

## THOMAS BEDDOES AND THE GERMAN PSYCHOLOGICAL TRADITION

by

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This paper considers Thomas Beddoes's role in disseminating German psychological ideas in Britain. It describes the German tradition as inaugurated by Karl Philipp Moritz (1756–93) and considers the chief differences between this tradition and the English one stemming from David Hartley. It is suggested that Beddoes found strong support for his convictions about human interiority in writings by Moritz and his followers. In particular, these enabled him to think about sanity and madness as being continuous with one another (rather than as one another's negation); they helped him locate the signs of madness in ordinary childhood behaviours; they reinforced his suspicions that many so-called nervous disorders were psychically caused; and they supplied him with a conception of unconscious passion. The paper concludes by considering Beddoes's appeal to Shakespeare's plays as a source of clinical knowledge about the nature of insanity, and argues that Beddoes has been overlooked as a crucial source for nineteenth-century psychiatrist-bardologists such as J. Conolly, J. C. Bucknill and H. Maudsley.

**Keywords:** Thomas Beddoes, Karl Philipp Moritz; eighteenth-century psychology; William Shakespeare; Samuel Taylor Coleridge; passions

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One of the most attractive as well as one of the most striking features of the career of Thomas Beddoes (1760–1808) was that he found himself at the cutting edge of a great many disciplines. He championed the Huttonian theory of the Earth, pneumatic medicine, the chemistry of the elements, the voltaic pile, the use of population-based statistics in medicine, Kant's critical philosophy (somewhat ambivalently), Schiller's aesthetics, Horne Tooke's linguistic theory, Pinel's theory of mental alienation, and doubtless other causes. My purpose in this brief paper is to describe Beddoes's role in disseminating eighteenth-century German psychological theory in England. This is an aspect of Beddoes's intellectual legacy that has passed largely unnoticed for reasons I shall explore below. It is a strange omission, given that Beddoes has long been recognized as one of the knowledgeable Germanists of the Romantic era. However, it is perhaps the result of the impoverished state of pre-eighteenth-century historiography of psychology.

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As Robert Brown and G. S. Rousseau have observed, although the term ‘psychology’ was in use in England in the late eighteenth century, it did not refer to a clearly demarcated academic discipline.<sup>1</sup> Beddoes was an eager student of what Brown has retrospectively constructed as an English psychological tradition beginning with David Hartley’s *Observations on Man* (1749).<sup>2</sup> He believed that sensory experiences were the basic building blocks of all our ideas and that the manner in which they are combined depends on their similarity to one another and/or their repeated juxtaposition in space and time. He was particularly interested in the way in which apparently unconnected ideas could be linked by a shared feeling-state underlying them all. This version of the doctrine of the association of ideas informed his thinking about the mind in general and can never be set aside when considering his relation to other psychological doctrines. Where he perhaps differed from many other neo-Hartleyans was his belief that private psychological experience was much more detached from reality than was generally allowed and was the source of a great deal of pathology, both physical and mental. Robert Brown has written:

the powerful sense of the importance of the non-rationality of the depths and privacy of the human self, a sense that was so distinctive a contribution of the Romantic period, was neither successfully examined nor plausibly explained by the mind-doctors. It was left to writers of fiction and poetry in the period to describe and explain these aspects, and to much later psychiatrists and psychologists to try and give plausible explanations.<sup>3</sup>

In what follows I shall argue that Beddoes should be considered an exception to this rule (which by and large does hold true for the period). This was in some measure due to his awareness of German psychology.

Matthew Bell suggests that German psychology properly began with Christian Wolff’s *Psychologia Rationalis* (1734).<sup>4</sup> Wolff used the term to mean the study of mental experience, but his interest in it was philosophic: he wanted to know what the soul or mind was capable of experiencing. Wolff’s importance in the tale I have to tell turns on the fact that he did more than any other thinker to put the word ‘psychology’ into common usage in German-speaking countries. By the close of the eighteenth century, the ‘depths and privacy of the human self’ had become the lifeblood of psychology in those lands. The key figure who brought about this transformation was Karl Philipp Moritz (1756–93), who in 1782 published *Vorschlag zu einem Magazin einer Erfahrungsseelenkunde* [Proposal for a Magazine for the Study of Psychic Experience], in which he called for the establishment of a new field of enquiry, *Erfahrungsseelenkunde* [the study of psychic experience], to be established by ‘moral doctors’ who would apply the techniques of medical diagnosis to the study of mental phenomena.<sup>5</sup> Moral doctors did not need a medical qualification. They were required only to be ‘observers of the human heart’.

