Medico-politics and English literature, 1790-1830: immunity, humanity, subjectivity

Amy Mallory-Kani

University at Albany, State University of New York, amymallorykani@yahoo.com
MEDICO-POLITICS AND ENGLISH LITERATURE, 1790-1830:

IMMUNITY, HUMANITY, SUBJECTIVITY

by

Amy Mallory-Kani

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Abstract

In 1796, Dr. Edward Jenner began vaccinating individuals against small pox by using matter from the pustules of the cow pox. Though extremely controversial because of its discomforting mixture of animal and human, by the end of the Romantic period, vaccination was celebrated as the safest way to immunize the British population. Through the practice of vaccination, Britain found a way to save its body politic from a destructive epidemic while affirming the strong connection between individual health and collective well-being that writers of the period like Mary Wollstonecraft, William Wordsworth, Jane Austen, and Mary Shelley recognized in their works. From the beginning then, medical immunity was inherently connected to politics; at the same time that Jenner was experimenting with vaccination, writers were debating over the most effective way to stifle the “jacobin influenza” and the “French malady,” the contagious revolutionary ideas migrating to England from France.

Importantly, the use of medical terms and concepts to define the political points to the already immunological process by which modern political subjects are born, a process explored by contemporary biopolitical theorists like Roberto Esposito and which my project grounds in the historical record of early modernity. In particular, I argue that the rupture in sovereignty caused by the French Revolution, resulted in a shift in the way that political subjectivity was conceived. Individuals, rather than being constituted in relation to a transcendental sovereign whom, according to Hobbes, they created to protect themselves, instead internalize sovereign power. In a sense, the modern political subject comes into being through an essential immunization.

The discourse of what I call “medico-politics” made its way into the literature of the period. In fact, literature distinctively influenced how the modern, medicalized political subject was imagined. Capital-L literature—itself an burgeoning kind of discipline
—was drafted into the immunizing project of modern politics because of the way it disciplines readers' bodies and minds. While Saree Makdisi claims that there is a “uniquely Blakean slippage between political and biological language” during the period and other critics view the relationship between literature and medicine as unilateral and metaphorical, I argue that medical practices like inoculation not only influenced literature, but became a part of literature’s own self-definition as a modern discipline.
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Introduction

“The lovely virgin, or the well-earn’d fame,

And all the glories of the British name,—

If Heaven had doom’d the downfall of the state,

And thy protection but retards our fate?

If France pursues her infamous career,

To spread the pest of her dominion here;

And if the blood of innocence must flow,

To grace the triumphs of a Gallic foe?”

In 1804, amidst the war between England and France, Christopher Anstey published the above lines in a slim volume of verse through Lord Byron’s and Jane Austen’s future publisher, John Murray. Considering the martial atmosphere at the time—Britain had broken the Peace of Amiens and officially declared war on France only the year before—Anstey’s fear that France would “spread the pest of her dominion” to Britain’s shores seems understandable. These lines appear ever more striking, however, when read along with the remainder of the poem: an ode, not on Britain’s potential military glory or France’s menacing intrusion into British politics, but to Edward Jenner and his discovery of vaccination. Antsey’s Ode to Jenner was originally written in Latin, but translated almost immediately by John Ring, one of Jenner’s most notable publicists and a solid pro-vaccinationist. As part of a string of poetic homages to Jenner and the wonders of vaccination—including a much more famous piece, Good Tidings, written by Robert Bloomfield—Anstey’s poem helped to fuel Jenner’s campaign to make vaccination acceptable to both medical practitioners and the public as a lower-risk alternative to traditional inoculation. Anstey’s poem differs from Bloomfield’s and others’ because, rather than connecting vaccination to the pastoral ideal, he compares the
process to a successful military initiative against France.\(^{2}\) Vaccination, in Anstey’s terms, becomes a military and political defensive designed to protect the state. Smallpox, “that baneful pest” and “dire fiend,” causes “blemishes [that] invade [the] lovely cheeks” of the virgin, only to be rectified by Jenner’s “skillful hand” when it “inserts with wondrous art/ The crystal drop […] to quell the fiend.”\(^{3}\) Anstey describes vaccination’s defensive in overtly martial terms: “Ere long a pustule, rising in the wound,/ Repels the foe, that lurks in ambush round/ With all his host; and from our fleeting breath/ Averts the perils of impending death.”\(^{4}\) In vaccination, so Anstey claims, Britain has found a way to save itself from destruction: not on the battlefield, but in and on the human body.

In 1796, Jenner began vaccinating patients against smallpox by using matter from the pustules of cox pox. Though his method was very controversial, an issue I will explore in chapter four, Jenner and his team of pro-vaccinationists worked hard to convince both medical practitioners and the public that vaccination was a safe practice. At the same time that Jenner’s campaign insisted on the importance of medical immunity for Britain’s expanding population, Britain was at war with France and the nation feared the contagious revolutionary principles that had migrated, and continued to migrate, across the channel. The war, along with the various pieces of legislation passed in the British Parliament that aimed to keep England safe for its citizens, worked to protect, or immunize, the nation against “the jacobin influenza.” This idea is perhaps best illustrated by Temple West’s 1803 satirical drawing, “An Address of Thanks from the Faculty to the Right Honorable Mr. Influenzy for his Kind Visit to this Country.” Though ostensibly a satire on the influenza epidemic that raged through England during that year, one detail in particular serves to underscore the connections that this book is making between politics and disease during the late eighteenth century. The green-tinged Mr. Influenzy, shown on the left, is wearing a cloth cap of red, white, and blue: the colors of the French
flag. The fact that his very name plays on the closeness of influenza and influence is particularly notable. French influence spread with the same viciousness throughout England as the influenza and, as a result, political immunity became a perpetual concern for the British state. Simultaneously with these two events, literature itself was undergoing its own form of quarantine. Wordsworth’s injection of a “necessary rural character” into his poetry—a move that clearly mimics Jenner’s insertion of cow pox (a rural disease) into patient’s bodies—produced a form of literature—the lyrical ballad—that was especially safe for readers. Indeed, the period produced a number of literary works that were concerned with their very existence as Literature: a form of writing separate from others precisely by way of its source in the imagination, a dually mental and bodily space, according to many physicians at the time. Anstey, Bloomfield, and others use literary form in order to negotiate the ways in which citizen-readers maintain medico-political immunity and, thus, protect their subjectivity.

In his compelling study of William Blake’s illuminated books from the 1790s and what he calls “impossible history,” Saree Makdisi points early on to what he sees as a “uniquely Blakean slippage between political and biological language.” He argues convincingly that post-revolutionary English radicalism should be viewed as a much more complex and nuanced continuum, comprised of both “hegemonic 1790s liberal-radicals” like Wollstonecraft, Paine, and Godwin and the ever more radical “fierce rushing” of popular enthusiasts such as Blake himself. However, the many and varied writings of these radicals, as well as those of “conservatives,” reveal that the shift between “political” and “biological,” or more specifically, medical, forms of expression is hardly exclusive to Blake’s writing. Post-revolutionary English disease in its myriad forms becomes a topic of major concern for writers from diverse political factions beginning in the 1780s and 90s and remains important in the years leading up to reform. The French
Revolution ignites an overarching interest in the health of the nation and its population for writers of all political orientations. The slip between the medical and the political is not limited to simply radical or liberal-radical circles, but rather exposes a constellation of themes that haunts medico-political arguments of figures as politically disparate as Mary Wollstonecraft, Edmund Burke, Jane Austen, William Wordsworth, and Mary Shelley. I am not trying to argue that the invocation of, what I term, “medico-politics” belies real political differences; those distinctions emerge in the logic by which writers identify what they believe to be the source of political illness. The pamphlet wars of the 1790s produced a number of tracts that argue for staving off an infection of the “jacobin influenza,” as one anonymous writer puts it, as well as implanting those principles within the English body politic in order to spur the growth of more progressively democratic ideals, while simultaneously quelling the vices that contaminate the political sphere from within. Additionally, the revolutions trigger a new emphasis in medical and political circles on prevention, treatments that are proactive rather than reactive. As much as writers of the period are concerned with remedies and cures for social and political ills, they are equally interested in prescribing actions that may avert future diseases from taking hold of the population.

Equally important is the way in which period documents rely less and less on metaphorical treatments of the body politic, a practice rooted most strikingly in Thomas Hobbes’s Leviathan. Instead, the concept of a healthy state or healthy constitution is quite literally informed by the physical well-being of individuals. The productivity of the nation (one that is gradually becoming industrialized) depends upon the health and livelihood of the bodies which inhabit it. Guides such as William Buchan’s extremely popular Domestic Medicine (1769; revised 1785) offer their readers, at least on the surface, access to medical knowledge that allows them to supervise the health of
themselves and their families. As I will explore early on, these texts overtly aim to imbue each citizen with the means to care for herself and her kin, guaranteeing the continuous generation of healthy individuals. On the other hand, these early self-help manuals’ politicization of medical practice and “doctoring” more generally, while seemingly democratic, attest to the diffusion of disciplinary power into the physical bodies of individuals and eventually, to an accessible form of medical surveillance guided mainly by newly credentialed medical professionals. Ultimately, self-doctoring and other forms of regimen, associated as they are with individual liberty, are usurped by a medicalization of political society that wishes to oversee the health of the population.

In particular, I will examine three major interrelated concepts which contribute to what I am calling the “medico-politics” of the Revolutionary period: immunity, humanity, and subjectivity. This project explores how modern political subjectivity is underwritten by an essentially biomedical logic: inoculation, the process by which a pathogen is injected into an otherwise healthy body in order to facilitate immunity to disease. I argue that literature, but particularly late eighteenth- and early nineteenth-century poetry and prose, is the venue in which modern immunity (medical and political) is defined. I look at how two significant events of the period—the French Revolution and the “discovery” of vaccination by Edward Jenner—lead authors to question the place of the healthy or diseased body in the formation, and maintenance, of political subjectivity. Finally, I consider how medical discourse pervades the political rhetoric of the period (1789-1830) and how this medico-political rhetoric becomes materially important to the constitution of both individual bodies and the state to which they are subject. Most literary-critical texts which engage the history of medicine simply follow, or attempt to interpret, the use of medical metaphors in novels, poetry, and other conventionally “literary” works, rather than consider how literary forms (poetry and imaginative narrative) contribute to the
medico-political culture of the later eighteenth century or how medical practice provides a framework for theorizing modern political subjectivity. I argue that literature, as a burgeoning discipline, borrowed from, but also influenced, how medicine imagined the modern political subject. The modern notion of humanity as a species is thus contingent upon the formation of a literate and medicalized population.

