Fluid economies: Portraying Shakespeare's hysteric


ABSTRACT

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FULL TEXT

Headnote

Rather than adopting the psychoanalytic construct of "hysteria," this essay examines how hysterical pathology is defined according to early modern medical and cultural contexts and how it is represented in Shakespeare's plays. Looking at nineteenth-century paintings as metaphors, the essay renders visible the Shakespearean hysteric lost to history.

Long explained and interpreted by historians of medicine, medical practitioners, and psychoanalytic theorists, hysteria has only recently been recognized as a subject fit for cultural studies. We can trace the exploration of hysteria's cultural tradition to feminist responses to Freud's seminal case history of Dora, and we can see it culminating in such recent (1990s) publications as Hysteria beyond Freud (Gilman et al.). While the latter volume collects essays from a variety of periods, beginning with Helen King's discussion of the Hippocratic corpus, its primary focus is nineteenth- and twentieth-century medical and cultural history. Although the work contains two important essays considering the medical history of hysterical illness before Freud, its essential project is to consider the legacy of Freud's mark upon hysteria and hysteria's influence upon largely nineteenth- and twentieth-century culture beyond Freud. In this way, the volume is largely representative of the critical impulse behind contemporary hysteria studies as a whole.

Comprehensive diachronic medical histories of hysteria do exist, with liza Veith's influential Hysteria: The History of a Disease still standing as critics' most relevant reference work, even though its accuracy has frequently been questioned (see Micale; King). Veith, however, is a medical historian unconcerned with the implications of the culturally inscribed theories of hysteria that she relates. Michel Foucault's The History of Sexuality, Volume 1: Introduction leads us to the powerfully influential statement for literary historicists that "a hysterization of women's bodies" was one of the "four great strategic unities which, beginning in the eighteenth century, formed specific mechanisms of knowledge and power centering on sex" (103-04). In keeping with the significant influence that Foucault's inaccurate pronouncement has had as a limiting force, hysterical pathology is rarely investigated as a socio-medical and literary construct before the eighteenth century.

As G.S. Rousseau points out, "While a study of the medicalization of the imagination in the Renaissance and Enlightenment is badly needed, a study of the transformations of the image of 'the mother,' construed literally and metaphorically, visually and iconographically also remains a desideratum" (197 n. 99). The multifaceted "desideratum" that Rousseau identifies in Renaissance studies is the scope of my essay. English early modern
medical and creative literature persistently features female characters identified as hysterical, and it is this habit of characterization to which I bring attention. While the hysterical female character in Renaissance literature frequently may share a similar set of physically represented behaviours of the body-tics, convulsions, synapses, and traits-with the later patients of Charcot and Freud, the early modern representation of hysterical illness in its multiple forms is not limited to the performance of the symptoms of hysteria. Nor, as King cautions us, may we even understand "hysterical" and "hysteria," with their different etiologies, as one and the same malady along a historical continuum. Thus, it is important to distinguish early modern medical theory's understanding of the causes of the disease from the neurological and psychosomatic models of hysteria inaugurated in the late seventeenth century (see Veith; Gilman, Hysteria). Indeed, today the term hysteria is associated with Charcot's and then Freud's theories of repressed female sexuality as Freud presented them first in the case history of Dora. Freud's "Fragment of an Analysis of a Case of Hysteria" sets out his complex definition of hysteria as a psychosomatic disease manifested by literal, physical symptoms caused by repressed sexual emotions, a theory that he refined in subsequent publications.

Freud's theories, while innovative, continue to build on the ancient Greek literalist models for hysterical illnesses, believed caused by specific fluids building up from repressed sexual desire. Regardless of the difference between psychosomatic models developed in the nineteenth century (see Veith; Showalter) and strictly physiological models for hysterical illness understood in the sixteenth and seventeenth centuries, it is important to note what has and has not changed with regard to the performance of hysterical symptoms from the descriptions in Hippocratic medicine through the early modern period to the nineteenth century. While early modern medical writers and nineteenth-century physicians do not share beliefs about what constitutes the underlying cause of hysterical symptoms, the relevant point is that the exhibition of some symptoms by a female actor remains relatively constant (see also Rousseau 100ff.).

My essay focusses on the representation of women suffering from hysterical illnesses in both Shakespeare's plays and representative medical treatises, for it is only by looking at these generically distinct literatures in tandem that we may understand the basis for an early modern literary portrayal of hysterical illness that is distinct from the Freudian/postFreudian paradigms for the etiology of female pathology. In studying pre-Freudian representations of hysterical maladies, I suggest that one must be wary of projecting psychoanalytic frameworks onto early modern constructs. In the space of this essay, I provide a historical context for reading hysterical illness as early modern culture understood it.

In other sections of the essay, I address the representation of hysterical illness in two other media, nineteenth-century painting and poetry. I focus on these works conceived in a period at a substantial remove from Shakespeare's to draw a metaphorical connection between artworks, poetry, and the early modern representation of female pathology. The visual examples provided by the work of Sir John Everett Millais, Mariana in the Moated Grange and Ophelia, emphasize powerfully and immediately the medico-erotic pathology now only a latent mark in Shakespeare's exposition. Because Millais's subjects display symptoms that we may recognize as more or less obvious signs of "hysteria," we are more readily prepared to "read" Shakespeare's characters as hysterical: we can see illustrated visually what we cannot now "see" about early modern medical pathology when we read Hamlet or Measure for Measure.