In 1783, with the help of Moses Mendelssohn and a number of other German *Aufklärer*, Moritz’s vision was realized. A periodical called *Gnothi Seauton; oder Magazin zur Erfahrungsseelenkunde* appeared thrice yearly and ran intermittently for a further 10 years. This periodical, undertaken, as an early English commentator complained, ‘without a view to any system whatsoever’, was composed almost entirely of detailed first-hand accounts of its readership’s inner lives.<sup>6</sup> By this means, the *Magazin* also made available a unique and unprecedented volume of case material relating to mental disturbances. In the 10 years of its existence, more than 100 case histories were recorded. Note, moreover, that Moritz and like-minded writers did not see themselves as divorcing psychology from medicine; rather, they were enlarging the medical field by collecting and

analysing a new kind of data. And they adopted a medical rubric for the case histories they presented: those that were supposed to illustrate some aspect of the nature of the healthy human mind were classified under *Seelennaturkunde*, those of the unhealthy mind *Seelenkrankheitskunde*, and those with a bearing on the formation of the mind *Seelenediatetik*.

One of Moritz's biographers has argued that the *Magazin* represented the first serious attempt 'to throw light into some of the murkiest recesses of eighteenth-century life, especially the area of personality disorder and the psychoses, where previously nothing but superstition and violence had held sway'.<sup>7</sup> Richard Hunter and Ida Macalpine, in their classic sourcebook of the prehistory of psychiatric thought from 1535 to 1860, called Moritz's *Magazin* 'the first psychiatric journal'.<sup>8</sup>

A specimen of the type of case history that Moritz and his colleagues tended to print may be useful. In their eighth volume, the editors of the *Magazin* invited readers to write in with their experiences of hypochondria. Among the descriptions they received was the following:

On the 14th of November, the idea that someone wanted to kill me sprang up suddenly and involuntarily in my mind, and yet I must confess there was no reason I should have harboured this thought, for I am convinced no one ever formed such a cruel design against me. People who had a stick in their hands I looked on as murderers. As I walked out of the town, a countryman happened to follow me, and I was instantly filled with the greatest apprehension, and stood still to let him pass. I asked the fellow in a threatening voice, and with a view of intimidating him from his purpose, what was the name of the town that lay before us. The man answered my question, and walked on, and I found great relief because he was no longer behind me.

In the evening I found water remaining in the glass out of which I commonly drink, and I instantly believed it was poisoned. I therefore washed it carefully out, and yet I knew at the same time that I myself had left the water in it.

18th Nov. The effects of the nuptial embrace on my mind, gradually grow more singular, insupportable, and dangerous. It is not that I find myself weakened by it, on the contrary I always find myself at first lighter, more cheerful, and better disposed for scientific inquiry. I also observe that I have much happier and wittier thoughts than any other; but alas! This state of mind and body does not last for long. For such moments of connubial tenderness I afterwards pay dearly by long lived days of mental inquietude.

Anxiety, dreadful anxiety, seizes me if a person overlooks my hand at cards or if a person sits down beside me if I am playing the harpsichord &c.<sup>9</sup>

Dr Alexander Crichton (1763–1856), who in the course of a distinguished and varied career would be made court physician to the Czar of Russia and to Queen Caroline, the wife of George IV of England, published this translation from the *Magazin* in 1798, and interpreted this case history in the light of the editors' original request. They had asked for case histories of hypochondriasis, and that supplied the framework for his interpretation of this case:

The circumstance which appears the most unaccountable to people who have not thought deeply in the subject, is the fact, that the source of the illusion generally lies in the abdomen. Some light may be thrown on this at present, but it is probable that it can only be rendered perfectly clear by an attentive perusal of the succeeding parts of the work, in which many analogous facts are explained.<sup>10</sup>

Crichton, then, takes seriously the idea that this is a case of hypochondria in which painful stomach symptoms interfere with perceptions of reality. Akihito Suzuki, one of the foremost students of the theory behind mad-doctoring in Britain in the eighteenth century, has observed that there was ‘no distinct concept of the diseased mind’ in that period.<sup>11</sup> In its place was the concept of the diseased body that contaminated the brain along with whatever other organs were said to be involved in mental activity. The task of the mad-doctor was to help the patient’s body to recover and by that means to restore his mind.