Medico-Politics vs. Biopolitics

Michel Foucault argues in *Society Must be Defended* that “in the seventeenth and eighteenth centuries, we saw the emergence of techniques of power that were essentially centered on the body, the individual body,” a matrix he elsewhere calls “anatomo-politics.” The form of power that this technique ensures is famously termed “disciplinary,” enacted via “attempts [...] to increase [...] the productive force [of individual, laboring bodies] through exercise, drill,” and various versions of regimen. However, the later portion of the eighteenth century witnesses a transition from the dominance of disciplinary power to “security,” or a form of “surveillance” that concerns itself primarily with the population. “Unlike discipline, which is addressed to bodies,” Foucault contends, “the new nondisciplinary power is applied not to man-as-body but to the living man, to man-as-living-being,” thus, “after the anatomo-politics of the human body established in the course of the eighteenth century, we see, at the end of the century, the emergence that is no longer an anatomo-politics of the human body, but [...] a ‘biopolitics’ of the human race.” Biopolitics, or “biopower,” is largely concerned with the statistics of birth and death rates, larger-scale reproduction and fertility measures, and longevity, “as well as a whole series of related economic and political problems.”

Foucault argues further in his essay, “The Politics of Health in the Eighteenth Century,”
that a “double-sided process” occurs in the later eighteenth century, including both “the
growth of individual and family demand for health care” and “the emergence of a clinical
medicine strongly centered on individual examination,” a theme he explores in more
dept in The Birth of the Clinic. This multi-sided process amounts to the “organization
of a politics of health” that has at its core “the consideration of disease as a political and
economic problem for social collectivities which they must seek to resolve as a matter of
overall policy.” Foucault seeks to illuminate the fact that the health of the population as
a statistically rendered political body becomes a priority for the state. “The emergence of
the health and physical well-being of the population in general,” he writes, is “one of the
essential objectives of political power.” Importantly, “different power apparatuses are
called upon to take charge of ‘bodies,’ [...] to help and if necessary constrain them to
ensure their own good health.” Hence, the disciplinary maneuvers of self-help regimen,
in which the individual maintains and optimizes her own health with limited intervention
by medical professionals, are subsumed into the overall biopolitics of the state, now only
concerned with the health of individual bodies as a means to securing the “health and
optimum longevity” of the population at large. It is important to note that the transition
from disciplinary power to security and surveillance that Foucault describes is
problematic, mainly because similar terms are often employed to define what seem to be
separate phenomena. For example, he claims in The Birth of Biopolitics that security is
bound up with disciplinary power, while in the previous set of lectures, Security, Territory,
Population, he sees the epoch of security as separate from the disciplinary episteme,
though emerging from it. “Discipline,” he writes, “allows nothing to escape,” whereas,
“the apparatus of security...‘lets things happen.’” As a result, I have chosen to extract a
theoretical continuity out of Foucault's works that does not necessarily exist in the works
themselves. My reading of Foucault is reflective of the extensive archival research I have
conducted for this project. In the end, the archive does actually reveal a medico-political (a term Foucault does not use) transition between something like “disciplinary” power to a broader emphasis on the health, security, and surveillance of the population. Hence, I have chosen to retain the general frame of Foucault’s overall argument, while choosing not to explicitly employ the term “biopolitics.” Instead, I favor the term “medico-politics” primarily because this study is not specifically interested in the ways in which life is defined and deployed in medicine, science, and political discourses. Rather, my project investigates the underlying medico-political inoculations that construct specifically modern political subjects and how literature becomes the forum in which these inoculations are facilitated.

The transformation of medical literature from a genre concerned primarily with curing illnesses and offering remedies for a variety of everyday complaints to one that treats disease prevention as paramount to staying in good health helps to facilitate the shifts in biopower about which Foucault writes. This is not to say that texts on cure and remedy completely go away. Rather, they are largely displaced by medical texts authored by newly credentialed medical professionals who, armed with a more systematized knowledge of physiology and nosology, can more accurately pinpoint the causes of different illnesses and, with such information at their disposal, educate the public on how to prevent those illnesses. Trained “doctor...will have the task of teaching individuals the basic rules of hygiene which they must respect for the sake of their own health and others.”

Furthermore, Foucault affirms, “Medicine, as a general technique of health even more than as a service to the sick or an art of cures” expands the “politico-medical hold on a population [now] hedged in by a whole series of prescriptions relating not only to disease but to general forms of existence and behavior” like eating and drinking. Here, Foucault indicates that prescriptive medicine, itself a form of prevention,
is absorbed into the general “lifestyle” of individuals; as such, health becomes a broad
term or condition which applies to a number of human activities. “The doctor,” then, as
“political and social reformer” “becomes the great advisor and expert...in...observing,
correcting and improving the social ‘body’ and maintaining it in a permanent state of
health.”18 A review of period documents, however, makes it clear that, though the
“doctor” takes on a more specified medico-political position in the intellectual milieu of
the later eighteenth century due to a series of legal and medical reforms enacted by the
state, prescription, prevention, and the “permanent state of health” of the population
interest writers from a number of backgrounds. My project specifically explores how
writers who are not trained as medical professionals also participate in the medico-
politics of health described by Foucault. Importantly, Foucault views economic, political,
and medical issues as constructive of a specific “milieu,” a term borrowed from the
writings of George Canguilhem. I explicitly add “literary” problems to this milieu, for a
number of reasons. To begin with, the reading of imaginative or fictional writing in the
eighteenth century was an activity believed by many to produce a series of both
pathological and moral dilemmas. For example, an examination of ephemera (prefaces,
reviews, and other commentaries) related to novel reading in the eighteenth century
reveals that, although the novel could be a highly effective didactic tool (an argument
also asserted by popular medical literature), its form and content had the ability to
provoking a variety of socially negative implications including dereliction of duty (especially
on the part of women), moral profligacy, delusions of grandeur, mental unrest, and even
physical symptoms like “dropsy.” Novel reading is described as a pathological threat in
the same terms that are later employed to illustrate the deleterious effects of French
revolutionary principles striking from without and the vices, possibly curable by adopting
the republican values of the French, originating from within the body politic. As I will
explain below, Wollstonecraft, among others, remains suspicious about Literature’s capacity for promoting healthy practices, yet nonetheless embraces the form of the sentimental novel in order to undermine its traditionally oppressive features. In each of the works I treat, the imagination, embodied materially by popular forms of writing like the novel, the political treatise, and lyric poetry, is both a potentially damaging and redeeming force for the distinctive brands of medico-politics to which the authors under discussion subscribe.

I argue that literary works contribute just as essentially to a medico-politics whose “main function,” from the late-eighteenth century onwards, is “public hygiene, with institutions to coordinate medical care, centralize power, and normalize knowledge,” that also “takes the form of campaigns to teach hygiene and to medicalize the population.”19 In various ways, novels, poetry and other forms of writing educate the public about individual and collective hygiene, but they also allow human subjects to perform their own humanity, that is, to authorize themselves as subjects for politics. Literature helps to facilitate the inoculations that guarantee immunity, a form of protection against various forms of excess: political, affective, and animal. I borrow extensively from recent work in biopolitical theory in order to support my claims about political immunity, but I ground those claims in references to the historical archive of late-eighteenth-century medical practice. Particularly important to my project is Roberto Esposito’s stress on a “paradigm of immunization” by which he identifies “a structural connection between modernity” and immunity.20 Esposito closely interrogates three distinct, yet related, aspects of this paradigm that combines the “politic-juridical” meaning of immunity with the biomedical one: “just as in the medical practice of vaccinating the individual body, so the immunization of the political body functions similarly, introducing within it a fragment of the same pathogen from which it wants to protect itself, by blocking and contradicting
natural development.” Drawing largely from Hobbes and Locke, as I will do below, Esposito demonstrates how eighteenth-century theories of sovereignty, property, and liberty already encompass the immunological paradigm that he associates with modernity. “That all of them [the three aforementioned concepts],” he writes, “at a certain point in their historical-semantic parabola are reduced to the security of the subject who appears to be the owner or beneficiary, is not to be understood either as a contingent derivation or as a destiny fixed beforehand, but rather as the consequence of the modality of immunity through which the Modern thinks the figure of the subject.” In other words, the formation of modern subjectivity depends upon an implicit inoculation for its very constitution; immunity is not the after-effect of subjectivity but rather the basis through which the subject as an individual cordoned off from the common can emerge. Esposito uses the concepts of sovereignty, property, and liberty to unveil this constitutive process. For example, sovereignty “isn’t before or after biopolitics, but cuts across the entire horizon, furnishing the most powerful responses to the modern problem of the self-preservation of life.” Returning to Hobbes’s idea that, in order to protect themselves, men in a state of nature consent to establish an external, sovereign power, Esposito explains that “in order to save itself, life needs to step out from itself and constitute a transcendental point [the sovereign] from which it receives orders and shelter.” The externalization of life that occurs with the formation of sovereignty is then re-internalized, in immunological fashion, in order for the individual, political subject to be conceived.

Though useful for its theoretical treatment of the simultaneously political and biomedical forms of immunity that undergird the subject’s position in modern politics, Esposito’s work lacks an historical foundation. Ed Cohen’s A Body Worth Defending: Immunity, Biopolitics, and the Apotheosis of the Modern Body, however, strives to match
the theoretical claims of Foucault and Esposito with the historical record. In particular, Cohen seeks to place Edward Jenner’s “discovery” of vaccination in the 1790s as a key component in the “historical process that enfolds the value of human life within the ambit of calculation” and, thus, within the purview of modern politics. Before considering the importance of Jenner’s work to medico-politics, Cohen, like Esposito, returns to Hobbes. In particular, he reconciles Hobbes’ political theory on sovereignty with the chaotic political milieu of the mid-seventeenth century from which it emerged, and focuses on the ramifications of the Habeas Corpus Act of 1679 for modern political subjectivity. “Shifting the political opposition to the monarch’s legal authority from the theological to the mundane,” he avers, “the Habeas Corpus Act grounds the legal rights of subjects, and the rights of subjects to due legal process, in their living matter as such.” Hence, taken literally, habeas corpus, the legal presence of the body, detaches the subject from the divine mechanism of sovereignty. “The body enters politics, then,” Cohen contends, “not merely as a vital or biological phenomenon but as a legal fiction that stands opposite the corporate body of the monarch.” Cohen’s association of the legally subjected body with a necessary fiction draws implicitly from Hobbes’ theory on persona from *Leviathan*, which I will explore in more depth in chapter four, but also contains an important resonance for my project as a whole. The fictive space that sutures the subject to external forms of power (legal, political, medical, etc.) is precisely the space in which literature intervenes. This is especially true in the eighteenth century when literature as a distinct genre is only beginning to be distinguished from other forms of writing. The gap sustained by fiction, in Cohen’s words, or literature, in my own words, in the later eighteenth century, is a space in which political subjectivity has the potential to swerve into both acceptable and excessive channels. There is a point when this fluctuation is at its most chaotic: from roughly 1789 until around 1832. The French Revolution, and the
constantly imminent threat of Revolution on English soil that many saw as its natural extension, caused not only a rupture in collective English politics, but a serious crisis in subjectivity. Hence, Jenner’s work on vaccination provided the nation with a controversial, yet comforting, inoculation that served both medical and political needs. Vaccination provided a much safer way to protect the subject’s body from environmental threats; on this front, at least, the British succeeded in keeping unwanted “pathogens” from entering the body politic. Furthermore, vaccination, by greatly reducing the threat of smallpox, safeguarded the population at large, and made the disease a calculable anomaly rather than a constantly looming killer of able bodies. As Cohen writes, vaccination becomes “a strategic investment that reconciles individual liability with collective well-being.” In vaccination, the British conceived of a strong conduit between individual and state health. Though Jenner’s views were not universally championed at the outset, by the mid-nineteenth century, vaccination had become compulsory for the British people. Early detractors from vaccination argued that the injection of animal matter into the human body violated humanity’s sacred position as the dominant species, a viewpoint clearly rooted in eighteenth-century ideas about human superiority.