Thus, I offer Millais's painting Mariana in the Moated Grange as a particularly apt "reading" of Shakespeare's notion of hysterical pathology, as is Ophelia, more subtly. Similarly, Alfred, Lord Tennyson's short poem "Mariana" encodes hysterical illness in its exploration of the title character's romantic plight in Measure for Measure. Here, poetic metaphors employed to describe Mariana's decaying home seize upon the very literal idea in Shakespeare's play of Mariana's decaying and hysterically pathological body. The painters' hysterical characters from Shakespeare lend us a vocabulary for understanding that hysterical illness exists for early modern female subjects as well as for post-Freudian literary subjects. I discuss Shakespeare's works as representative of the general habit of lateElizabethan and particularly Jacobean literature to pathologize, to make diseased, female desire. Further, I want to underscore the degree to which my sample of Renaissance medical texts from 1540 to 1660 inscribe...
pathological femininity as specifically hysterical pathology, for this relationship has been almost completely
overlooked by critics, as my brief overview of recent humoral criticism reveals.
In his 1636 work The Sick Womans Private Looking-Masse. Wherein methodically are handled all uterine affects, or
diseases arising from the wombe, John Sadler announces: "Amongst all diseases incident to the body, I found
none more frequent, none more perilous then [sic] those which arise from the ill affected wombe: for through the
evill quality thereof, the heart, the liver, and the braine are affected" (A4v). Contemporary medical texts reveal an
intense interest in defining and detailing the gynaecological indispositions and diseases of women, specifically
uterine illnesses believed caused by unsatisfied sexual desires. That these uterine illnesses constitute the general
category of "hysterical" illness, however, does not mean that such a disease with concrete, physical uterine
dysfunction at its root should be understood as the psychological disturbance we refer to as "hysteria." Nor does it
mean that the disease should be understood as at all unusual: quite the contrary, in fact, as Sadler’s representative
comment directs us. With the notable exception of the early seventeenth-century physician Edward Jorden, who
conceives, however narrowly, of the role that disturbed emotional states play upon the physical well-being of his
patients (see MacDonald), medicine did not imagine the hysteric as a sufferer of psychological disturbances along
the lines of the Freudian model.
When mention is made of hysterical illness in early modern literature, the paradigm concerns strictly the status of
uterine health. Indebted to the long-authoritative Hippocratic and Galenic models of anatomy and physiology, early
modern hysterical illnesses were simply illnesses suffered by women, because women possessed a "hysteria," or
uterus (Veith 1), within which disease was easily, even typically, bred. It is well established in the work of medical
historians that the term hysteria does not enter the English vernacular until 1801 (see King), but this term must not
be confused with the more broad, extremely common usage of the adjective hysterical, a resolute part of early
modern physicians’ vocabulary. In this sense, hysterical means any indisposition attributed to maladies originating
in the uterus, the routine site of pathology. Helen King has explained in detail in her masterful essay "Once upon a
Text" that the Hippocratic canon’s term hysterike pnix is what the early modern period calls "strangulation" or
"suffocation of the mother." Symptoms of "the mother" are perhaps those same tics, twitches, syncopes, and
paroxysms identified by the modern term hysteria. However, "the Greek adjective hysterikos means ‘from the
womb;’ as such, it is a purely physical description of cause, showing the part of the body from which other
symptoms emanate. In women, as another Hippocratic text puts it, ‘the womb is the origin of all diseases,’ so it
would be fair to say that, in Hippocratic gynecology, all diseases are hysterical" (13). Mindful of King’s caution and
of the need for absolute clarity in discussing these unfamiliar concepts, I use the term hysterike pnix and
suffocation of the mother or womb for the one kind of condition that the early modern period associates with the
sensation of choking. I use the term hysterical, or simply uterine, to refer to the extremely broad range of illnesses
attributed to an underlying and even fundamental pathology of the womb.
Hysterical illnesses-furor uterinus ("womb fury" or frenzy), chlorosis (greensickness), and strangulatus uteri
(strangulation of the "mother") develop within the uterus because of suppression of the menses or, even more
often, because of the unexpelled "seed," or female sperm, produced by sexual desire. Technically, the menses and
seed are versions of the same fluid, at greater or lesser stages of refinement. Recurrent metaphors of agriculture
and horticulture are adopted by medical writers to define the menses as "flowers," linguistically similar to the
description that Thomas Vicary gives for the female genitals in the popular tract Anatomie of the Body of Man as
rose leaves not yet ripened, with a hymen not yet "deflowered." Nicholas Culpeper also waxes poetic: "[The
menses) are called by some Flowers, because they go before Conception as flowers do before fruit" (67-68).
Renaissance medicine follows the Hippocratic and Galenic models by theorizing the existence of female "sperm" to
account for the woman’s role in reproduction. Women were thought to produce a greater amount of sperm,
though of considerably more inferior quality than male sperm. Consequently, medical literature informs us that
women experiencing unsatisfied desire were regularly thought to suffer from a buildup of "female seed." The belief
in the buildup of fluids thought to turn into noxious stews and even poisonous vapours extremely quickly is related
to holldovers from ancient Greek models of female sexuality, which stated that women are the sex predisposed to
uncontrollable sexual appetites; by comparison, the male body, with its superior humoral composition and physiological structure, easily regulates its desires. "When the seed and terms are mixed with other humors after they are corrupted," Culpeper writes, "[they] are like poyson" (107). He then expands: "Moreover the corruption is from the womb in a peculiar manner: for as Fernelius saith, The place from whence comes life, is also the breeder of the most deadly poison" (114).