Beddoes used German psychological case histories to support the idea that the inner lives of most sane people were always somewhat detached from reality. In Essay X of *Hygëia*, ‘Observations on Insanity’, he quotes from a case history found in one of the entertaining articles of the *Zoönomia* in which

a most elegant lady is said suddenly to have become melancholy, and yet not to so great a degree that she could command herself to do the honours of her table with grace and apparent ease. After many days’ entreaty she at length told the author that she thought her marrying her husband had made him unhappy (though it was a love-match on both sides) and that this idea she could not efface from mind day or night.<sup>12</sup>

In Erasmus Darwin’s original account, this idea is described as an example of an ‘insane hallucination’, which he proposed to cure by getting the patient to go on a long sea-voyage ‘with the expectation that the sickness, along with the change of objects, might remove [it]’.<sup>13</sup> But Beddoes adduced this case as evidence of our common human capacity to lay ourselves in thrall to a single interesting fact. ‘From a small germ of fact, there shoots out in a moment an extensive ramification and luxurious foliage of imaginations, all equally distinct to the mind with the first perception’. All sorts of people who appear to be sane—‘she could command herself to do the honours of her table with grace and apparent ease’—are in fact the slaves to such notions. Secret passions, vague and dreamy states, also served to detach people from the world about them.

The first and most important use to which Beddoes put the German psychological tradition was as a source of information about private experience. In Essay X of *Hygëia* he says that ‘The best account of delirium, with which I am acquainted, is one given by a physician in his own case (Moritz *Erfahrungs-seelen-kunde*, I, 3. 44). No medical attendant or philosophical spectator could so completely have delineated the various busy scenes represented before the mind’.<sup>14</sup> However, of course, as an indefatigable speculator what interested him most were the mechanisms by which these mental states gave place to more congenial dispositions. The delirious physician who wrote up his case for Moritz’s *Magazin*

had removed, while ill of a low fever, into an apartment different from that in which he usually slept. The phantasy that persecuted him most was his inability to persuade himself that he was in his own house at all. The pain of this persuasion excited continual efforts and trains of thought. He seemed transported from street to street; and his imagination was active enough, every moment, to exhibit to him some different public place, in which his guards detained him on his bed . . . all the time his fancy created places, not the most agreeable, for his residence. Sometimes it pitched him between two walls, so close that he could not heave an arm; sometimes on a burial-ground; sometimes on a court before the hospital he attended . . . a postilion’s horse, or even the watchman, would transport him to a public place, filled with music and dancing—the neighing of a horse in the street, to a stable—the bad smell of his perspiration, or the blood coagulated in

his nostrils, to a burying ground.—When the physician in attendance consented to his removal into the wished-for apartment, on the score of there being nothing to lose, his whole internal feelings underwent an instantaneous revolution. Though he had lain for days and nights without sleep, raving, supplicating and complaining, a placid sleep, the forerunner of a rapid recovery, overtook him in ten minutes!<sup>15</sup>

Here again, the power of a single idea is what is most in point. Once the patient was allowed to sleep in his usual apartment, he was released from his delirious dreams.

There were at least four other areas where Beddoes drew inspiration from the German psychological tradition. First, it gave him licence to relate the signs of madness to childhood experience. Second, it enabled him to think about passion as something that could operate outside our awareness. Third, it made him more committed than any other eminent British physician to the idea that a great deal of nervous and insane pathology was psychically caused. Last, it supplied him with fresh terms in which to reformulate the classical conception of health as consisting in a balance of the inner and the outer world. Because these interests were overlapping, the examples I shall offer may exhibit more than one of these characteristics. The reader is asked to bear them in mind, however, as a totality.

