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In this original, lucid, and compelling examination of the category of “hysteria,” Sabine Arnaud notes a key moment that occurred in 1790s France, in the aftermath of the French Revolution. Some aristocrats, fleeing “the Terror” and the prospect of the guillotine, wrote pleading letters to their doctors asking for written confirmation of a diagnosis of vaporous and nervous illness. This was one of the many “disease” types that would eventually be subsumed into the single category of hysteria. The reason for the pleas was that such a diagnosis would give them access to a place in a nursing home, and assure their survival, where the director, if asked, would have the authority to resist handing them over to the revolutionaries. For Arnaud, this phenomenon was an important and emblematic reversal. The letters illustrate a moment when a stigmatizing illness transmuted into a vehicle for salvation, and “doctors who previously paid court to aristocrats could suddenly lay claim to a new power” (pp. 226-227). The medical man, Arnaud suggests, found himself “credited with a new authority, bestowed by knowledge, which gives his word the value of competence and neutrality” (p. 227).

It is the convoluted, culturally dense journey toward this new medicalized authority, and to the construction of the single and singular category of “hysteria” from a spectrum of rhetorical formulations, that provides the central theme of this book. Arnaud is careful to point out, however, that her work is not a “historical progression” account, and that these rhetorical constructs were by no means confined to the medical genre. Her interest is in how the diverse medical and nonmedical rhetorical enunciations throughout the eighteenth century were assimilated into a single, medicalized term by 1818. In that year, the category of hysteria (with twelve synonyms, including “hysteric vapors” and “uterine neuroses”) was included for the first time, and given fifty pages, in the Dictionnaire des sciences médicales. And while she acknowledges Michel Foucault’s work on the role of language in medical knowledge, this is no straightforward Foucauldian account of the construction of a medical gaze. Arnaud does not see hysteria in terms of the binary “chiasmus of seeing and saying at the core of medical thought” that Foucault described in Naissance de la Clinique (Birth of the Clinic) (1963): the clinician defining what he gazes at and gazing at what he defines (p. 6). She focuses instead on the multiple mutations in language and forms of enunciation, across political, religious, and moral thought, as well as medical thought, that were eventually subsumed into one, apparently coherent, pathology.
Arnaud makes a number of important claims. The first is that the rootedness of her book in the eighteenth century allows her to explore the origins of the category in a context where medical texts have been dismissed by many as “pre-scientific.” This gives her work, she argues, a different perspective to the strain of medical history rooted in the nineteenth-century “quest for objectivity” (p. 2). Her focus is a reading of eighteenth-century medical texts, anchored not in nosology and symptomology but within the wider cultural context of literature, metaphors, letter writing, and other discursive modes. These include, but by no means exclusively comprise, the metaphors and narratives produced by doctors and patients independently of case notes. She also argues that, in its various discursive formulations over time, hysteria has not always been a medical discourse on women, inscribing hysteria as a women’s illness, as it was to become in the nineteenth-century medical account. Class was a far more important factor in the eighteenth century. Fits and vapors were almost always closely identified with the fragile, because of highly evolved sensibilities of the high-born, of whatever sex. She notes that the strikingly varied series of understandings of hysteria between 1561 and 1818, including radically different interpretations at various times in the eighteenth century, do not represent a linear progression toward medical knowledge. Her objective is to unearth the density of surrounding cultural contexts, at a time when “the body’s disorders were within the scope of daily life... a topic to write about beyond therapeutic conditions.” Her question is not how the term transformed but “what was at stake in the making of the diagnosis” (p. 8).

On Hysteria has sections on the changing appellations, interpretations, and diagnostic usages of the term; the use of metaphors; literary genres; letter writing; and the inscription of a physiological disorder through literary and individual narratives. In the opening section, she shows how class-based, medical, and religious explanations evolved as forms of knowledge, interacting with each other, but each evolving at its own pace, and never offering a continuous, coherent narrative. In France, Jansenist “convulsionaries” of the 1720s and 1730s, men and women of all social classes who experienced fits, paralysis, and miracle cures in the vicinity of the tomb of a Jansenist deacon, were seen by the authorities as a dangerous threat to social order. Some doctors professed a divine intervention hypothesis, others a more secular diagnosis of vapors or hysterical affection. If arrested convulsionary women would self-diagnose and admit to having the vapors, they would be released. However, if they persisted in claiming miraculous origins for their disorder, they would be confined to the Salpêtrière asylum. To confess to a recognized mental disorder spared them from admission to a mental institution; such was the complexity, and the political complexion, of the phenomenon.