Necessarily, women need to release this excessive volume of fluid, and sexual intercourse is the best method sanctioned by medical authority for the release of seed, lest it putrefy and create a host of hysterical illnesses-hysterical again because the uterus is predisposed to disease. Fluid imbalance causes another humour to dominate in the body, which creates a discernible symptom in character with the intrinsic "identity" of the humour (see Hoeniger). For example, convulsions, syncope, and rising sensations in the chest are all possible manifestations of a single underlying uterine disease acting upon different humours and regions of the body. This set of afflictions is seldom recognized by critics to include melancholic indispositions suffered by women, yet texts such as Lazare Rivi&re's The Practice of Physick (dated 1668, but written in the 1630s), routinely attribute melancholic disorders to uterine origins. In this sense, exhibiting the symptoms of melancholy or of "hysterike pnix" are only two possible manifestations of uterine illness.

Medical texts such as Andrew Borde's The Breviary of Helthe, Philip Barrough's The Method of Physick, Jacques Ferrand's Erotomania, Helkiah Crooke's Microcosmographia: A Description of the Body of Man, Robert Burton's The Anatomy of Melancholy, Sadler's text, Culpeper's A Directory for Midwives, Nicholas Fontaine's The Womans Doctour, and Riviere's text include long sections or whole chapters devoted to women's illnesses caused by excessive seed and/or menstrual blood irregularities. These texts stress insistently that the uterus is itself the site of pathological humoral imbalance, and they imply that the normative state of the female body is diseased. This extremely routine and concerted focus on pathology has gone largely unmentioned by critics. Indeed, Audrey Eccles's now-standard reference, Obstetrics and Gynaecology in Tudor and Stuart England, provides an excellent summary of information contained within many of these tracts, as does Veith's medical history; however, very seldom has the historical context met the literary representation of hysteria.

One notable exception is Gail Kern Paster's work, which has investigated the period's humoral theories of the body as well as the consistently gendered portrayal of incontinence in dramatic literature. In The Body Embarrassed: Drama and the Disciplines of Shame in Early Modern England, Paster cites contemporary medical texts and play texts by Ben Jonson, Thomas Middleton, and Shakespeare and argues compellingly that the inability of women to retain fluids within the body is a literary trope. Nevertheless, I make what is essentially the opposite claim of Paster's, that the dominant trope in both forms of literature is not incontinence in its various manifestations but retention. Robert Martensen concurs: "The central issue in traditional physiologies of women [... I was thought to be moisture" (108). Both my argument and Paster's take the perceived excessiveness of female fluid production as foundational, but the emphasis on female retentiveness takes precedence over tropes of incontinence for any discussion about hysterical disease. Instead, the early modern tendency is to see female desire as insatiable, even monstrous. This desire usually manifests itself as illness caused by putrefied fluids that cannot escape the female-as-vessel and that burn or spoil within. The cause is not an inability to retain fluids.

Paster's even more recent argument in "The Unbearable Coldness of Female Being" concerns the hot/cold binarism attributed to male and female bodies according to the tenets of Galenic humoral medicine, wherein female bodies are structurally inferior because they lack the proper heat to "produce" external genitalia. However, Paster does not elucidate the contingent nature of the signifying relationship between coldness and the manifestation of disease: disease is necessarily the signifier of coldness; pathology is the manner in which physiological inferiority is made evident. This signifying relationship accounts for the resolute focus on female disease in these texts over any express mention of coldness or incontinence. In fact, it is not uncommon for medical tracts to proclaim-advertise, even-their discussions of "female disease" in larger type on their title pages, as does Culpeper's text.

Ideologically speaking, then, women's normal humoral physical makeup is often described as simply incompatible.
with the chemistry of desire. It is with a liberal hand that many textbooks ascribe illness to women and define women's illnesses by relating them to the stage of her sexual maturity. Culpeper's Directory for Midwives divides the manifestation of "impeded courses" between types of hysterical maladies, effectively separating the signs of the same illness for different classes of women based on their sexual activity. When it comes to discussions of female sexual desire, virgins and widows are designated the special but not exclusive sufferers of "womb frenzy," or furor uterinus, a designation representing a synthesis of Greek and Arabic theories of the causes and effects of repressed desire. Desire in female virgins is understood as a pathology, in pointed contrast to the construction of desire in men as relatively chivalric and heroic (amor hereos), as Mary Frances Wack has explained in Lovesickness in the Middle Ages. She cites Ferrand, for whom "erotomania," or eroticus affectus, is a widespread phenomenon: "Womens are farre more subject to this passion, and more cruelly tormented with it, then [sic] men are. For from hence proceeds the Green sickness" (otherwise known to Ferrand as "Amorous Fever") and again, "oppressions, suffocations, [and] Furor Uterinus" (11).

Neither Culpeper nor Riviére wants to limit "virgins' diseases" to virgins exclusively, because the emphasis properly here is on a lack of salutary sexual activity, not upon virgins per se. Hence, widows and married women "that have impotent husbands" and find their "Serninary Vessels [...] not sufficiently disburdened" (Riviére 418) are grouped with virgins, the most sex-deprived and pathological of all women because of the excessive production of seed and blood during youth. The habit of these medical texts of categorizing women's diseases by the sufferer's social-sexual status is also more generally "the positio [n] accorded to women in early modern society. They are specifically erotic positions, locating women, via an erotic sphere of activity and signification" (Traub 26). To expand Valerie Traub's point, women are commonly perceived as diseased as a result of their erotic activity, inactivity, or potential for (in)activity. Too much activity, or "immoderate use of Venus, often handling of the genitals" can result in "inflammations of the wombe," according to Sadler (86). The perils of inactivity can produce symptoms of chlorosis, furor uterinus, and the varieties of womb suffocation (or "the mother"): hystericus globus ("round body" or ball), strangulation, and apnea (laboured breathing). These texts make clear that potential for hysterical sickness is the normative stasis for the female body, imagined simultaneously as both already pathological in terms of inferior humoral composition and being consistently subject to uterine pathological indispositions.