It was not unusual for Moritz's correspondents' case histories to shade off into autobiography.<sup>16</sup> And almost inevitably they would often trace the root cause of this or that symptom or disposition to events in childhood.<sup>17</sup> Now it might be objected very properly at this point that the educated classes of Enlightenment Europe gave unprecedented attention to childhood and that German 'psychological' writers had no monopoly over that preoccupation. The childhood roots of adult sorrow were commented on at length by Rousseau in his *Confessions* and by many other writers. And European society as a whole recognized well what we would call childhood trauma. But Beddoes was minded to find the seeds of madness in much more ordinary and apparently harmless childhood experiences and made generalizations about adult insanity on the basis of these. Here he is in Essay X of *Hygëia* explaining the relationship between mania and melancholy, the two great nosological categories of the eighteenth-century mad-doctors:

There are certain children, in whom correction or reproof is almost sure to bring on a fit of sullenness; and who, after receiving the one or the other, will stand for a considerable time as fixed as if there were only images of animated creatures. But a very trifling occasion will provoke an ebullition of the passion that is raging within. If a smaller boy happen to pass within arm's length, though without giving more offence than the wolf in the fable received from the lamb's drinking lower down the stream, the young melancholic will immediately invent some cause for quarrelling, and play off a maniacal paroxysm in miniature at the expence of his over-matched play-fellow. Thus it is, I think, that melancholic absorptions generate maniacal extravagancies. The storm goes on to drive for a while, and that sometimes not a short while. But in innumerable cases, the apparently dead calm, though in reality it be a season of deep retired, despondent and sometimes pleasurable feeling returns, to be, in like manner, succeeded by the hurricane in its season.<sup>18</sup>

It is not clear when Beddoes first became aware of Moritz and like-minded thinkers. To judge from the detailed accounts he gives of it in *Hygëia*, it is likely that he owned at least some numbers of the *Magazin*. It is possible that Moritz's case histories lay behind his splendid *Observations on the Character and Writings of John Brown* with which he

began his edition of Brown's *Elements* in 1795.<sup>19</sup> In that work, Beddoes states that he had originally intended to supply a biographical notice of Brown but, having insufficient verifiable information at his disposal, found he could offer only 'a moral portrait'. Most of the case histories that appeared in Moritz's *Magazin* were moral portraits. They set themselves two tasks. They described in great detail the behavioural oddities and idiosyncrasies that characterized a specific individual; and they tried to make sense of these by tracing them back through time to the moment of their formation.

In a passage dealing with Brown's rupture during childhood with the Scottish Seceder sect in which he had hitherto grown up, Beddoes says this:

While he [Brown] was thriving in godliness and knowledge, but at what precise period I am not informed, there occurred an incident which finally diverted him from the path he had hitherto with so much alacrity pursued. At a provincial synod of the Merse and Teviotdale, a party of his schoolfellows urged him to accompany them to the parish church at Dunse. He manifested reluctance, but yielded to their importunity, and remained to hear the sermon. The scandal did not pass unnoticed. He was summoned before the session of the seceding congregation; but not choosing either to atone by an apology for his sin in mixing with profane worshippers, or to wait for a formal sentence of excommunication, he abdicated his principles, and professed himself a member of the establishment. Thus bigotry is often but the masque of avarice, pride, or ambition; and here, though the nature of his present zeal was a secret to the zealot himself, we see it fully disclosed by this instructive anecdote. Encouragement at first, and afterwards flattery, from his brethren, seem to have formed a strong connection between the peculiar articles of his faith and a sense of his personal importance; the moment this connection was dissolved, an alteration of sentiment succeeded, not very much unlike that produced in Luther's mind by the offensive measure of the pope: the opinions he had so warmly cherished lost all their value in his estimation; or rather perhaps became odious from the disgrace with which they threatened him.<sup>20</sup>

When Brown moved to Edinburgh he discovered that he won more admirers through reason than through piety, and so abandoned Christianity altogether. And his lack of faith led him to study medicine. He then found that his formidable talents as a Latinist made the professors seek him out and offer him their friendship. With Cullen, in particular, 'a very strict and confidential intimacy ensued'.<sup>21</sup> For some time he seems to have led a sober and industrious life. He got married and found, however, that the living he made from translating medical theses into Latin was insufficient to support a family. So he opened a boarding house where he lived so lavishly that within two or three years he was declared bankrupt. Beddoes hints that it was during this period that Brown's devotion to drink and opium got the better of him. But it was also at this period that Cullen began to withdraw from his protégé. In the passages that follow, Beddoes relates Brown's catastrophic rupture from Cullen to the 'instructive anecdote' of the proud young boy turning his back on the Seceders. Brown is again compared with the early Protestants. 'Like other reformers... he committed and sustained injustice. ... Like them too, he gradually lost his sense of equity... his countryman Knox could scarce have exceeded him in ferocity'.<sup>22</sup> And thereafter the rupture with Cullen became a source of pride.