By 1853, with the passage of the second Vaccination Act, medico-political opinion had altered significantly about the efficacy of vaccination over the much more dangerous process of variolation. Furthermore, this important legislation signaled medicine’s complete entrenchment in politics, an inoculation of sorts that truly began during the Revolutionary era and which this study will document.

State of the Field

Aside from a very small number of books and articles, written largely by historians, on the history of eighteenth-century medicine which draw on literary sources
such as novels and correspondence (many by Roy Porter), literary criticism on the period focuses primarily on the ways in which literature borrows metaphors from medical discourse.²⁹ Paul Child, writing about the possibility of teaching medical texts as literature, argues that “while this [metaphorical or influential] reading of medical literature and practice is valuable because it shows that the literary artist does not live in a cultural vacuum, it nevertheless imposes what John Richetti has called a ‘falsifying dichotomy separating scientific...works from writing that is overtly imaginative,’” a distinction that, Child rightly claims, was not upheld in the eighteenth century (208). For instance, the volume, Literature and Medicine during the Eighteenth Century (1993), edited by Marie Mulvey Roberts, contains a number of articles on medical topics in the works of Sterne, Swift, Austen, and others. As I indicated above, the bulk of these articles and chapters treat the relationship between literature and medicine as a unilateral, rather than reciprocal, relationship. In other words, medicine acts as an influence upon literary works and their authors, with little or no attention being paid to the possibility that literature may have had an influence on medical texts. The topic of “romantic medicine” has received a more thorough treatment in Hermione de Almeida’s Romantic Medicine and John Keats, Paul Youngquist’s Monstrosities: Bodies and British Romanticism, and more recently by Sharon Ruston in Shelley and Vitality and Creating Romanticism, James Robert Allard in Romanticism, Medicine, and the Poet’s Body, and Martin Wallen in City of Health, Fields of Disease: Revolutions in Poetry, Medicine, and Philosophy of Romanticism. These last three texts make great strides towards the definition of a medico-political milieu in the late eighteenth- and early nineteenth-centuries, but still remain largely in the tradition of examining medical influences on literary texts.

The primary interventions of this study are, firstly, to interrogate how literature took an active role in disciplining the modern, medico-political subject and, secondly, to
further historicize the theoretical paradigm of biopolitics by taking seriously Foucault’s idea that biopolitics originated around 1800.30 Very few critical studies of literature written between 1790 and 1830 openly reference biopolitics. Saree Makdisi’s study on Blake contains the required footnote, but more recent work, such as Mark Canuel’s Justice, Dissent, and the Sublime and Robert Mitchell’s Experimental Life: Vitalism in Romantic Science and Literature, considers biopolitical theory to be an important framework for studying literature’s connections to politics and law in the late eighteenth century. As Canuel notes, “recent political theorizing has taken a surprising, often unrecognized interest in the legal and political innovations” of the period.31 Mitchell also sees a clear association between late eighteenth- and early nineteenth-century literature and contemporary biopolitical and vitalist theories. He draws on “contemporary theory in order to reveal alongside or beneath the Romanticism of organic form an experimental Romanticism focused on the vertiginous, the non-organic, and suspensions of animation.”32 However, as Mitchell notes, and as this study argues further, illuminating the historical origins of biopolitics also expands the often limited ways in which biopolitics has theorized the modern political subject: an entity influenced equally by aesthetics and politics. More importantly, examining literature’s role in biopolitics exposes the inherently aesthetic provenance of modern political thought. This project extends Canuel’s emphasis upon “the importance of biopolitical imperatives as intertwined aesthetic and political discourses and practices in which right is threaded through, and furthered by, an aesthetic norm identified with the proper limits of belonging.”33 It does so through a consideration of the ways in which biopower is expressed through, and molded by, literary form.
Romantic or Eighteenth Century?

In recent years, critics such as Susan Wolfson, William Galperin, and Claudia Johnson have debated over the so-called “crisis” in Romanticism; while Wolfson and Galperin argue that, in light of the practicalities of graduate education and the academic job market, the Romantic “period” should be expanded to the Romantic “century,” others, like Johnson, argue instead for an absorption of Romanticism into the long eighteenth century. Wolfson writes that “our field can only be impoverished if it is treated and cast for interpretation as the end-point of the eighteenth century, or a the adolescence of the nineteenth.” Instead, she proposes “an expansion of Romantic-associated interests into an intellectually and historically coherent century-long category, 1750-1850. [...] Might we sponsor ‘The Romantic Century,’” she asks, “a centenary in which Romantic-era interests achieve vital concentration, and through which important issues in literary imagination take shape, emerge, course, and push forward?”34 In my view, codifying Romanticism into a seamlessly demarcated category goes against the emphasis on mediation that typical theories of the period employ. On the one hand, I agree with Saree Makdisi, who insists that “romanticism can be partly understood as a diverse and heterogeneous series of engagements with modernization. [...] It can also be understood as a mediating discourse, through which the multitudinous political and economic facets of modernization [...] are related to each other to a greater or lesser extent, situated as parts of an overall cultural transformation.”35 On the other hand, the same could easily be said for the late seventeenth and eighteenth centuries; in fact, I contend that it is most useful to view the so-called Romantic period, not as the mediator between the Enlightenment and Victorian periods, but as the culminating point of the long eighteenth century. As Johnson avers,
Romantic scholarship has tended [...] to accept an already reactionary description of the period, in which the French Revolution figures as heralding in a monstrously new and entirely unprecedented epoch. This view, which conservative polemicists adopted quite early, had the effect of skewing the careers of progressive novelists such as Wollstonecraft, Inchbald, Hays, and Radcliffe, whose ideological commitments originate farther back in English political history, in formerly respectable discourses about English independence and liberty, discourses which the Reaction to the French Revolution made off limits. [...] A Romantic Century starting at 1750 would have a better chance at recovering these histories than the one starting in 1789 or 1798, to be sure, but the older and to my mind still profoundly useful designation [...] ‘The Long Eighteenth Century’ would do so better yet, starting as it does in 1660 or 1688. The question is, why insist on the moniker ‘Romantic’ in the first place?\textsuperscript{36}

Johnson’s concern is largely with the place of the novel in an expanded Romantic Century, thereby retaining the age-old historico-generic separation between the eighteenth-century novel and Romantic poetry. What neither she, nor the other commentators, consider is that, in order to truly work, an enhanced conception of either period would have to cast off its ingrained loyalties to particular genres. In what follows, I consider how various literary forms (poetry, novels, and non-fiction prose) contribute to the era’s medico-political definitions of subjectivity. Situating Wollstonecraft ideologically as a novelist, for instance, simply because she wrote novels, inheres a certain risk: despite the fact that she did write political novels, she most likely would have agreed with Wordsworth about poetry’s equivalent effectiveness at conveying and regulating political passions.
I still favor Johnson’s assertion that “The Long Eighteenth Century” most fittingly applies to the period under examination, and do so, especially in this project, for two reasons: 1) because the history of medicine does not neatly parallel literary history, and 2) because the medico-politics of the period is extensively influenced by the political philosophies of earlier writers like Hobbes and Locke. Despite Hermione de Almeida’s claims for a *Romantic Medicine*, she culls her “romantic” medical ideas from largely German and French sources. With the exception of a few forward-looking practitioners like William Lawrence, most Romantic-period doctors followed practices rooted in eighteenth-century medicine. Though legal and political precedents, like the Apothecary Act of 1815, changed the socioeconomic status of medical practitioners and began the transition from a mostly regimental form of medicine to clinical practice, the next major paradigm shift in medicine did not occur until well into the nineteenth-century with the “discovery” of germs. My project has more in common, chronologically, with the recently published *Liberating Medicine, 1720-1835* (2009), which demonstrates a clear continuity between the earlier and later part of the long eighteenth century. As Tristanne Connolly and Steve Clark write in the introduction to that volume,

Older critical assumptions of the automatic hostility between science and literature have long been discredited. A more recent consensus has evolved on treating them as parallel and mutually illuminating spheres. This tends to operate on a model of broad cultural analogy, and from such a perspective, placing literature and medicine together has the potential to disrupt familiar periodization. The ‘long eighteenth century’ makes sense in medical history, if William Harvey’s discoveries, such as the circulation of the blood, are seen to usher in a new era which could be said to proceed until the scene is dramatically changed again by germ theory, antisepsis and anesthetic in the mid-nineteenth century.37
I argue that the medico-politics of this period continue earlier ideas about the body politic that stem from the very beginning of the long eighteenth century, though with one crucial difference: whereas previous authors, such as Hobbes, use the medicalized body as a metaphor for politics, post-revolutionary writers materialize the body politic by arguing that the health of individuals directly and materially affects the political body. This change from metaphorical treatments of medicine in literary and political texts, to a largely causal linkage between individual and political bodies reflects a shift in the way that commentators of the period thought about the human political subject. In sum, my project seeks to extend Romanticism beyond its traditional, formal, and temporal bounds by interrogating some of the basic medical and political concepts—like humanity, immunity, and subjectivity—that underwrite literary form.

Chapter Summaries

In chapter one, I argue firstly that though Edmund Burke and Mary Wollstonecraft both employ medical metaphors in their works to discuss politics, Wollstonecraft breaks from the traditional Hobbesian, metaphorical connection between the body of the individual and the body of the state, by systematically demonstrating the material implications of health and immunity at various levels of political society. Wollstonecraft, like her medical contemporaries William Buchan, James Parkinson, and Thomas Beddoes, advocates for citizens to keep their bodies healthy through traditional regimental prescriptions like frequent exercise, clean eating, and regular bathing, which, as a result, make them more active and engaged political subjects. In the Rights of Woman essay, she makes a direct case for women’s health—characterized by the aforementioned regulations, along with breastfeeding and affectionate child care—as the ideal model for a healthy state. It is only through healthy and virtuous living, she argues,
that individuals can maintain their immunity against the kind of submissive, spectatorial politics to which Burke adheres in his *Reflections on the Revolution in France*. Later in the chapter, I argue that Wollstonecraft’s two novels, *Mary* (1787) and *The Wrongs of Woman, or, Maria* (1796) expand the links that the author makes in her political essays between the health of the incorporated political body and that of the individual body. These fictional experiments engage a kind of formal immunity by using elements from sentimental fiction to present tales which challenge the dominant ideologies (like feminine submissiveness) that the traditional sentimental novel upholds. *Mary* and *Maria* also show how the body (but especially the woman’s body) is a nerve-center for the social and political forces that seek to control it.