Others go one step further and declare the inevitability of uterine dysfunction: there is no way around Culpeper's encompassing gesture, which subordinates descriptions of chlorosis, hysterical indispositions generally, melancholy, strangulation of the mother, and furor uterinus under the fourth book's heading entitled "Of all the Symptoms that befal all Virgins and Women in their Wombs, after they are ripe of Age." In Culpeper's formulation, widows and virgins—the usual sufferers of furor uterinus—are expected to suffer diseases linked to desire. Traub notes: "What is striking is the minimal room within which to maneuver; even a minimum of erotic 'warmth' is quickly transmogrified into intemperate heat" of hysterical illness (28).

Fontaine points us to the immediacy with which disruption in the female system becomes disastrous: "When [the menses] come from them, in a due and regular manner, their bodies are preserved from most terrible diseases; but otherwise, they are immediately subject to" hysterical ailments such as "the Mother" (4, emph. mine). At this point, the salutary space between immoderate sexual activity and poisoning inactivity begins to look like an entirely mythical space, circumscribed briefly in the period of young girls' lives before menarche, after which "women begin to be lecherous" (Culpeper 67). It is the production of blood and seed within the female body upon menarche that means woman's irretrievable fall into pathology.

The pathological figuring of the fluids resident in women's bodies works its way into the other literature of the period with equal consistency. It is a common feature of literary metaphor to utilize agricultural and horticultural images to refer to the female body and its processes. The ancient Greeks first defined reproduction as "tillage," with men "plowing" or "sowing" the fertile "fields" of the womb and its seed to produce "fruit." One might recall Apollo's defence of Orestes's matricide in Aeschylus's The Oresteia: "The woman you call the mother of the child / is not the parent, just a nurse to the seed, the new-sown seed that grows and swells inside her [...] keeps the shoot
alive unless god hurts the roots” (The Eumenides 666-71); or Agrippa’s description of Cleopatra and Caesar’s “fruitful” union in Shakespeare’s Antony and Cleopatra: “He plowed her, and she cropped” (2.2.238).

Another tradition, that of the hortus conclusus, has particular resonance for early modern England. The hortus conclusus metaphorizes enclosed gardens as the inviolable space of the Virgin Mary’s body and refers more broadly to inviolable virginal and chaste-within-marriage bodies. In the seventeenth century, Cristina Malcolmson writes, “The imagery of the enclosed garden of England and the enclosed garden of the chaste but generative wife blend in new ways” (252). The pathological female body of medicine encounters the purity of the hortus conclusus in Shakespeare’s Hamlet, accounting for the expression of Gertrude’s sexuality in terms of “rank” and “unweeded garden” imagery. Despite Hamlet’s belief that his uncle Claudius’s “reechy kisses” (3.4.191) reveal a man as lusty as Gertrude, from his perspective and from the play’s perspective generally, the weeds grow more quickly and more rankly in his mother’s “garden” than they can be removed by their tiller or plower.

Building on the suggestive alignment of the hortus conclusus and Edenic images in Hamlet, Janet Adelman explains insightfully in Suffocating Mothers that the “unweeded garden” operates as a metaphor for Hamlet’s “fall” into a post-Edenic, contaminating sexuality once he is forced to come to terms, after the death of Old Hamlet, with the fact that his mother possesses sexual desires. Hamlet’s first long soliloquy links the “unweeded garden” to the intolerable memory of Gertrude’s lust for Old Hamlet: “she would hang on him / As if increase of appetite had grown / By what it fed on” (1.2.143-45). Later, Gertrude’s lust for Claudius is imaged similarly: “And do not spread the compost on the weeds / To make them ranker” (3.4.158-59; emph. mine). Hamlet imagines Gertrude’s body as the container of corrosive poison: “rank corruption, mining all within, / Infects unseen” (155-56). In the two spousal relationships, Gertrude is revealed to be the real villain of the play, the corrupter of both men, the one who stimulates them to share her “appetite.” In multiple senses, Gertrude’s garden is a hortus conclusus gone terribly wrong. Ophelia’s characterization is also greatly advanced by Shakespeare’s associating her with a veritable garden of flowers. But Ophelia’s “flowers,” seemingly images of her “unblasted” virginal purity, are far from opposite in nature to Gertrude’s “rank garden” as one might first think. Shakespeare borrows the literary metaphors of medicine to illustrate how Ophelia’s “flowers” are symbolic of Ophelia’s “flowers,” the name given to the volatile fluid so often implicated in women’s uterine pathology by medical texts.

In the beginning of the play, we witness Laertes advising his sister to preserve her yet-uncompromised chastity and not follow the “primrose path of dalliance” (1.3.50) to destruction. That the flower imagery in the passage links the untouched and “unblasted” to images of death and decay makes a persuasive parallel to “flowers” of seed that potentially may, and eventually do, become the poisonous stew within Ophelia’s body. Laertes’s conversation with his sister marks a point prior to her madness, which looks most deliberately figured by Shakespeare to be caused by the same toxic soup that finds constant mention in the medical texts highlighted above. The metaphors of medicine that describe the female genitalia as “roses,” flora intacta for virgo intacta, repeat in Laertes’s speech:

Fear it, Ophelia, fear it, my dear sister,
And keep you in the rear of your affection
Out of the shot and danger of desire.
The chariest maid is prodigal enough
If she unmask her beauty to the moon.
Virtue itself scapes not calumnious strokes.
The canker galls the infants of the spring
Too oft before their buttons be disclos’d,
And in the morn and liquid dew of youth
Contagious blastments are most imminent. (1.3.33-42)

While Laertes’s explicit concern in this passage is to persuade Ophelia of the perils of giving up her virginity to Hamlet, there is another competing emphasis in the floral metaphors that Laertes chooses to describe the easy besmirching of reputation and "virtue": he suggests that her health is quite literally threatened by the very experience of desire, which Ferrand’s Erotomania elaborates on a far greater scale just a few years later. The
warning admonishes Ophelia to protect herself from "the shot and danger of desire"—hers as much as Hamlet’s—as yet not acted upon, which is why, presumably, it is possible for young female buds to be galled before “their buttons be disclos’d,” when hymenaeal virginity is lost. Desire, we must remember, is as destructive physically as the loss of physical virginity could be socially, and this is why, despite the relative difference in their social-sexual status, Laertes’s imagining Ophelia’s impending poisoning is the mirror of Hamlet’s imagining his mother’s poisonously desiring body.