Three aspects of this narrative seem to me to be distinctively Moritzian. First there is the willingness to trace Brown's disputatious character to a circumstance in his childhood. It was an event that Beddoes saw him repeat again and again in his life but above all in Edinburgh Medical School. Second, Beddoes shows a striking willingness even in this early work to

understand character in terms of hidden passions, in this instance pride. Last, Beddoes effectively sets himself up as a moral doctor to Brown, offering the reader an understanding of Brown's character that was quite beyond Brown's own reach.

Yet Beddoes may not have known of Moritz's work in 1795. By the time he came to write *Hygäia*, however, some seven years later, it is incontrovertible that he was aware of Moritz and of the writings of some others who were influenced by him. In Essay IX of that work he drew heavily on the case of Karl Von Drais, a Swiss nobleman who in 1798 anonymously published a book entitled *Diaetophilus, physische und psychologische Geschichte seiner siebenjährigen Epilepsie* [Diaetophilus. A physical and physiological history of a case of epilepsy lasting seven years].<sup>23</sup> Beddoes said of this work that it gives 'a clearer representation of the ebbs and flows and eddies of the mind in epilepsy than all the writings of medical men put together'. Most of Von Drais's book takes the form of a journal, which he kept with the aid of his wife. In it he detailed the thoughts that assailed him in the period immediately preceding his seizures. These nearly always turned on two distinct sets of preoccupations. Von Drais recalled that 'about his seventh year, he was told he should see an apparition the succeeding night. He was at the same time conjured, under pain of death, to keep the communication secret. From that time a confused image confirmed itself . . . in his mind'. He found that if he attempted to suspend the action of thinking, his mind carried him to this scene against his will: 'still according to my feelings some single nerve [continued] to work on in my head, and [carried] me, as in a dream, or in a state of intoxication, through obscure visions'. If he became too absorbed in this scene he would have a fit. But Von Drais also mentioned that certain 'Secret imprudences', presumably of a masturbatory nature, also played a part, 'though they were not continued for a long time'. Overwhelming fear and sexual excitement had the effect of undermining Von Drais's powers of concentration and attention. These powers were recovered by a series of exercises that enabled the young man to focus on one thing at a time.

The idea that masturbation could give rise to epilepsy was widely held. A link was first suggested by Haller's friend and translator, Samuel Auguste Tissot (1728–97) in his *Tentamen de morbis ex manustupratione* (*Essay on the Diseases arising from Masturbation* (1758; translated in 1765)).<sup>24</sup> Beddoes seems to have thought that more frank discussion of sexual life would shed great light on epilepsy and on a range of other disorders characterized by psychological impairment.<sup>25</sup> Armed with this account of the aetiology of a nervous disease, Beddoes then turns to Thomas Sheridan's *Life of Jonathan Swift* (1784). Swift had famously traced all his ailments to a 'surfeit of fruit', which he had eaten hastily in his early twenties and had left him with a 'giddiness and coldness of stomach, that almost brought him to his grave'.<sup>26</sup> Beddoes reinterpreted Swift's illness career in the light of Diaetophilus's case. The Dean's preoccupation with 'things impure' can be discerned throughout his writings, but the connection of these with his ailments is best illustrated, Beddoes thinks, by reference to his amorous career:

Strong evidence (I think as strong as circumstantial evidence can be) is to be found in the delight [Swift] takes in images 'physically impure'—in the sentiments he proffered at different times regarding marriage, and, above all, in his behaviour towards several women after he had attained the fullness of literary glory.

That he should have engaged the affection of three women (and of two by direct addresses) and that he should have escaped from one by a subterfuge, shaken off another by murderous violence, and dropped the third at the last Amen of the marriage

ceremony, form a difficulty in his conduct, which scarcely admits of any but a physical solution.<sup>27</sup>

In the event, Beddoes puts forward two physical solutions but says, ‘it will be difficult not to prefer that which is countenanced by analogy’. Either Swift was ‘naturally of a temperate constitution with regard to women’, or ‘As he was afterwards so fond of keeping the embers alive, is it not infinitely more probable that the flame once burned fiercely’ and that ‘by constant habit of suppressing his desires, he at last lost the powers of gratifying them’?<sup>28</sup>

Yet again, Beddoes converts biography into case history by means of psychological character-based evidence. All sorts of apparently sane acts become open to reinterpretation as somewhat insane as part of a more comprehensive natural history of a psycho-physiological disorder.