Chapter two continues this line of inquiry by examining how William Wordsworth’s fear of affective and political excess in his 1818 addresses to the freeholders of Westmoreland, and his insistence on the safeguarding of “private obligation,” are directly related to his attempt to define a literary form of medico-political immunity in earlier works, such as the “Preface” to the *Lyrical Ballads* and the *Prelude*. Wordsworth’s poetry and poetics figure immunity as the process by which potentially radical, political affects are controlled through the development, and maintenance, of individual sovereignty. Called “sovereignty within” in the 1805 *Prelude*, Wordsworth’s ideal political model is positioned between absolute, monarchical sovereignty and the democratic “swarm” that he witnesses in France after the outbreak of the revolution. Importantly, according to the earlier “Preface,” individual sovereignty can be maintained, and political excess prevented, through the act of reading poetry. In particular, the metrical regularity found in his “new class of Poetry” helps to prevent violent eruptions of “powerful feelings” by controlling the scale at which an affective exchange takes place between the reader’s body and the poetic text. Ultimately, Wordsworth’s political poetics
highlights how imaginative literature is the venue through which modern, medico-political subjectivity is defined.

In chapter three, I contend that Jane Austen’s last novel, *Sanditon*, exposes how medical surveillance and clinical practice causes a parallel shift in subjectivity, echoed in the ways in which Austen defines character in her novel. In both form and content, *Sanditon* imagines the body as a site of exploitation for both institutionalized and fringe medicine. Figured increasingly as a source of profit, the body becomes the mode by which national stability is maintained. The health of bodies, as both properties of medicine and of the state, becomes a paramount concern. By setting her story in a typical English spa town, Austen is able to satirize the medical marketplace, and in doing so, destabilizes medical authority. Austen “doctors” her developing characters. The novel becomes a model for how contemporary medicine manipulates subjectivity by amassing individual patients into a population that can be surveyed by the state.

Finally, in chapter four, I assert that Mary Shelley’s 1826 novel, *The Last Man*, challenges the conservative impetus of medico-political immunity as it is defined in earlier texts by exposing the implicit inoculation that underwrites personhood. In this later work, Shelley imagines a plague that decimates humanity, except for the eponymous “last man,” the novel’s protagonist, Lionel Verney. Verney’s failure to develop the medico-political immunity needed to become a fully-formed person—facilitated by his persistent animality—allows him to survive a plague that only targets human beings. Verney’s regimen of reading and writing propels him to “play human” in the “magnificent drama” of personhood, but it simultaneously reveals the very fiction—the development of personae—that allows humans to abstract themselves from their animal bodies. By challenging the very terms, like *human* and *person*, that earlier texts take for granted, Shelley’s novel explores what politics might look like after the demise of the human.
Borrowing from Esposito, I call this new political register “impersonality” and I explore the radical potentiality that inheres in its re-imagination of political subjectivity.
Chapter 1
“A Healthy State”: Mary Wollstonecraft’s Medico-Politics

In A Vindication of the Rights of Men, Mary Wollstonecraft takes aim at Burke’s Reflections on the Revolution in France, a text that attempts to preempt political disease by pointing out the deleterious invasiveness of the democratic ideals fostered by the French Revolution. Burke blatantly comments on the “dreadful contagion” of the Revolution’s “principles,” a sentiment shared by a number of commentators during the pamphlet wars of the 1790s. Though significantly different in their opinions on the most desirable form of government, both writers employ medical discourse to discuss, and respond to, important political questions raised by the French Revolution: What constitutes a healthy state? How do healthy states function? What role does the individual occupy in the maintenance of robust constitutions or the overthrow of diseased ones? The links between pathology and politics established by Burke in his Reflections are continued in Wollstonecraft’s texts; both writers make explicit connections among health, medicine, and politics. Their debate signals a concern for political health, a state that must be maintained by avoiding social diseases of various kinds. However, they differ specifically in their treatment of the means by which state health is fostered and sustained. While Burke views state health as possible only by barring the inoculation of foreign political ideas into the British political body, Wollstonecraft maintains that health must be nurtured from within the body politic; oppression should be corrected by internal reform. Importantly, what begins as an analogy between medical and political terms, inaugurated in the modern period by Hobbes’s formulation of the “body politic” in Leviathan, ceases to function on a strictly metaphorical level. Burke’s Reflections interweaves analogical and literal versions of concepts like health, contagion, and
organic growth, while Wollstonecraft breaks almost completely with a purely analogical connection between the body of the individual and the body of the state, by emphasizing the material implications of health at various levels of political society. In what might be properly termed her “medico-politics,” Wollstonecraft outlines the simultaneously medical and political behaviors which combine to form and maintain the components of “a healthy state.”

A central concern for both writers is the process by which states expel and/or exclude injurious elements from their systems. Burke envisions a form of immunity, or protection, that strives to thwart revolutionary infection by protecting the British body politic from external contagion. He advocates a sort of poultice, or surface remedy, which in Wollstonecraft’s view, ultimately defies its intended effects by ignoring the body politic’s internal infections. Wollstonecraft argues that Burke’s focus on external sources of political contagion (i.e., French principles), elides the internal problems that plague England. As Tom Furniss notes in *Edmund Burke’s Aesthetic Ideology*, “Burke seeks to immunize England by preventing the importation of radical ideas,” which he fears will damage English political standards inherited from the Glorious Revolution. As previous commentators make clear, however, Burke’s attempts at ideological quarantine remain troubled because “the claim for a purely external threat […] proves elusive.” When he targets the French-influenced radicalism of Richard Price in the early sections of the *Reflections*, Burke reveals that the revolutionary threat he so fears may have already been partially absorbed into the English body politic. In response to Burke, Wollstonecraft proffers her own version of immunity, which locates the agents of disease within the state itself. She prescribes a series of regimental reforms which aim to improve the health of a state already afflicted by a number of ills, the worst of which includes an almost complete exclusion of one-half of the population from public positions.
of any kind. In her essays, Wollstonecraft insists that a surface remedy, like quarantining, is ineffectual because the core of the body politic is already diseased, and advocates for a kind of immunity that emphasizes individual agency in the form of self-controlled health regimen, echoing the recommendations of her medical contemporaries. As I will explore below, Wollstonecraft figures self-guided immunity as the ideal vehicle for political reform. In doing so, she reconfigures Burke’s biomedical metaphors into literal aspects of sociopolitical regimen.

While previous studies have examined how specific medical concepts and theoretical paradigms have influenced Wollstonecraft’s work, they have largely ignored her own contributions to the ongoing discourse between medical and political writers about preventative medicine in the form of regimen, immunity, and general health education. No effort has been made to consider Wollstonecraft’s medical prescriptions as more than simply metaphors. Furthermore, few articles have considered the political implications of medicine and its relation to the British response to the French Revolution. Kimyio Ogawa has skillfully traced Wollstonecraft’s use of body-political metaphors in, and the influence of Brunonian medicine on, *An Historical and Moral View of the Origin and Progress of the French Revolution* (1796). She specifically identifies “the use of medical intervention [...] in political writings” and explores how various aspects of John Brown’s understanding of healthy stimuli management may have contributed to Wollstonecraft’s conception of the balanced, sensible, body politic. James Robert Allard, in *Romanticism, Medicine, and the Poet’s Body*, briefly highlights Wollstonecraft’s use of “medical metaphor[s]” in her responses to Burke and the Revolution. Though his interest is primarily in John Thelwall’s “radical[ly] material” conceptions of the “body politic,” he notes that “Burke and Wollstonecraft both deploy medical terminology in their treatments of the Revolution,” however, “they differ most [...] in their treatment of what
Michael Scrivener calls the figure of the ‘political physician’: Burke demands active intervention—either an explicit refusal or a strict quarantine, both of which require activity on the part of the British government and people—to preserve the health of the body politic, while Wollstonecraft emphasizes its self-regulating potential. Allard, like Ogawa, limits his analysis to Wollstonecraft’s *Historical and Moral View*. Lexey Bartlett, writing on the persistent use of medical discourse in *A Vindication of the Rights of Woman*, takes a more theoretical approach to Wollstonecraft’s metaphors. She makes the case for reading the second *Vindication* through Foucault’s *Birth of the Clinic*, in order to track Wollstonecraft’s “pathological conceptions of women” and “femininity as disease,” as examples of a shift in medical perception from strict nosology to clinical observation. The aim of this chapter is to situate Wollstonecraft within the medico-political milieu of the late eighteenth century and to illustrate how her use of medicine, and specifically a form of preventative immunity, is not metaphorical, but a literal component of political change. While she does employ medical metaphors in her prose, she remains adamant that only healthy bodies, immune to diseases and vices of all sorts, can be agents of political change. As a result, her political essays and novels can, and should, be read as medico-political advice texts, on par with treatises published by popular and canonical medical practitioners, not as simply receptacles for vernacular medical ideas. Although Wollstonecraft is clearly influenced by contemporary medical knowledge, her insistence on including regimen and other healthy practices directly into her political project signals her entrenchment in a cultural milieu that viewed medicine and politics as inseparable.

Eighteenth-century medical writers rely primarily on the Hippocratic theories of health and sickness that had dominated medical opinion throughout the early modern period. “For most people, lay and learned alike,” Mary Lindemann contends, “health
rested in the proper balance” of humors, while disease constituted “a general state of
disequilibrium that the environment could affect or influence.”

Roy Porter corroborates this view, arguing that prior to the solidification of “cell science, pathology, and the germ theory of disease,” illnesses were still “explicated in terms of the scientifically moribund but stubbornly resilient holistic humoral tradition.”

The main difference, Lindemann argues, between the “new Hippocratism” of the eighteenth century and the Hippocratic/Galenic traditions that precede it, is that “many people were persuaded that disease could be avoided, even if it could not be cured. This faith in an ability to manipulate the environment was new.”

In order to maintain the health of their patients, medical practitioners relied more heavily, especially since the mid-seventeenth century, on preventative techniques in the form of regimen, which stressed moderation in all of the “non-naturals,” daily practices consisting of eating, drinking, sleep, and exercise. The “strategy of constitutional ‘hardening’” via regimen, “enjoyed an enduring vogue [in the eighteenth century] as the best way of ‘immunizing’ the body against disease.”

Porter refers to the emerging emphasis on preventative medicine, inaugurated earlier in the century by the works of George Cheyne, and which became the primary way to establish immunity from disease. Though largely known for his work on “the English malady,” Cheyne also published works, in both 1724 and 1740, which sought to educate readers about daily medical practices that could prevent the eruption of common medical conditions. Cheyne advocates a clean diet, moderate exercise, and spiritual devotion as essential to regulating individual health.

Ginnie Smith convincingly argues that the publication of health advice texts increased exponentially in the mid- to late-eighteenth century. These texts reflect the trends of regimental, preventative medicine advocated by Cheyne and others earlier in the period. They often include introductory sections which both define health and
expostulate upon the responsibilities of individuals and physicians to maintain the somatic and extra-somatic balances that guarantee its continuation, as well as immunity, that is, protection, from disease. An unhealthy body, they imply, made weak by intemperance and immoderate habits, risks becoming a host to a variety of acute and chronic illnesses. Thomas Garnett, in *A Lecture on the Preservation of Health* (1797), defines health as “the easy and pleasant exercise of all the functions of the body and mind,” while disease “consists in the uneasy and disproportioned exercise of all, or some, of the functions.”