In Ophelia’s garden as described by Laertes, there is only rapid change for the worse, for her “liquid dew of youth” threatens to become “contagious blastments […] most imminent [ly].” Fontaine echoes this belief when he claims that extreme lability defines the female humoral system; again, women are “immediately subject” to hysterical illness. In the Arden edition of the play, Harold Jenkins glosses “Contagious blastments” as “disease-bringing blights […] so the ‘morn’ of ‘youth’ is the time both of bright promise and of greatest susceptibility to corruption” (42 n. 1). "Contagious blastments" or "disease-bringing blights," however, signal hysterical pathology, the “blasts of foul air,” or vapours, that are produced by blood and seed stewing together in the uterus, finally causing madness. Laertes’s instructions about the dangers of erotic desire work on several levels. He links floral imagery to desire, decay, and then to illness in order to address Ophelia’s own natural but quite literally chemically volatile virginal desire. In this short passage, the forging of the link between “the liquid dew of youth” and “disease-bringing blight” encapsulates the larger thrust of the play’s flower imagery: the hortus conclusus of the uterine space and its intrinsic pathology create an image of female sexuality identified with overweening luxury. In this sense, Gertrude and Ophelia share the same representational fate, a gesture that critics recognize as only a purely symbolic action on Hamlet’s part to see all women in terms of corrupted sexuality. Shakespeare employs the imagery in Laertes’s caution to do two kinds of work: to emphasize Ophelia’s flowerlike purity as virgo intacta on the verge of pathology and thus to foreshadow the hysterical illness and madness that then arise as a result of the same frustrated desires Laertes warns her about.

Ophelia’s flower-distributing scene in act 4, scene 5 is the next time in the play we see her with flowers, this time literally. Numerous critics have pointed to the logic of Ophelia’s bawdy songs describing post-coital abandonment and deflowering, finding her own psychic frustration to be the explanation for her insanity: “The context of her disease, like that of hysteria later, is sexual frustration, social helplessness, and enforced control over women’s bodies” (Neely 325, emph. mine). But “hysterical” is really accurate now, considering the very literal role that frustrated desire plays in her madness. Riviere describes madness as “arising from a vehement and unbridled desire of Carnal Imbracement, which desire disethrones the Rational Faculty so far, that the Patient utters wanton and lascivious Speeches, in all places, and companies, and having cast off all Modesty, madly seeks after Carnal Copulation, and invites men to have to do with her in that way” (418).

Much ink has been spilled over the symbolic significance of the individual flowers Ophelia distributes, but their significance is also more broad: the flowers, real or products of her imagination, drive home the association among “flowers,” hysterical indisposition, stewing decay, and madness. A literal “document in madness” (4.5.182)-and here I echo Carol Thomas Neely-or living exposition of the symptoms of madness, Ophelia is also a textbook medical subject of hysterical illness. That is, she documents the commonest of illnesses that contemporary medicine presupposes. We also see how the rigidly circumscribed space of female desire in medical texts operates similarly in dramatic literature to drive home the sensibility that sexual desire equals hysterical pathology. While it is unclear whether Shakespeare intended Hamlet and Ophelia to consummate their relationship, the model for Ophelia’s illness looks like Culpeper’s or Riviere’s portrait of virginal “greensick” girls or sufferers of furor uterinus. Although I am finally not concerned with pursuing what is an ultimately unavailable medical diagnosis, Ophelia’s illness seems like the indisposition commonly attributed to virgins desiring but not experiencing sexual release.

Further, if flowers are identified with menstruum and “to penetrate the hymen is to deflower” (Carroll 290), then Ophelia’s being surrounded by flowers as she drowns in the brook suggests her literally drowning in “flowers” of blood and seed, not “deflowered” but pathologically “enflowered,” to coin a term. This gains reinforcement in
Gertrude’s account of her death by drowning, presented as a conspiracy by nature, by trees and the “weedy trophies” (4.7.175)-themselves a close parallel to the unweeded garden-to drown her in a brook. The brook itself is of course another body of fluid, appropriately bringing together as a metaphoric parallel all the liquids reported to have killed her, interior and exterior to the body cavity. Bathing in a river, in fact, is one of the most common treatments for furor uterinus suggested by Sadler and Ferrand. The treatment even has a place within storytelling tradition, retold in Ferrand’s Erotomania: “But for my part I conceive, that as there is Jesse danger in bathing ones selfe in cold water, so perhaps there might no Jesse benefit issue therefrom: considering that those wenches of Lions were heretofore cured of this disease, only by leaping into the river Sosne, as we have before related” (268).

Ophelia’s death has precedent in a developing folklore of hysterical illness, no less.

