque numérique Medic@ n.pg.). Certainly, the migraineur, with

174 As already mentioned in a number of footnotes in the dissertation, eighteenth-century literature contains several fleeting images of migraineurs and migraineuses. Alexander Pope (1688-1744), who suffered migraines himself, uses migraine as mock-epic suffering in “The Rape of the Lock” (1712, 1714): “She sighs for ever on her pensive Bed./ Pain at her Side, and Megrim at her head” (Canto IV 23-4). Novelist Fanny Burney (1752-1840) invokes migraine in Evelina (1778) as an affectation—a patriarch attributes these fits to women: “‘There are fools enough in your world, without your adding to their number. I’ll have no daughter of mine affect them sort of megrims’” (109). The poetry of late-eighteenth century English author, Jane Wiscoam, also features lyrical suffering; her poem “The Head-Ach, Or An Ode to Health” (1794) traces the anguish and isolation of one with incurable head pain (“migraine” is not named specifically, but tropes of torture “centr[ing] in the temples, brain, and eyes” (line 20; her emphasis) evoke migraine pain (for an excellent analysis of this poem, see A. Elizabeth McKim’s article, “Making Poetry of Pain: The Headache Poems of Jane Cave Wiscoam”). In France in the eighteenth-century, the Marquise de Merteuil, in Les Liaisons Dangeureuses (1782), employs fits of migraine to conceal her affairs: “J’ai ma migraine; je me couche pour tous mes gens; et, restée enfin seule avec la veritable, tandis qu’elle se travestit en laquais, je fais une toilette de femme de chambre” (100). Ozias Midwinter, the “doubled” Allan Armadale and pensive, brooding “othered” figure in Wilkie Collins’ Armadale (1866) also suffers migraine: “‘How did you manage to clear your head of those confounded megrims?’” (133) his friend Allan Armadale asks him.
his/her “disturbed” vision, debilitating head pain, and paralyzed figure, is symbolic of a European age that witnessed instability in government, gender, population, and class. Lardreau’s “grimacing image” suggests another icon of stark modernity, expressive artist Edvard Munch’s “The Scream of Nature,” the first version painted in 1893. This vision of a man clutching his head in pain and/or terror, against indefinable scenery but amidst colours that twist, blare, and hurt, invokes the sensory overload experienced by a migraineur.

Migraine figures in the narratives studied in this thesis collapse and break down. Claude Lantier is overwhelmed by sensory perceptions which are sublime but ultimately incommunicable, while Jacques Lantier is crushed by the machine of modernity. Auguste Vabre’s feminized body renders him ineffectual in fulfilling “traditional” performances allotted to the men of France, wherein military and mercantile machines defined masculinity. Maximiliano Rubín’s intense logic (a parody of positivist rationality) and unstable body lands him in Leganés. Marion Yule cannot be incorporated into late-Victorian society, neither through marriage, nor through writing for a living as an emergent New Woman. Evadne Colquhoun-Gailbraith, created by her author as an exemplar to counter discourses of patriarchy and threats of bodily “degeneration,” becomes subject herself to that “feminine” condition authored by male physicians of the late-nineteenth century, hysteria. Even Alice’s playground is fraught with undercurrents of panic and menace.

But the migraine experience is not only a “peculiar horror.” As these migraine case studies show, the literary figures do not only collapse and cave in to pain. During key moments of extreme head pain and bodily paralysis, the characters reveal a
heightened awareness of their (gendered) body and position in society. Indeed, a subject may be “split” and “scotomized,” or subject to a mis-recognition of oneself, but even in these moments of stunned cognition and sensory overload, the sufferers remain attuned to their bodies and its perceptual registrations. Renée, in La Curée, may not articulate or speak clearly; nonetheless through the power of the gaze she registers her own social split between her bourgeois upbringing and objectification in patriarchal society and demonstrates an awareness of the oppressive atmosphere of her milieu. Hélène of L’Une page d’amour can also perceive through her window “unseen” elements in the panoramas of Paris. Maxi’s heavy head paralyzes him (physically, socially, sexually), but his very instability enables him to see, interpret, and create alternate realities, and apprehend more keenly the vibrations that shape his position in a city that increasingly espouses individualism but values more the conformity of industrialism, capitalism and the military. Evadne’s reading provides her access to medical discourse, and allows her to be wary of being classified as a “case” (her syphilitic friend also becomes aware of society’s “double standard” as regards venereal diseases). These moments of “double-consciousness” in the migraine sufferers create “moments of being” (to turn to Woolf again), no matter how the physiological may impose itself upon the “thinking” brain. Since the rise of industrial modernity led to a new public discourse on nervousness and thus also new awareness of migraines and other allied disorders, it is no surprising that the literary movements of realism and naturalism, concerned with the body and the senses, turned to migraine figures to articulate important aesthetic and social concerns.
Migraines continue to haunt the Western cultural imaginary. Many migraine sufferers use their experiences to depict the experience of scotoma and pain itself, and the genre has come to be known as “Migraine Art.” In the 1990s, Greg Fiering’s series of comic strips entitled *Migraine Boy*, features a boy’s constant struggle with chronic migraines who is constantly aggravated by his next-door neighbour (REM’s CD *Monster* features *Migraine Boy* in its liner notes). In these stark and spare drawings, the migraines are depicted as jagged lines emanating from the boy’s head. In popular culture, films and television series qualified as horror or supernatural employ migraine to portray troubling breakdowns in human vision and consciousness (usually these films centre around anxieties about “madness”). David Cronenberg’s 1981 film *Scanners* does not depict migraines *per se*, but its narrative of heads—particularly exploding heads—and the threatening telekinetic powers of the “scanners” who can read and control others’ thoughts and movements to the point of destruction could be seen as a postmodern neurological case study. Martin Scorsese’s 2010 film *Shutter Island* uses migraine as a primary trope as the audience is forced to question “the real” through the visions and breakdowns in vision of the main character who is investigating the disappearance of a woman. Joss Whedon’s television series *Angel* (1999-2004) features a character (Cordelia) whose mind-numbing visions mimic the fractured vision and pain of a migraineur.