Health, as a positive appellation, counters the destructive, fragmentary impulse of disease. William Cullen’s studies of pathology, stemming from the 1770s, maintain a definition of health similar to Garnett’s, showing the persistence of certain medical viewpoints through the end of the century: “a disease,” Cullen proclaims, “is that condition of the human body where it is rendered unfit to exercise the actions proper to it exactly according to the Rule or Standard of Health.”

According to Cullen, health consists primarily of disease prevention and the identification of “some defect in the constitution.” Cullen’s insistence on prevention is shared by both Burke and Wollstonecraft in their dueling conceptions of immunity; however, Wollstonecraft alone identifies proper immunity as the expulsion of “defect[s]” which are internal to “the constitution.”

Unlike their predecessors, who believed that physicians had little control over wider social and environmental conditions, eighteenth-century medical practitioners strove to alter human life by examining and treating, not only individuals, but populations, as well as the interactions between humans and their surroundings. Cheyne’s regimental prescriptions, with their insistence on regulating the non-naturals, also aim to naturally protect the body from social vices. Wollstonecraft explores this idea in her 1787 novel, *Mary*, a text which, like the essays of the 1790s, views medicine and...
politics as intimately related. Though I will explore the novels in more detail below, it is essential to note their similarities to the essays up front, since the medico-politics of the essays clearly have their roots in Wollstonecraft’s earlier works. Edward, Mary’s father, “hunted in the morning, and after eating an immoderate dinner, generally fell asleep: this reasonable rest enabled him to digest the cumbersome load.” Edward’s heavy diet clearly defies Wollstonecraft’s primary prescription for healthy eating in the *Rights of Woman*, that one should avoid the “gluttony” that “luxury has introduced” into the lifestyles of the middle- and upper-classes, a precept that I will explore in more detail below. Medical writers from George Cheyne to William Buchan agree that dietary choices can alter human health for good and for ill. “Diet alone,” Cheyne asserts in *An Essay on Regimen* (1740), “is the sole universal remedy” for medical complaints. The importance of diet to individual and collective health should not be underestimated since, “the slave of appetite,” Buchan writes in *Domestic Medicine*, “will ever be the disgrace of human nature.” The key to maintaining a healthy diet, he avers, is to “study simplicity. Nature delights in the most plain and simple food, [yet...] man alone riots at large, and ransacks the whole creation in quest of luxuries, to his own destruction.” The sleep that the “cumbersome load” of Edward’s dinner induces is a direct result of the indolence caused by gluttonous and “refine[d]” eating. The implication is that the substances that one takes into the body have an immediate connection to one’s social behavior. Being indulgent in one area of his life leads Edward to become a “gourmand” in other capacities: “he would then visit some of his pretty tenants; and when he compared their ruddy glow of health with his wife’s countenance, which even rouge could not enliven, it is not necessary to say which a gourmand would give the preference to.” Intemperance can be “destructive in diet,” Thomas Beddoes argues, but the “vices” of over-eating and the “immoderate pursuit of carnal pleasures” almost always “go hand in hand.”
Wollstonecraft’s belief that immoderation in eating, drinking, and other daily activities spreads to sociopolitical vices reflects her acute understanding of contemporary medical opinions on contagion as a dually medical and social problem.

Indeed, the spread of disease was one factor of human-environmental interaction that specifically interested eighteenth-century physicians and reformers. Immunity from highly contagious diseases like smallpox was a major public health concern during the period. As physician John Haygarth insists in his 1785 treatise, *An Inquiry How to Prevent the Smallpox*, “the Small-pox [...] is, beyond all comparison, the most mortal Pestilence that has visited this island for more than a century past.” Smallpox eradication remained a top priority for medical practitioners throughout the eighteenth century, because of the contagion’s especially lethal character. “By 1770,” Lindemann writes, inoculation, a practice made popular by Lady Mary Wortley Montagu in the 1720s, “had become a common, if not quite routine, and still often contested, method of combating smallpox.” But how exactly was contagion understood during this period? As Alan Bewell notes, “from the late seventeenth century until the emergence of modern germ theory in the 1870s, the dominant model of epidemic disease transmission was not contagion [in the modern sense], but contamination. It was believed that people became sick, either directly or indirectly, from the noxious air or *miasmas* produced by the places where they lived.” The contamination model asserts that diseases spread through the air; as a result, attention to diet, exercise, and other habits, could transform a diseased environment into a healthy one. Regimental medicine concluded that environmental control rested primarily with individuals, in occasional consultation with medical practitioners. Importantly, as Lindemann points out, citing the work of Margaret Pelling, words such as *contagion, infection, or immunity*, “were never exclusive to a medical vocabulary. Ideas of contagion, for instance, ‘are inseparable from notions of individual
morality, social responsibility, and collective action.” As a result, the definitions of health and immunity discussed in medical works during this era are multi-faceted medico-political constellations, never strictly concerned with isolated, individual bodies. In fact, many of the medical metaphors employed by Burke and Wollstonecraft reflect the contemporary view that politics, medicine, and other disciplines like botany and economics are interrelated phenomena that necessarily influence each other, often through the use of overlapping terminology.

The Revolutionary crises of the 1790s signaled a greater concern for public welfare that was shared by both medical writers and political commentators, hence the inclusion of medical topics in politically-oriented texts like the *Reflections* and *Rights of Woman* essay and political commentary in medical treatises. Anne McWhir remarks that “the relation between the discourse of disease and metaphors for the spread of political and moral ideology is particularly apparent in the revolution debate of the 1790s.” Porter claims that political physicians of the late eighteenth century, such as Beddoes, William Buchan, and James Parkinson, were united by their belief that “the rights of man included the right to health, the right to its self-management.” Beddoes and Parkinson, in particular, produced cross-generic texts that engaged both politics and medicine during the 1790s. Beddoes, in George Grinnell’s words, is “a figure who represents the porous borders among discourses of well-being, politics and literature.” Beddoes’ 1793 novella, *The History of Isaac Jenkins*, seeks to warn readers about the evils of drunkenness and other vices since “moral obligation,” he claims, is “an infallible criterion for national happiness.” “Vice or Want, or both united,” Beddoes explains, “render the situation of the laborer and his family wretched.” The ensuing destitution caused by poverty and vicious behaviors inevitably leads to disease: “medical practitioners well know […] how much poor families suffer from insufficient food or clothing; and how many
diseases cold and hunger either produce, or, at least render mortal.”⁷² In Beddoes’ view, disease, poverty, and vice sicken the nation, ultimately thwarting its “happiness.” Parkinson, who published An Address to the Hon. Edmund Burke from the Swinish Multitude in 1793, agrees with Beddoes in the belief that “the preservation of health and the removal of disease” promote “domestic happiness.”⁷³ War and its attendant disasters (including famine and disease) necessarily complicate the health and happiness of the nation. James Makittrick Adair’s Essay on Regimen for the Preservation of Health remarks extensively on the author’s theory about the “various causes [that] have concurred to produce our present national degeneracy.” “One very essential cause” for the current unhealthiness of the British state, he argues, “is our national fondness for war.”⁷⁴ Furthermore, our ill judged continental connections [...] were the immediate causes of those depopulating and most ruinous wars, which were undertaken to support and bolster up the precarious, and to us imaginary balance of Europe; but which, after an enormous and unprecedented waste of blood and treasure on our part, seems to be in danger of being entirely subverted and annihilated by the present unprovoked and destructive war [with France].⁷⁵ Other causes for Britain’s ill health are the country’s “rage for colonizing” and “the present mode of parliamentary representation,” which Adair claims is characterized by many “unconstitutional measures,” including irregular elections.⁷⁶ Perhaps most important is Adair’s explicit suggestion that his inclusion of political discussions in an essay on regimen and health is completely sensible, since politics, along with “the manners, morals, and religion of a nation must necessarily have a mutual influence upon each other.”⁷⁷ His initial prescription for improvement is similar to Wollstonecraft’s own:
he urges the reader that “it is by personal reformation alone that national blessings can be obtained.”

For Burke, the French Revolution represents a festering disease that places the healthy constitution of the English at severe risk. He importantly views the health of the state as a unified set of principles revolving around monarchy and heredity. The Revolution thus poses a threat to these established political traditions and Burke’s *Reflections* attempts to preempt the possible spread of revolutionary, “alien” principles to the English population. Allard argues that Burke “characterizes revolution as an unnecessary incursion into the organic body politic.” He cites Burke’s declaration against all forms of revolutionary invasion: “If it be a panacea, we do not want it. We know the consequences of unnecessary physic. If it be a plague; it is such a plague, that the precaution of the most severe quarantine ought to be established against it.” Burke wishes to “keep” either of these threats “at a distance.” His fear of any foreign encroachment extends from his valorization of Britain’s hereditary government: “We wished at the period of the [Glorious] Revolution, and do now wish, to derive all we possess as an inheritance from our forefathers. Upon that body and stock of inheritance we have taken care not to inoculate any cyon alien to the nature of the original plant.” Whether it is viewed as a universal cure, or “panacea,” or destructive “plague,” any inoculation of foreign political principles into the native body, here figured as a doubly botanical and political entity, is undesirable. As Fuson Wang notes, Burke’s invocation of inoculation in this passage “elides two major details” about the process: “(1) botanists graft foreign buds onto plants to bolster resistance to diseases and to increase the health of the ‘body and stock’ of the original plant and (2) by 1790, smallpox inoculation (variolation) had already proven to be a relatively effective deterrent to full-blown infection.” In other words, Burke misconstrues inoculation and thus eschews its
effectiveness as a form of protection. Though he wishes to establish boundaries between the English nation (the “original plant”) and its various others, or “alien[s],” he clearly fears that a dangerous inoculation has already occurred. Burke’s medico-political emphasis on the health of the state certainly reflects, as Martin Wallen notes, a late-eighteenth century “definition of health” which “entails an act of expulsion to establish boundaries [...such that] health remains the freedom from and resistance to disease. Beyond the boundaries disease upholds its constant threat of disrupting the civic order of the political body and the ethical order of the personal identity and body.”

Expulsion, however, implies that the disease has already taken root. Indeed, “Burke’s fear of (England) catching the revolutionary plague is haunted by symptoms (such as [Richard] Price’s sermon) which indicate that the disease might already have taken effect—that his proposed quarantine against ideas crossing the Channel might be wisdom after the event.” Rather than confront this inoculation, Burke’s attempts at quarantining solidify his claim that a reverence for heredity and other political traditions will protect England from external threats.