The unsavoury abundance that characterizes Shakespeare’s “rank” female gardens also dominates Millais’s Ophelia painting, as if the cankered rose has been literalized into Millais’s spectacularly green, murky, slime-coated surface. Here in the painting, the “flowers” both corrupting within Ophelia’s body and held by her as she drowns are figured as complementary visual objects: the flowers falling from her open hands, the algae, and other vegetation. As visual metaphors, the flowers again suggest the name for the menses and for the female genitalia, like smaller versions of Georgia O’Keefe’s flowers:

Floral symbolism was widespread in nineteenth-century art and literature and [the pre-Raphaelite] circle made much use of the particular meanings associated with specific flowers. […] I Flowers have often been used as a metaphor for women's sexuality, or rather their genitals. […] They function as a metaphor which simultaneously acknowledges and displaces those sexual connotations covering or masking the sexualized parts of the body which are traditionally erased.

(Pollock 135, emph. mine)

The flowers, while present in Millais’s painting simply because Ophelia is reported to have been gathering “crow flowers” and "nettles" before she drowns, serve as an effective if "displace [d]" emblem of the pathological indisposition within her body that "drowns" her in poison.

Because hysterical disease causes the madness that leads to her death, Ophelia’s flowers and other plant life are visual metaphors of the cause of her death: chemical repression of erotic impulse. Itself an invasive growth of plant life, the algae on the water’s surface mimics the shape of the drowning, moribund figure of Ophelia, a murky green double of a body already undergoing the processes of decay; the scummy quality of the algae and the stillness of the water make visual the early modern notion of a stew-like stagnation of liquids within a body. There is a vivid, almost violent green that dominates the painting, which makes it look deceptively as if it thematizes life or rebirth, yet the teeming algae paradoxically indicates stagnation and links the life-form to the dead material cluttering the landscape. The solitary "envious willow" tree that Gertrude identifies as Ophelia’s killer in her speech reporting the death as an accident has, in Millais’s painting, apparently fallen into the pond-like body of water where its decaying trunk lies as a double to the algae patch alongside Ophelia’s body. Brownish clumps of dead matter just visible under the water again point to a kind of corruption simmering below the surface.

While the mid-nineteenth century held that the repression of sexual desire caused psychic illnesses, namely "hysteria," I suggest that Millais’s tableau, with its flowers and scummy algae, illustrates metaphorically Shakespeare’s presentation of Ophelia as a hysterical subject. Shakespeare’s choice to have Gertrude represent the death of her mirror image as one surrounded by flowers serves as a neat metaphor for the very literal pathology of fluids that drown her. The painting, composed in 1852, represents a woman whose repressed sexual emotion leads to a psychic disturbance; thus, in this sense, Millais does not borrow the early modern language of fluid-based medical pathology when it is not in his cultural vocabulary to do so. Nevertheless, the tableau presentation of Ophelia is an effective mirror of the early modern literary context of hysterical pathology when Millais chooses to place his subject in an algaeclouded watery stew: the decaying body placed in a decaying landscape is a powerful metaphor for early modern uterine pathology.

The likelihood that Shakespeare imagined his lovesick character suffering from hysterical pathology is bolstered by the appearance of an Ophelia double in The Two Noble Kinsmen, written in 1613 with John Fletcher. In a recent
edition of the play, editor Lois Potter is careful to place the Daughter's symptomology within the tradition of lovesickness explained by Wack, but she does not identify the Daughter as hysterical. In this later play, Shakespeare builds on the depiction of Ophelia and resolutely retrain his focus to make furor uterinus the hysterical malady the expressed and defining trait of the Jailer's Daughter. The Daughter, like Ophelia, plunges herself into yet another river after flower gathering, presumably either to commit suicide (a common end, treatises tell us, to uncured hysterical disorder) or to cool her passion.

The Jailer's Daughter's characterization as a woman suffering from hysterical affliction documents a change in the presentation of the illness from Hamlet, where hysterical illness is invoked less explicitly, to The Two Noble Kinsmen, where hysterical disease is brought to the forefront. Her lovesickness is explained as a medical indisposition through the dramatic device of an on-stage "Doctor," whose sole character function is to diagnose her passion and suggest that it be "cured" through the classical prescription of sexual intercourse: the audience witnesses the Jailer’s Daughter being literally diagnosed and treated on-stage after being rescued from the "flood." The addition of the Doctor, who will treat the Daughter's lovesickness, is the most significant alteration to the Ophelia plot, for the inclusion of a doctor character to attend to the Daughter's malady thus makes the focus of this subplot the dramatization of hysterical illness: its manifestation, diagnosis, prognosis, and cure is the overall issue that the subplot contends with. The Doctor's diagnosis of the Daughter's mental illness begins with predictable recourse to gynaecological-menstrual paradigms to explain her disorder: "Her distraction is more at some time of the moon than at other some, is it not?" (4.3.1-2). She assists the diagnostic quest by telling him that the origin of her distress is erotic: "We maids that have our livers perished, cracked to pieces with love, we shall come there, and do nothing all day long but pick flowers with Proserpine" (22-25), for the liver was believed to be the site of heated amorousness, "stronger in women lines the liver and the womb have great affinity" (Crooke 273).

In terms of the early modern medical logic and terminology set out in this scene, the Daughter's hysterical illness is furor uterinus, whose disordered ravings are attributed to poisonous vapours from melancholy adusted (burned) or seed ascending to the brain from the uterus (see Dixon; Burton). Thus, it also fits the prevailing medical tradition that the Doctor next tells the Daughter's Wooer that sexual activity will cure her, following the Hippocratic canon's prescription from Diseases of Young Girls (see King): "If you perceive / Her mood inclining that way that I spoke of, / Videlicet, the `way of flesh'-you have me? / [...] Please her appetite / And do it home: it cures her ipso facto / The melancholy humor that infects her" (5.2.33-35; 36-38). The Daughter plot, written as if Shakespeare and Fletcher decided to engage in an imaginative game of "what would have happened" to Ophelia, emphasizes the degree to which hysterical illness is gaining precedence as a representational form for female desire in the popular theatre of the early seventeenth century.