In his 1814 *Life of Swift* Sir Walter Scott expressed outrage at Beddoes’s essay and called for a medical man to refute it.<sup>29</sup> Nearly 30 years later, Sir William Wilde (1815–76), the father of Oscar, had Swift’s corpse dug up in 1846 to perform an autopsy, but his findings were inconclusive.<sup>30</sup> Scott’s prayers were finally answered only in 1882 by J. C. Bucknill, the famous alienist and a Fellow of the Royal Society.<sup>31</sup> Bucknill attributed the infirmities of Swift’s last days to labyrinthine vertigo or Ménière’s disease caused by a build-up of fluid in the inner ear.

Bucknill is best remembered today for his book, *The Psychology of Shakespeare* (1859).<sup>32</sup> I shall conclude this paper by suggesting that in this endeavour he stood, perhaps unwittingly, on Beddoes’s shoulders. It was commonplace in the nineteenth century for alienists to credit Shakespeare with (in Bucknill’s words) ‘exactness of psychological knowledge’. Bucknill, John Conolly and Henry Maudsley all wrote treatises on psychopathology using examples from Shakespeare’s plays. On this side of the Atlantic, the grandest claims for the Bard as proto-alienist were perhaps made by Maudsley, who asserted that ‘Shakespeare...furnishes, in the work of creative art, more valuable information [about insanity] than can be obtained from the vague and general statements with which science, in its present defective state, is constrained to content itself’.<sup>33</sup>

The first person to make this sort of claim for Shakespeare that I know of was Thomas Beddoes. In the last essay of *Hygëia* Beddoes asserts that Shakespeare

has succeeded, by his happy use of madness as machinery, in carrying terror and compassion to a height, which they cannot perhaps be made to reach by any other means. ... But it is his desponding-mad Ophelia, his raving-mad Lear, his jealous-mad Othello, his melancholy Jacques, his crafty-mad Hamlet, that awe and attach on the first exhibition, and bind the heart in a never-ceasing spell.<sup>34</sup>

Knowledge of Shakespeare’s plays amounts to clinical knowledge, for Beddoes. It must be remembered that he said this in 1803, five years before August Wilhelm Schlegel made the remark that Hazlitt used as an epigraph to his *Characters of Shakespeare*. Schlegel said that Shakespeare ‘alone pourtrayed the mental diseases,—melancholy, delirium, lunacy,—with such inexpressible, and, in every respect, definite truth, that the physician may enrich his observations from them in the same manner as from real cases’.<sup>35</sup>

But Beddoes goes on to make several further claims about Shakespeare’s knowledge of madness that look far ahead of Schlegel. In line with the Moritzian bias of his thought on psychological matters, Beddoes sees Shakespeare’s art as a kind of narrative therapy for the playwright. For Shakespeare in the act of writing was too busy delineating the

workings of passion to have placed himself under its sway. It is a characteristic of all great poets, Beddoes says, that 'They are not merely worked up by passion; but however much they may work themselves up, they have a goal in view, which hinders their thoughts from going astray'. Shakespeare was not merely an accurate observer of madness in others; he was able to put something of himself in all of his mad characters because he knew that sanity was continuous with, and not simply the negation of, insanity. 'The sane and the insane mind are made of the same stuff', as Beddoes put it. 'A change in the hues and arrangement of their materials is the sole difference'.<sup>36</sup> This is a truly psychological claim, and of course it finds its way into nineteenth-century Shakespeare criticism through Coleridge, who along with Schlegel is credited with initiating the nineteenth-century vogue for Shakespearean psychopathology.<sup>37</sup> But Coleridge got it from Beddoes, and Beddoes ought to be seen as its first if not its only begetter.