This form of immunity, however, fails to account for both the French inoculations and the forms of oppression that, according to Wollstonecraft, undermine political health. This is precisely what Wollstonecraft will engage in her critiques of Burke: the “autoimmunitary process,” implicit in Burke’s writing, by which, according to Derrida, “a living being, in quasi-suicidal fashion [...] works to destroy its own protection, to immunize itself against its ‘own’ immunity.” Wollstonecraft belies Burke’s laudatory claims for the preservation of inheritance, citing his “reverence for the rust of antiquity” as supporting “unnatural customs, which ignorance and mistaken self-interest have consolidated.” Furthermore, she re-appropriates Burke’s own medico-botanical figuration of the “original plant” to critique as superficial his arguments about the organic
unity of England’s constitution: “the ivy is beautiful, but, when it insidiously destroys the trunk from which it receives support, who would not grub it up?” A surface-level spread of ivy might captivate the onlooker (much like the regalia of the monarchy), but it obscures and eventually diseases the “trunk” that it covers. Here, Wollstonecraft begins to unfold both her critique of the self-destructive immunological process by which Burke’s system finally destroys itself and a “healthier” version of immunity (one focusing on the self) that literally targets the root of political oppression, buried within the structure that Burke wishes to uphold. Wollstonecraft recognizes that Burkean immunity, forged by the continuation of hereditary right and succession, “the healthy habit of [the English] constitution,” ignores the underlying conditions of the English state and, by doing so, facilitates its own failure.

When the state is plagued by disease, Burke proposes to allow only the “physician[s] of the state,” those “chosen by nature,” to implement the proper remedies. “When things are in a lamentable condition,” he writes, “the nature of the disease is to indicate the remedy to those whom nature has qualified to administer in extremities this critical, ambiguous, bitter potion to a distempered state.” Wollstonecraft locates political disease precisely in this particular method of governance, which denies the importance of individual action in the maintenance of political health. She especially targets the disease of aristocratic extravagance: “Yes, Sir, the strong gained riches, the few have sacrificed the many to their vices; and, to be able to pamper their appetites, and supinely exist without exercising mind or body, they have ceased to be men.” And furthermore, “if there were no other road to wealth or honour,” she avers, than “the right of a man […] to enjoy the acquisitions which his talents and industry have acquired,” then “luxury […] would not then introduce so much idiotism into the noble families, which form one of the pillars of our state: the ground would not lie fallow, nor would undirected activity of mind
spread the contagion of restless idleness, and its concomitant, vice, through the whole mass of society.”\textsuperscript{94} Wollstonecraft’s view of contagion falls in line with both the contamination model about which Bewell writes, and the pervasive view of medical practitioners that a direct correlation exists between physical disease or unhealthiness and societal ill-health, embodied generally by the term vice. In these passages, Wollstonecraft draws conclusions about immoderate living similar to those outlined in her novel, \textit{Mary}. Those who eat poorly, or over-indulge (“pamper their appetites”), and who embrace a sedentary lifestyle “spread” their bad habits throughout society which, in turn, exacerbates the cycle of vice.

There is nothing natural about inherited titles and wealth, according to Wollstonecraft; rather, recalling the sovereign-as- “Artificial Man” of Hobbesian political theory, Wollstonecraft argues that “hereditary property” and “hereditary honors” have “changed” man “into an artificial monster,” made automatically grotesque “by the station in which he was born, and the consequent homage that benumbed his faculties.”\textsuperscript{95} It is the aggrandizement of an organically original “golden age” of sovereignty and monarchy, appropriated by Burke from Hobbes and typified by the social contract, that Wollstonecraft attacks early on in the \textit{Rights of Men} essay. “Are we to seek for the rights of men,” she asks, “in the ages when a few marks were the only penalty imposed for the life of a man, and death for death when the property of the rich was touched? […] Are these the laws that it is natural to love, and sacrilegious to invade? Were the rights of men understood when the law authorized or tolerated murder?”\textsuperscript{96} Wollstonecraft’s polemic takes aim at what she considers a heinously unnatural culture of murder, embodied by an absolute sovereign who decides upon the life and death of his subjects. “There is no end to this implicit submission to authority,” she declares, but “some where it must stop, or we return to barbarism; and the capacity of improvement, which gives us
a natural sceptre on earth, is a cheat [...]. And if it be allowed that many of the precautions, with which any alteration was made, in our government, were prudent, it rather proves its weakness than substantiates an opinion of the soundness of the stamina, or the excellence of the constitution.”97 The problem of blind submission is “implicit” in the political structure, and one among several features of what she regularly terms “vice” or “corruption,” itself a medical term referring to the “disintegration,” “decomposition,” or “putrefaction” of a body.98 Wollstonecraft situates constitutional weakness as an internal dilemma, rather than one caused by external invasion. In the *Rights of Woman*, she calls interior or “covert corruption” a “baneful lurking gangrene,” and fervently asserts that “the indolent puppet of a court first becomes a luxurious monster, or fastidious sensualist, and then makes contagion which his unnatural state spread, the instrument of tyranny.”99 The sensualism of courtiers and aristocrats is a contagion that, once “spread,” becomes enmeshed in the very power structures that might otherwise provide the remedy for its destruction. Hence, Burke’s version of immunological protection, while useful, perhaps, for keeping out unwanted elements, proves unsuccessful at mitigating ills immanent to the body politic. “A surgeon,” Wollstonecraft writes, “would tell you that by skinning over a wound you spread disease through the whole frame; and surely, they indirectly aim at destroying all purity of morals, who poison the very source of virtue, by smearing a sentimental varnish over vice, to hide its natural deformity.”100 “Skinning” refers to both the natural cicatrization of a wound (the overgrowth of a new layer of skin that occurs during the healing process), as well as a specific technique employed by some physicians to help cure the open sores caused by venereal disease. Buchan derides the practice in his *Observations Concerning the Prevention and Cure of Venereal Disease*, explaining that “instead of skinning over the chancre, making the patient believe he is cured, a practice but too common, I generally
endeavor to keep it open, especially when it seems disposed to heal quickly.” Buchan
implies that the skinning over of a wound, though a seemingly natural process, does not
actually cure the disease, but leaves it festering under the skin and within the body. By
invoking “skinning,” Wollstonecraft provides an apt metaphor for the kinds of political
obfuscation that Burke supports; though the wound (“vice”) appears to be healed on the
surface, it continues to harbor diseased elements. Both “skinning” and “smearing” echo
the logic of the ivy from previous passages that diseases the trunk of the tree upon
which it grows, even though it appears beautiful. Simply “smearing” a temporary balm
over the wound leaves the poisonous core unexpurgated, causing an infection to spread
from “the very source” to “the whole frame,” defeating the process of immunity that the
surface-level remedy hopes to precipitate. In both examples, botanical and medical
metaphors are employed to describe how Burke confuses an ineffective surface remedy
for a cure.

True immunity for Wollstonecraft emerges from individual attention to exercise,
proper nourishment, and other healthy habits. Wollstonecraft’s infectious metaphors
become literal when she makes definitive prescriptions for individuals (especially
women) to better their corporeal, intellectual, and spiritual health. Her personal
correspondence reveals that she was attuned to the medical debates of her time and
may have read several of the most popular works on health preservation. She confesses
to “drinking ass’s milk” in a letter from 1786, a remedy recommended by William Buchan
and other prominent physicians in order to regulate the symptoms of melancholy and
hypochondriasis. Later, she describes the cause of her persistent melancholy as “the
thick blood lagging in the veins,” reflecting contemporary humoral theories of depression
proffered by Cullen. At other times, Wollstonecraft advises friends and family “to bathe
in a cold bath” and take “three does of salt” as a means to quell common ailments.
Apart from relying on established medical opinion, Wollstonecraft often employs her own practices. When her infant Fanny is threatened by smallpox, a disease traditionally deadly to children, she remains “determined to follow the suggestions of my own reason, and saved her much pain, probably her life [...] by putting her twice a day into a warm bath.”

Because inoculation was not available to the writer and her child during their journey abroad, Wollstonecraft, in much the same way that she advocates self-care in the *Vindications*, takes personal responsibility for her well-being and for the health of her child.

Improvements at the level of the individual body do not simply mimic enhancements at the level of the state or vice versa. Rather, argues Wollstonecraft, it is only by an increased attention to physical health that an individual can contribute to the progressive betterment of political society as a whole. Individuals are entitled to govern their own health and, as a result, initiate and sustain the body politic’s “self-regulating potential,” as Allard claims above. Wollstonecraft fears that Burke’s viewpoint relinquishes the health of the entire body politic by indulging the vices of the tyrannical rich: “health can only be secured by temperance; but is it easy to persuade a man to live on plain food even to recover his health, who has been accustomed to fare sumptuously every day?”

Much like her contemporaries Garnett, Buchan, Parkinson, and Adair, Wollstonecraft views health as a balanced state of corporeal, intellectual, and political harmony, maintained by virtuous behavior (including “chastity”), bodily and mental exercise, moderate eating habits, “habitual cleanliness,” fellow-feeling, and the use of one’s reason. She discusses these healthy habits at length in *A Vindication of the Rights of Woman*. Indeed, rather than simply co-opt medical language to explain her political positions, Wollstonecraft literalizes the body politic by offering her readers a series of prescriptions to improve their health and, subsequently, the health of the state.
First, “in order to preserve health,” she professes, “I should earnestly recommend frequent ablutions,” a nonstandard practice in the late eighteenth century. Secondly, she explains, “luxury has introduced a refinement in eating, that destroys the constitution; and a degree of gluttony which is so beastly” that it causes severe “oppression” and “indigestion.” As a precaution against gastronomic indulgence and the “indolence” and bodily discomfort that it produces, she advises the regular consumption of unrefined “bread,” “the common food of life,” which “supports the constitution and preserves health.” And finally, she warns against “the whole tribe of magnetizers” who “pretend to work a [medical miracle],” and suggests that her readers should “know” something about “the construction of the human frame”:

it is proper that you should be told what every child ought to know, that when its [the body's] admirable economy has been disturbed by intemperance or indolence, I speak not of violent disorders, but of chronical diseases, it must be brought into a healthy state again, by slow degrees, and if the functions of life have not been materially injured, regimen, another word for temperance, air, exercise, and a few medicines, prescribed by persons who have studied the human body, are the only human means, yet discovered, of recovering that inestimable blessing health, that will bear investigation.

In this last prescription, Wollstonecraft reinforces the extremely literal and material implications of medical knowledge and its uses. She invokes accepted medical terminology like “regimen,” and perceives health as the proper regulation of the non-naturals. Furthermore, she adopts the view, shared by medical writers, that every literate person should do her best to acquire even a basic working knowledge of preventative medical practices that reduce the suffering and “indolence” accompanied by chronic illnesses.
Wollstonecraft is very much concerned with activities that “weaken [one’s] constitution,” and by extension, the whole social body. Of particular importance is the “[un]healthy state” of women’s lives and their exclusion from the public sphere. “I wish,” she writes, “to persuade women to endeavor to acquire strength, both of body and mind.” She speaks deplorably of the current fashion for “sickly delicacy,” “weak constitutions,” and what she calls the “sovereignty of beauty” among females. False notions of beauty and the “sedentary life” that so-called beautiful women “are condemned to live, [...] weakens the muscles,” “relaxes the nerves,” and destroys “their powers of digestion.” Instead, Wollstonecraft values bodily and mental strength over the excessive “helplessness” that renders women incapable of “discharg[ing] their duties” both within the home and outside of it. However, as the former prescriptions imply, stamina can only be gained through exercise of various kinds. “I believe,” she laments, “that the human form must have been far more beautiful than it is at present,” but now, “our luxurious state of society” causes “extreme indolence.” “Exercise and cleanliness,” she continues,

appear to be not only the surest means of preserving health, but of promoting beauty, the physical causes only considered; yet, this is not sufficient, moral ones must concur [...] To render the person perfect, physical and moral beauty ought to be attained at the same time; each lending and receiving force by the combination.