Ophelia is not the sole fascination of nineteenth-century poets and painters, however. Mariana, a relatively minor character from Shakespeare's Measure for Measure, also has a compelling representational history. Mariana makes her first major appearance in the play in the context of a discussion between Duke Vincentio and Isabella, where the Duke suggests the device of the bed-trick, in which Mariana will take the unwilling Isabella's place as Angelo's partner:

This forenamed maid hath yet in her the continuance of her first affection; his unjust unkindness, that in all reason should have quenched her love, hath, like an impediment in the current, made it more violent and unruly. we shall advise this wronged maid to stead up your appointment, go in your place. (3.1.241-45; 251-53)

Mariana's "unruly" sexual desire is figured as both contrary to what would be natural in the Duke's estimation and as being exaggerated or made violent by an impediment in the natural flow of a "current." Instead of Mariana's desire being "quenched," she overflows with the fluids of necessarily frustrated, impeded desire. The Duke's metaphors are engineered to provoke an association of Mariana with a hysterical disorder, raging "violent [ly]"; since she is a "maid," furor uterinus is the likely culprit once more. In fact, a specifically hysterical woman is a necessity of the plot, for the Duke's stratagem to rescue Isabella from compromising her virginity requires another woman's being willing to compromise hers in order to satisfy her desire; she has only the hope that the
dishonourable Angelo will marry her upon discovery of the bed-trick. As the Duke has already provided us with the opinion that Mariana's desire is unnatural because it is unruly and contrary to the orderly flow of fluids, a pathological female sexuality is exactly what fits the bill that he draws up to solve the problem that Isabella encounters in the form of Angelo's desire. Though he is dressed as a clergyman, the Duke's ministering to Mariana's needs has a decidedly physician-like aspect. Similar to the Doctor in The Two Noble Kinsmen's cure for frustrated virgins, the Duke "prescribes" the bed-trick as a convenient cure. Moreover, the bedtrick device repeatedly requires the employment of a hysterical woman in Jacobean drama, namely in plays such as (but not limited to) Much Ado about Nothing, All's Well That Ends Well, and Thomas Middleton and William Rowley's The Changeling.

Even the location where Mariana is reported to be living, "there, at the moated grange, resides this dejected Mariana" (3.1.267-68), is selected to combine the imagery of the circumscribed, deep, fecund and fetid waters of a moat with the fertile ground of a farm, whose air the Duke indicates is unhealthful: "make haste; / The vaporous night approaches" (4.1.57-58). These competing images of decay imply that something is truly festering beneath the surface at the moated grange. The association of women's genital and reproductive structures with water and immured structures is far from unusual, as William C. Carroll indicates: "Usually, the name given to the female sex organs in Shakespeare's plays is a variant of the patriarchal metaphors of absence or containment: the 0, the pit, [...] casket, [...] the lake, pond, swallowing tomb" (287).

To this list, however, we can add another variant metaphor, that of pathologies of disease from which even virginal bodies, as we have seen, in their "pure," intact state cannot escape because it is female desire undifferentiated within bodies that predisposes women to and even constitutes disease. The virginal body is where, I think, we least likely expect to find a body subject to pathology. This virginal body that I highlight is, then, somewhat at odds with the Bakhtinian concept of the "classical" and closed body normally invoked in critical discussions of virginity and more in line with grotesque bodies. The virginal body with its "key orifice closed" (Carroll 287) necessarily finds its classicism compromised when it is perceived as rampantly and grotesquely diseased, festering within its neat borders, as pathological.

Taking up Shakespeare's female subject, Tennyson's poem "Mariana" (written in 1830) is notable for the way it inscribes the "rank" garden of Mariana's ungratified sexual desires into its imagery. Building upon the idea of fecund but fetid waters in the walled-up moat that Shakespeare mentions only briefly, Tennyson makes the decayed garden and hostile nature his poem's prevalent theme. The opening stanza evokes not simply sterility, as might be immediately apparent:

With blackest moss the flower-plots
Were thickly crusted, one and all;
The rusted nails fell from the knots
That held the pear to the gable wall.
The broken sheds looked sad and strange:
Unlifted was the clinking latch;
Weeded and worn the ancient thatch
Upon the lonely moated grange.
She only said, "My life is dreary,
He cometh not," she said;
She said, "I am aweary, aweary,
I would that I were dead!" (1-12)

Despite the moss that pervades the flower beds with thick, black crust and the rustiness of the nails, moss and rust are still a form of biological or chemical life. Combined with the weedy thatch, images of rank fertility-of the decay-in-process of rust and moss-return us once more to the "unweeded garden" of Hamlet, a metaphor from nature significant for its representing the grossness of essentially natural feminine sexuality, "natural" but always already awry and unnaturally insatiable in its appetite.
Tennyson's description of the murky waters of the moat metaphorizes the spoiled reproductive fluids believed to exist in the Shakespearean female body:

About a stone's cast from the wall
A sluice with blackened waters slept,
And o'er it many, round and small,
The clustered marish-mosses crept.
Hard by a poplar shook alway,
All over-green with gnarled bark:
For leagues no other trees did mark
The level waste, the roundig gray. (37-44)

The sluice's "blackened waters" are reminiscent of corrupted, blackened blood and seed, "filthy and dreggish" (Fontaine qtd. in Aughterson 63). The solitary poplar invokes the barrenness of the landscape, associating the corruption of the sluice waters with the "wasting" of fertile land. Fertility in Mariana's landscape is relegated to the unsavoury marsh moss and to rather hostile-seeming animals, the mouse that "shrieks" and invades the house to live "behind the moldering wainscot." Neatly, the mouse's habitat is also mouldering, the wood creeping over with an equally invasive and destructive moisture that spawns mould, mildew: again, we revisit Hamlet, this time the "mildew'd ear" (3.4.65) that represents fratricide but more importantly a mother's corrupt desire.