Metaphors, in Arnaud’s second section, are shown to have shaped concepts of hysteria as a disease of resemblance. It had no easily describable character of its own but was seen as being “like” many other things. The choices of metaphor reflected the slipperiness of the concept. Proteus, the sea-god with the capacity to assume any form, became a synonym in eighteenth-century medical texts, along with the ever-changing and adaptable chameleon and the (many-headed) hydra. The “disease” could be whatever it chose to be, or whatever people decided it was. In a brilliant third section, Arnaud reads the letters, autobiographical accounts, and anecdotes of doctors as literary texts, masterpieces of self-presentation, self-promotion, flattery of wealthy patients, and disease presentation. Dialogue with patients encouraged them to recognize themselves in the doctor’s account, reassured that their fits and vapors were neither simulation nor indulgence but markers of a fine disposition and sensibility. Patients were happy to claim such diagnoses as their own.

Two further sections explore, firstly, the role and function of hysteria in the “Republic of Letters,” the non-medical texts of male and female intellectuals, and, secondly, the uses and meanings ascribed to it in the new eighteenth-century literary form of the novel. For men and women of letters, “vapors and hysterical affection were called on to name inner turmoil, distress, embarrassment and physiological disorders” (p. 136). They were not viewed necessarily as something to be cured and were certainly not seen as the exclusive preserve of the physician. Hysteria could be both mocked and admired as a form of performance. A common sense understanding of what the vapors and hysterical affection meant was assumed but rarely defined. Tracing the framing of hysteria in the novel, Arnaud dissects Charlotte Lennox’s The Female Quixote (1752), William Godwin’s Things as They Are; or the Adventures of Caleb Williams (1794), and Denis Diderot’s La Religieuse (The Nun) (1796). She identifies diverse discursive trends: the vapors as a language through which all emotions must be described, as a signifier or manifestation of an internal conflict, and, in Diderot, as a crystallization of power relationships. In a bravura display of intertextuality, she then analyzes medical narratives in the same way.
In her conclusion, Arnaud draws attention to the importance of political events, most significantly the French Revolution, in newly medicalized framings of hysteria. The 1790s saw the beginning of “a programmatic discourse in which doctors presented their role as a comprehensive and crucial one: the full understanding of human nature” (pp. 231-232). A new technical and scientific authority, and explanatory role, had been invested in the medical profession by the new revolutionary codes. Hysteria had been captured by the “Science of Man,” and medical men now claimed it as their own, describing, defining, explaining, owning, and treating it. These processes now largely excluded from participation all those outside the closed medical circle, and hysteria’s shift to a newly gendered framing was driven by the medical profession.

This is an elegant, convincing, and beautifully constructed book, an important and fresh contribution to the history of medicine. We are left, as will be the case with any book as original and intriguing as this one, wanting to know more. How was hysteria understood at a nonelite level? Was it recognized at all, and if so as what? Did the poor think that they too could be prone to vaporous illness, or did they agree that it was only something for the rich, with their effete sensibilities? Could the category be found in jokes, slang, chapbook literature, collective folk memory, courtroom dispositions, and other arenas where the voices of the middling and lower classes can sometimes be captured? Was hysteria used as a factor in marriage annulment cases? If so, there would surely be some revealing civil courtroom discourse for the historian to examine. All this, though, is perhaps a subject of study for future research, either by Arnaud or others. For now, she has given us a rich, multilayered understanding of how a category becomes a category. She shows how medicine can suck in the forms of knowledge, modes of thought, and commonplace morality of the people who form a society, and represent it all, magically metamorphosed into knowledge that belongs exclusively to the medical profession. When we write medical history, we know that deep cultural layers underpin the words, and gazes, of medical people—Arnaud’s On Hysteria is an exquisite archaeology, working with verve and insight in the subterranean deep.

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