Here, Wollstonecraft’s conception of health shares much in common with Garnett’s description of a healthy being whose “body and mind” function harmoniously and with Cullen’s assertion that “all organs” should “be considered mutually as causes and effects.” The reciprocal cycle Cullen describes is echoed by the “lending and receiving force” of physicality and morality in Wollstonecraft’s work.
The *Rights of Woman* essay, then, makes a distinctive leap from bodily health to moral health, and finally, to political health. “The woman,” she insists, “who strengthens her body and exercises her mind will, by managing her family and practicing various virtues, become the friend, and not the humble dependent of her husband” which “must be, the course of nature [...]. And this constitution seems perfectly to harmonize with the system of government which prevails in the moral world.” Friendship between healthy bodies of both genders becomes the model for Wollstonecraft’s ideal democratic state, a political structure immune from vice. Here, again, she wishes to strike at the diseased, vicious core of society (i.e., “the family”) in order to promote a healthier way of life. Women, by “changing their characters” and becoming equals in their friendships with men, will “be allowed to be free in a physical, moral, and civil sense.” Genuine virtue, the exact opposite of vice, consists in healthy living, an idea shared by physicians of the late-eighteenth century. Rosalie Stott explains that Cullen’s lectures and writings on health strive towards “the integration of pathology and human behavior in a manner most suited to promote virtue.” It follows that when Cullen “demonstrated as medical ‘facts’ that idea that disease resulted in most cases from excessive, usually self-indulgent, behavior, i.e., vice, which it was within the scope of the individual to control, [he] made implicit the notion that healthy behavior was virtuous behavior.” Seen in the context of health and medico-politics, Wollstonecraft’s proposition of a “revolution in female manners” that encourages women “to labor by reforming themselves,” and thus “reform the world,” offers a case in point for a kind of immunity that functions within each individual body, sustained by good health, and that insures the longevity, security, and happiness of the incorporated political body. “A truly benevolent legislator,” she notes, “always endeavors to make it the interest of each individual to be virtuous; and thus private virtue becoming the cement of public happiness, an orderly whole is consolidated
by the tendency of all parts toward a common centre.”123 Her insistence on the
importance of individual healthiness, engendered by healthy habits, counters Burke’s
privileging of those “physicians of the state” who administer remedies from above the
“swinish multitude.” The maintenance of individual health by each singular agent is a
democratizing maneuver that, in some ways, counters medical professionalization and
forms of medical advice that come from outside of the “mass of society.” Yet, she leaves
open the possibility that a more egalitarian model for medical knowledge might be
attained by allowing women to participate directly in medico-politics.

Wollstonecraft argues repeatedly in the second *Vindication* that those persons
supposedly “chosen by nature” to treat the ills of both society and its members are
almost always men, taking aim at Burke’s limited conception of state physicians. It is
significant that Wollstonecraft’s first occupational recommendation for women is to “study
the art of healing” so as to become “physicians as well as nurses.”124 “How many
women,” she writes, “thus waste life away the prey of discontent, who might have
practiced as physicians, regulated a farm, managed a shop, and stood erect, supported
by their own industry.”125 She also advises her readers that women should be allowed to
occupy positions as “nurses” of the state: “they might, also, study politics, and settle their
benevolence on the broadest basis.”126 As opposed to Burke’s “physician[s] of state,”
who administer remedies from a position detached from the multitude, the role of women
physicians functions from within the body politic. This prescription serves to expand the
caregiver role already assigned to women, such that maternity and “benevolence
become dually public and private enterprises. “The first duty” of women, she asserts, “is
to themselves as rational beings, and the next, in point of importance, as citizens, is that
[...] of a mother.”127 A citizen-mother both literally ensures the life of the state by giving
birth to present and future citizens, and figuratively serves as the caretaker for a state in
distress. She nurtures healthy bodies through various stages of life and fosters the healthy lifestyle that, in turn, guarantees the continuation of a progressive body politic. Mercy Cannon, drawing on William Buchan’s popular medical tract, *Domestic Medicine* (1769), calls this role “hygienic motherhood,” in which the mother “must maintain a physical environment conducive to children’s health, which includes attending to her own body as a safe space for infant development.” Buchan’s own sentiments on the matter are strongly echoed by Wollstonecraft’s theories on education and maternal responsibility: “Did mothers,” he points out, reflect on their own importance, and lay it to heart, they would embrace every opportunity of informing themselves of the duties which they owe to their offspring. It is their province, not only to form the body, but also to give the mind its most early bias. They have it very much in their power to make men healthy or valetudinary, useful in life, or the pests of society.

In this passage, and elsewhere in his text, argues Cannon, “Buchan aims to promote hygiene, in all its physical and moral dimensions, within the British family and nation.” The birthing and rearing of productive individuals become a political matter for both Buchan and Wollstonecraft. The “forming” of the body, cited by Buchan as an essential task of motherhood, entails an acute awareness, and fostering, of constitutional health so as to avoid the creation of societal “pests.” Because of the importance of active, virtuous motherhood to Wollstonecraft’s plan for political reform, women’s health—and specifically, maternal health—serves as the foundational example for a healthy body politic.

Wollstonecraft’s reference to midwifery as one of the few semi-professional vocations for women is especially notable, in light of her views on motherhood and its political implications. She fears that “the word midwife, in our dictionaries, will soon give
place accoucheur, and one proof of the former delicacy of the sex be effaced from the language.”\textsuperscript{131} Wollstonecraft is right to fear the replacement of female midwives by the “man-midwife” to whom she refers. The decades leading up to and following the publication of both \textit{Vindications} constitute the first major epoch of medical professionalization in Europe. The proliferation of published texts on pregnancy and delivery, written primarily by men, escalated at this time, such that “the predominantly oral transmission of midwifery knowledge between women was eclipsed by the burgeoning written discourse of male practitioners seeking to establish midwifery as a legitimate medical specialty.”\textsuperscript{132} Furthermore, “the increasing presence of men in an occupation formerly dominated by women,” Jeanette Herle-Fanning asserts, “recasts what was a vaguely defined craft as a nascent profession.”\textsuperscript{133} That the presence of men in medical roles formerly occupied by women threatened to push experienced female midwives out of their domain certainly would not have escaped Wollstonecraft’s notice. Indeed, the specific role of the midwife in both the private scene of delivery and in her public function as obstetric sage is necessarily one of paramount importance. She facilitates the birth process as a councilor and/or legislator who liaises between the mother and the wider community. Lisa Forman Cody writes that midwives “acted for the good of the public weal,” or as man-midwife John Leake asserts, in “the general interest of mankind.”\textsuperscript{134} Hence, the midwife not only represents an essential professional occupation for women who might otherwise have little public experience, but a chief medico-political consultant who, in many ways, determines the health of citizen-mothers and their nascent offspring.

Though she supports midwifery as an important mainstay of respectable female employment, Wollstonecraft does not, however, express the same enthusiasm for all professional positions held by women. She is particularly opposed to wet-nurses, but
she places the blame for this hated occupation with the mothers and wives who validate
the practice by sending their children out of the home to be nursed: “The wife, in the
present state of things, who [...] neither suckles nor educates her children, scarcely
deserves the name of a wife, and has no right to that of a citizen.”¹³⁵ Wollstonecraft’s
emphasis on the necessity of forming this bond between mother and child is
emphatically linked to her views on the health and vitality of the state. Women, made
feeble by the “weakness of body and mind, which men have endeavoured, impelled by
various motives, to perpetuate,” are “prevent[ed from...] discharging the peculiar duty of
their sex” since this bodily frailty does “not permit them to suckle their children.”¹³⁶
Moreover, “it is vain to expect the present race of weak mothers [...] to take that
reasonable care of a child’s body, which is necessary to lay the foundation of a good
constitution.”¹³⁷ Only by preserving her own health and stamina through regular physical
and intellectual exercise and natural diet, the features of Wollstonecraft’s prescribed
regimen, can the citizen-mother bear the responsibilities of domestic governance. It is
crucial to understand, notes Julie Kipp in *Romanticism and the Body Politic*, that
Wollstonecraft does not concede that women’s bodies need policing [...].
Indeed, she rejects this argument outright—the surveillance and containment of women
being a critical part of the problematic she describes [...]. Rather, she insists that women
need to legislate their own behavioral patterns, via various material practices and the
acceptance of certain duties that can be learned—breastfeeding being one of these.¹³⁸
Again, the focus of Wollstonecraft’s prescriptions for healthy states is on the ability of
each individual body to regulate her own mental and corporeal processes, and her views
on citizen-motherhood offer a case in point for this type of personal doctoring, features of
which the citizen-mother instills in her children. Immunity from vice is a learned behavior
that must be inculcated in each individual from birth. “The baneful consequences which
flow from inattention to health during infancy, and youth,” Wollstonecraft suggests, “extend further than is supposed—dependence of body naturally produces dependence of mind,” the very form of submission that she critiques in Burke’s political spectators, whose reverence for monarchical customs negates their own potential agency. “Thus,” she asserts, “morality, polluted in the national reservoir, sends off streams of vice to corrupt the constituent parts of the body politic,” causing the “gangrene, which the vices engendered by oppression have produced.”

Wollstonecraft illustrates a cycle by which oppressive laws and regulations meant to deny women various freedoms ultimately restrict them from properly executing their duties as citizen-mothers, a restriction that, in turn, inseminates the vicious, unhealthy habits that literally infect future generations. It is in this seemingly evolutionary propagation of vice within individual and national bodies that Wollstonecraft locates the greatest ill to society; not, as Burke maintains, in some external threat that invades the domestic space. What the two Vindications finally propose is the convergence of medicine and politics around the issue of health, a state that must be sustained in each individual body in order to guarantee its preservation at the collective level.