These images convey simultaneously natural fertility gone awry and in decay, as if decay were an inevitable result of wayward fertility, the product of an overabundance of the wrong kind of biological/chemical life, like Millais's murky green algae. Tennyson's poem reinscribes Mariana's excessive desire as diseased and decaying, imagining the lovesick woman's erotic frustration as the hostile landscape of the grange; of course, in early modern terms, Mariana's pathology—while given the poetic descriptions of an "unruly current"—is meant differently, literally. Thus, in this sense, while Tennyson echoes the latent context of hysterical illness that Shakespeare bestows upon Mariana, I do not mean to suggest that the poem takes up Renaissance-specific medical notions of hysterical illness as its ostensible subject. Rather, Tennyson describes Mariana's erotic-psychic frustration as poetic figures that are complementary to the literal-minded physiological model of erotic frustration in the early modern period.

Tennyson's "Mariana" anticipates Millais's painting Mariana in the Moated Grange, dated 1851, which is roughly contemporaneous with his Ophelia, dated 1852. Millais takes his inspiration from both Shakespeare's play and Tennyson's poem, which is subtitled by the paraphrase of sorts from Measure for Measure that is next reproduced in Millais's title. The tableau places Mariana centrally, in front of a table on which an unfinished tapestry and cloth lie, its surface and the floor scattered with decaying leaves. The activity interrupted is likely sewing, as Mariana stands just in front of a red velvet ottoman where she has apparently been seated and a needle and thread stick up from the tapestry. Immediately beyond the window, the outline of a stone moat is visible.

Arguably, the striking feature of the painting is Mariana's posture: her head angled back and to the left, she stretches backward, shoulders and arms thrust behind her, thumbs on waist and fingers on her lower back, hips forward. I suggest that Mariana's contorted posture—the convulsions of "the mother" in the Renaissance context—mimics the "arc-encercle stage of 'grand' hysteria" (Charcot qtd. in Gilman 345), uncannily mirroring the hysterical Mariana whom Shakespeare encodes in his text according to a different medical-representational logic. Her posture immediately recalls the hysterical contortion depicted in Andre Brouillet's famous painting of Charcot's demonstration of hysteria in his famous patient, Blanche, who stretches backward into an awkward arch, the "hysterical circle." Mariana's "arc-en-cercle" signals how some aspects of hysterical performance remain relatively constant over centuries of medical theory, manifested largely as "fits"—syncope, catatonia, involuntary muscular twitches, tremors, tics, and convulsions—despite the distinct difference in the nosological apparatus called upon to explain the presentation of symptoms. One Renaissance-era description of "the mother" is written by Fontaine:

If the seed be kept too long, it disturbeth the function of the spiritual parts and the midriff, it oppresseth the heart, causeth fainting and sounding fits […] and seems in such a manner to stop the breath that the sick woman is in danger to be strangled. Her pulse is sometimes weak, various and obscure. She hath inward discontents and
Charcot's comments in an 1877 lecture to the Salpetrinre clinic, notorious for its investigation of female hysterics, reveal a similar enactment of symptoms:

The patient suddenly falls to the ground, with a shrill cry; loss of consciousness is complete. The tetanic rigidity of all her members, which generally inaugurates the scene, is carried to a high degree; the body is forcibly bent backwards, the abdomen is prominent, greatly distended and very resisting. (Charcot qtd. in Gilman 345)

From these descriptions, it is evident that the performance of familiar bodily postures is extremely relevant to the ability to discern hysterical symptoms, whatever the period being discussed. Given that Millais's painting of Mariana is dated some twenty-five years before Charcot's female patients perform their symptoms for an audience, my concern here is not to point out the system of artistic inheritance from Brouillet or even whether Millais intended to represent Renaissance-era constructs of hysteria. The issue at hand is this particular historically constant tradition of the performance of symptoms that means hysteria in one era and hysterike pnix in another. However, both depend upon an evaluation of the spectacular externalization of symptoms. The Millais painting is of particular interest because its postural vocabulary is so recognizable, whether Millais intends it to be so or not.

When Millais and Tennyson conceive of Shakespearean women in their works, it is perhaps they who capture the spirit of the original representation when the early modern portrait of hysterical women is all but invisible to us now. Mariana in the Moated Grange and Ophelia are close cousins, not only for having been painted perhaps successively but also because they are two halves of a construable whole that represents the two women with hysterical indispositions in common. Taken together, Millais’s paintings and Tennyson’s poem can be understood to communicate visually—but metaphorically—that hysterical pathology is an underlying theme in the representation of early modern women. Sometimes a picture conveys the words of a thousand medical treatises, instantly.*

Footnote

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References

WORKS CITED


Barrough, Philip. The Method of Physicke... London, 1590.


Fontaine, Nicholas. The Womans Doctour, or, An exact and distinct Explanation of all such Diseases as are peculiar to that Sex. . . London, 1652.


Ferrand, James [Jacques]. Erotomania or a treatise Discoursing of the Essence, Causes, Symptomes, Prognosticks, and Cure of love, or erotique melancholy... 1615. Reprint. Oxford, 1640.


Millaiss, Sir John Everett. Mariana in the Moated Grange. The Bridgeman Art Library International Ltd.

Ophelia. The Tate Gallery, London.


References


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