There is perhaps an analogy to be made here with the nitrous oxide experiments with which Beddoes's name is more firmly fixed. In his deathbed letter to Humphry Davy, Beddoes lamented that he had 'scattered abroad the Avena Fatua [wild oats] of knowledge, from which neither branch nor blossom nor fruit has resulted'.<sup>38</sup> But as we know, pneumatic medicine laid the basis for the first surgical anaesthetics in the 1840s when the anaesthetic properties of nitrous oxide were fully recognized. In the same way, we might think, his attempts to propound the German psychological tradition to early nineteenth-century Britons went largely unnoticed at the time he made them, only to become mainstream towards the middle of the nineteenth century. For that reason alone, his involvement with this tradition deserves to be better known.

#### NOTES

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- 4 M. Bell, *The German psychological tradition* (Cambridge University Press, 2005).
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- 18 Beddoes, *op. cit.* (note 12), pp. 32–33.
- 19 *The Elements of Medicine of John Brown M.D. Translated from the Latin, With Comments and Illustrations by the Author: A New Edition, Revised and Corrected With a Biographical Preface by Thomas Beddoes M.D.* (2 vols) (J. Johnson, London, 1795), pp. xxxv–cii.
- 20 *Ibid.*, pp. xlii–xliii.
- 21 *Ibid.*, p. xlv.
- 22 *Ibid.*, p. xlvi.
- 23 Beddoes's essay is entitled 'On the Nature and Prevention of some of the Disorders Commonly Called Nervous'. See also K. W. A. Von Draais, *Diaetophilus, physische und psychologische Geschichte seiner siebenjährigen Epilepsie* (Zürich, 1798).
- 24 Samuel Auguste Tissot, *Tentamen de morbis ex manustupratione in Dissertatio de febribus biliosis* (Marc-Michel Bousquet, Lausanne, 1758); *Onanism: or, a treatise upon the disorders produced by masturbation, or, The dangerous effects of secret and excessive venery* (transl. A. Hume) (London: A. Hume, 1766).
- 25 Thomas W. Laqueur, *Solitary sex: a cultural history of masturbation* (Zone Books, New York, 2003); this book discusses Beddoes's attitudes to sexual matters and especially to masturbation on pp. 216 and 323.
- 26 This aetiology is given by Swift himself in 'Anecdotes of the Family of Swift' in *The Prose Works of Jonathan Swift, D.D.* (5 volumes) (George Bell & Sons, London, 1897), vol. 1, pp. 367–382.
- 27 Beddoes, *op. cit.* (note 23), pp. 190–191.
- 28 *Ibid.*, pp. 193–194.
- 29 *The works of Jonathan Swift, containing additional letters, tracts, and poems, with notes, and a life of the author, by W. Scott*, 2nd edn (10 volumes) (Archibald Constable, Edinburgh, 1824), vol. 1, pp. 27–28.
- 30 Sir William Wilde, *The Closing Years of Dean Swift's Life* (Hodges & Smith, Dublin, 1847).
- 31 J. C. Bucknill, 'Dean Swift's Disease', *Brain* **4**, 493–506 (1882).
- 32 J. C. Bucknill, *The Psychology of Shakespeare* (Longman & Co, London, 1859), p. vi.
- 33 Yet grander claims were made in America by the physician and alienist Amariah Brigham, who observed that 'we have very little to add to [Shakespeare's] method of treating the insane' (quoted in B. Reiss, 'Bardolatry in bedlam: Shakespeare, psychiatry, and cultural authority in nineteenth-century America', *ELH* **72**, 769–797 (2005)). Henry Maudsley, *Body and Will: In its Metaphysical, Physiological and Pathological Aspects* (Kegan & Paul, London, 1883), p. 198.
- 34 Beddoes, *op. cit.* (note 12), pp. 4–5.

- 35 P. P. Howe *et al.* (eds), *The complete works of William Hazlitt* (21 volumes) (J. M. Dent, London, 1930), vol. 4, p. 173.
- 36 Beddoes, *op. cit.* (note 12), p. 61.
- 37 For an account of how Coleridge used Beddoes's Moritzian case histories to understand his own condition better, see my 'Coleridge, Moritz and the "psychological" case history', *Romanticism* **13**, 271–280 (2007). For Beddoes's influence on Coleridge's Shakespeare criticism see my 'Coleridge and the idea of 'psychological' criticism'. *Br. J. Eighteenth-Cent. Stud.* **30**, 261–278 (2007).
- 38 Quoted in Mike Jay, *The atmosphere of heaven: the unnatural experiments of Dr Beddoes and his sons of genius* (Yale University Press, London, 2009), pp. 246–247.