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175 “Migraine Art” is a sub-genre of its own. The term was coined by Derek Robinson, who on several occasions during the 1980s in Britain, held “Migraine Art” exhibitions and competitions, in which migraineurs drew and painted expressions of their suffering. Robinson and his colleague, Klaus Podell, MD, assembled and published a text of hundreds of these illustrations, in their 2008 volume *Migraine Art: The Experience from Within*. While lauding the exhibitions, disability and performative studies critic Petra Kuppers persuasively points out a threat inherent in this art: “[…] this expansion in communication occurs at the loss of the word […].” Although individual practitioners might be trained to decode bodily signs […], the bottom line is still driven by diagnoses codified in medical reference books, amalgamations of increasingly specialist phrases whose meanings rely on shared networks” (147). See “Monsters, Cyborgs, Animals: Crashes, Cuttings, and Migraines” in *The Scar of Visibility: Contemporary Art* (2007), 127-54.
very instability of the characters’ vision (and other sensations), their very embodiedness, allow them to perceive more than the material, physical world.

Airy’s artwork became the standard by which doctors could identify—and codify—signals of migraine onset. Yet they also seemed to prompt more aesthetic experiments. Again, the roots of migraine art and the intense flashing cuts across cinematic and TV screens take us back to Victorian media/medical culture. In 1895, the year Gowers presented his Bowman lecture, he also donated several illustrations by one of his patients and from a distinguished watercolor artist to the library of the Ophthalmological Society in London, describing them as “a collection of facts unique in their character […]” (“Bowman Lecture” 1627). Today, the subjective visions of patients have been used by medical societies and even pharmaceutical companies as “migraine art” as they seek to translate information and facts about the body into aesthetic awareness.

Significantly, many of the migraineurs and patients suffering from allied nervous conditions in this nineteenth-century European and British literary canon examined in this thesis are artists, authors, and readers. If the external onslaught of technological

176 Here one might also consider the intersection of migraine “art” and migraine “visions.” Historian Katherine Foxhall reminds us that retrospective diagnoses are fraught with difficulty, particularly with migraine: “Migraine leaves no physical trace, and offers no scope for bioarchaeological analysis” (n. pag.). Foxhall uses the case of Hildegard of Bingen (1098-1179) as an example of this difficulty, for neurologists from early-twentieth century Charles Singer to contemporary Oliver Sacks interpret Hildegard’s visionary accounts and drawings as examples of migraine; her hallucinations and drawings of stars, birds with jagged wings, and crenellated buildings, for these neurologists, strongly resemble the luminous, shimmery fortifications of scotoma (see Sacks 299-301). Sacks also cites the visions of physician Gerolamo Cardano (1501-1576), who, in his autobiography, wrote, “These images were, moreover, transparent, but not to such a degree that it was as if they were not, nor yet so dense as to be impenetrable to the eye: rather the tiny rings were opaque and the spaces transparent” (qtd. in Sacks 302). Sacks, however, admits that while the visions are similar to scotoma, they cannot be verified as such, based on Cardano’s account (302).

177 Currently the Migraine Action Commission in the UK has a collection of 562 migraine art images (536 are original pieces submitted by patients).
innovations and modernity, in the form of railway travel, grand reading rooms and overly
bright, noisy public exhibition venues, excite and fatigue these novel’s spectators/readers,
the very material narratives of migraine pain remind one of the fragile embodiedness of
perception, anticipating the modernist fragmentation and flow of “inner” thoughts to
come.
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