Wollstonecraft’s two novels, Mary (1787) and The Wrongs of Woman, or, Maria (1796), expand the links that the author makes in her political essays between the health of the incorporated political body and that of the individual body. Though she fervently argues in the Rights of Woman essay that too much exposure to sentimental fiction mars a woman’s ability to live a rational life, Wollstonecraft nonetheless employs the form of the novel to appeal to the affective register of her readers. In fact, the novels recreate various forms of community based upon the sharing of sentiments—in particular, shared ideas about women’s bodies and their place in society. These communities often threaten the prevailing social order; they are, as Janice Peritz notes, “necessarily
various,” “hybrid[s]” that echo the “part sentimental, part gothic [...] generic hybrid[ity]” of their form. This formal hybridity, which I will discuss in more detail below, is what allows Wollstonecraft to reappropriate conventions of sentimentality while openly disdaining the sentimental novel. In *Rights of Woman*, she concludes that when women read too many novels they are “subjected by ignorance to their sensations...which lead them shamefully to neglect the duties of life” such that “frequently in the midst of these sublime refinements they plump into actual vice.” These are the women,” she writes, “who are amused by the reveries of the stupid novelists” who cast scenes of life in purely sentimental terms and refuse to appeal to the understanding. She also worries that “girls have been injured by the perusal of [certain] novels,” a view she explores in an earlier text, the *Thoughts on the Education of Daughters* (1787). *Thoughts* contains an entire chapter on proper reading habits, which emphasizes the dangers of reading “those productions which give a wrong account of the human passions, and the various accidents of life.” Because “gallantry is the only interesting subject to the novelist,” novel-reading is “the one great cause of affectation in young women.” The ultimate danger for Wollstonecraft, and other commentators on the novel, lies in its positing of a fiction into which one becomes so embedded that she (and the subjects of these critiques are almost always female) cannot separate herself from the novelistic world that envelopes her. Dr. Beddoes agrees with Wollstonecraft about the novel’s potential for disruption. His major contribution to the slew of medical advice books written in the late eighteenth and early nineteenth centuries, *Hygeia*, includes a section on healthy reading habits and the dangers that the contagion of sentimentality poses to the overly-eager (female) reader. He claims that novel-reading and the institutions that facilitate this activity have serious physiological consequences: “a variety of prevalent
indispositions...tendency to miscarriage, and even a dropsy of the ovarium, may be
caught from the furniture of the circulating libraries.” Furthermore, Beddoes avows,
circulating library literature...account[s] for a great deal of the sickliness we
find existing in society. The sensations, to which all these melting tales
immediately give rise, and the voluptuous reveries, which they leave behind,
may, without injustice, be regarded, as part of the concealed fountains, from
which the NILE of female unhealthiness derives its origin.

The flood of novels, as Beddoes and other commentators earlier in the period point out,
is terribly unhygienic. Narrative contagion ultimately causes two complimentary
symptoms to appear in/on the body of the reader: a physical listlessness, motivated by
the sedentary nature of private reading and a propensity towards falling into “voluptuous
reveries,” which afflict and subsequently disease the imagination. In a lengthy footnote,
Beddoes provides three “cases” as proof of the perils of sentimental novel-reading, since
“a popular writer on the prevention of diseases would deal unfairly, were he not to
apprize mothers of the possibility of the appetite of puberty being prematurely excited,
and occasioning misconduct.” In one particular case, a young girl, whose sensibility
has become irritated by a “pernicious clandestine habit” that is “carried on more in
solitary chambers and in the darkness of night,” experiences frequent “head-aches” and
“dizziness.” The vicious habit becomes excessive, such that the girl “never went to
bed without practicing it,” that is, “the frequent rubbing of certain parts.” The
strangeness of this case is notable: what Beddoes implies by attaching this footnote to
the previously cited passage about novels and circulating libraries is that the line
between something as seemingly innocent as novel-reading and the much more openly
deplorable habit of female masturbation is remarkably thin. Private reading, like
masturbation, is often “carried on in solitary chambers” and evokes the “rubbing” or
irritation of “certain parts” of the mind and body, a characteristic feature of eighteenth-century theories on cognition and sensation posited by David Hartley and others. Hartley describes the human capacity for sensation, and the association of ideas thus: “some motion must be excited in the medullary substance [i.e., the nerves and spinal cord],” during each sensation and “this motion is determined to be a vibratory one.” The vibration of the nerves, in both reading and physical self-gratification, potentially facilitates a moment of ecstasy akin to temporary madness. By aligning the act of perusing circulating-library literature with the taboo of onanism, Beddoes makes it clear that over-stimulation prompts the imagination to lead the body directly to vice.

Despite her reservations about the sentimental novel’s capacity for shaping healthy and reasonable young minds, Wollstonecraft employs the novel form as a mode of preventative immunity. If modern immunity, according to Roberto Esposito, functions by “introducing within it [the body] a fragment of the same pathogen from which it wants to protect itself,” then Wollstonecraft’s fictional experiments engage a kind of formal immunity by using elements from sentimental fiction to present tales which challenge the dominant ideologies (like feminine submissiveness) that the traditional sentimental novel upholds. She exploits the connections among politics, emotion, and the body that can be found throughout sentimental fiction; in particular, Wollstonecraft employs what Ann Jessie Van Sant calls “sensibility’s physicalizing of psychological response.” Mary and Maria both show how the body (but especially the woman’s body) is a nerve-center for the social and political forces that seek to control it. Hence, Wollstonecraft is especially attuned to the body’s well-being; as she argues in the essays, a strong, healthy body, along with a healthy mind, are the two most important tools for combatting political oppression. I mentioned above that Wollstonecraft uses the novel form as a means to extend and expand the arguments about individual and collective health that she
explores in her political essays. As a result, the novels are, like other medical advice books of the period, preventative texts which prescribe and endorse a range of healthy activities and habits from regular physical exercise to breast-feeding. She makes her intentions clear in the advertisement appended to the opening pages of *Mary*: “In delineating the Heroine of this Fiction, the Author attempts to develop a character different from those generally portrayed. This woman is neither a Clarissa, a Lady G—-, nor a Sophie,” all characters from popular sentimental novels by Samuel Richardson and Jean-Jacques Rousseau. As paragons of female dependence, these characters do not “ramble in” a “paradise […] of their own creating,” so that when “the prospect […] grows insipid, and not varied by a vivifying principle, fades and dies.” Wollstonecraft’s heroine, on the other hand, possesses “the mind of a woman, who has thinking powers.” The “Author’s Preface” to *Maria* makes similar claims, arguing that the author’s “sketches are not the abortion of a distempered fancy,” but rather, “the sentiments I have embodied.” Importantly, Wollstonecraft stresses the corporeal vestiges of “the misery and oppression, peculiar to women,” which contribute to the overall weakness of women in society as well as to the distortions inherent in the “species” of novels which promulgate the “Wrongs of Woman.” These “wrongs,” critiqued in her novels, are registered on and in the (un)healthy bodies of both men and women. The contagiousness of oppression, however, can be corrected and prevented by inoculating the body with virtuous principles (ostensibly gleaned from subsuming, in a sort of self-infective way, the political potentialities enumerated in the novels) and by following the regimental health advice that Wollstonecraft offers her readers. The characters whom Wollstonecraft constructs model both healthy and unhealthy behaviors. In both novels, the body functions as a site for medico-political potential, despite the reservations towards physicality expressed by the protagonists and the author herself.
The ultimate danger of utilizing aspects of sentimentality (tears, blushes, throbbing hearts, and other physical markers of the sentimentalized body) in order to undermine its explicit claims is that the sentimental pathogens will auto-immunize the novels in the same way that Burke’s sentimental flourishes undermine his arguments in the *Reflections*. Claudia Johnson argues that “*Mary* [...] ridicule[s] sentimental conventions in one place only to recuperate them in another,” but that these formal ruptures do not necessarily constitute a complete “capitulation to the patriarchal structures which underwrite the romantic plot.” Syndy Conger likewise argues that Wollstonecraft’s use of the tropes of sensibility are essential to her political “agenda.” Women, according to Wollstonecraft, “should not abandon [...] sensibility but rather save it for its capacity to emancipate” them. Though I agree with the aforementioned critics, their analyses pay little attention to the medical perspective that is essential to Wollstonecraft’s politics, largely because they focus on the complex constellations of gender and politics that *Mary* and *Maria* highlight and interrogate in form and content. It is clear that Wollstonecraft, like Beddoes, understands that novels produce material consequences and that sensibility is both a mental and physical condition that needs to be regulated by a healthy regimen. By choosing to compose fictions, Wollstonecraft acknowledges the infectiveness of novel-reading and the efficacy of fiction as an agent for political reform. Terrence Hoagwood’s claims about the fictions of Mary Hays could sufficiently be applied to Wollstonecraft’s novels as well: “Part of [their] accomplishment,” he writes, consists in their “figuration, in complex narrative form, of theoretical issues from the philosophy of British radicalism.” Furthermore, “Wollstonecraft’s arguments contend not just for an individual woman’s freedom but rather for total reformation in the social order,” which “includes and determines education, mentality, personal liberty, and political oppression.” I would add health to this list, since these issues, in themselves,
cannot be determined without the existence of healthy (and sometimes unhealthy) bodies. Wollstonecraft remains acutely aware of this association in her works and, as such, positions health as the core of political reformation.

The opening paragraphs of *Mary* immediately set up the binary between healthiness and unhealthiness that informs Wollstonecraft’s political agenda throughout the novel. Mary’s parents, Eliza and Edward “lived in the usual fashionable style,” while residing in London, a lifestyle tainted by the dually biblical and societal vices of gluttony and adultery. I already mentioned Edward’s *gourmanderie* at the beginning of the chapter, but it is notable that his admiration for the healthy peasant women on his estate is directly related to his wife’s own ill-health. How could Eliza’s “sickly, die-away languor” be compared to “their vulgar dance of spirits?” Importantly, intemperance is not an isolated behavior, but instead spreads through the family and, by extension, society such that “the innocent too often feel the direful effects of it.” If the harmonious family unit is the ideal political structure for Wollstonecraft, then its breakdown due to various forms of intemperance signals a larger disease in politics as a whole. Mary’s mother Eliza is reduced to “a mere nothing” by the contracting burdens of Edward’s unhealthy lifestyle and her own sickliness.

Eliza attempts to distance herself from her own suffering by perusing “those most delightful substitutes for bodily dissipation, novels,” which only worsen her condition by implanting false ideals of beauty and virtue into “a till then insensible heart.” Eliza reads “all the sentimental novels [...] and, had she thought while she read, her mind would have been contaminated.” Here, Wollstonecraft points out how sentimentality functions as a kind of contagion that “contaminate[s]” the reader; this is a notable example of how the novel’s formal immunity works. Elements from the disease of sentimentality are injected into *Mary* as a safeguard against the oppressive gender and
body politics of conventional sentimental fiction. The birth of a “feeble” son renders Eliza maternally incompetent, a condition exacerbated by “want of exercise” and “a consumption.” Mary, born soon after, becomes immediately affected, or perhaps infected, by her mother’s illness and complacency. Eliza’s shaky “health” does not always “permit” her to see to Mary’s education such that the young heroine is “left to the operations of her own mind.” Eliza’s maternal incompetence, a result of bodily and mental disease, ultimately cancels her political agency. Eliza is both a victim and perpetrator of the cycle of unhealthiness that undergirds Wollstonecraft’s later critiques of society in the Rights of Woman. She simultaneously denies and is denied her right to be a citizen by choosing to enact the unhealthy behaviors (novel-reading, indolence, and a refusal to suckle her own children) that the equally unhealthy state of middle-class society essentially authorizes. Eliza’s circumstances are a fictional counterpoint to the correlation between individual and collective health highlighted in Wollstonecraft’s political prose: “the baneful consequences which flow from inattention to health,” she writes in the second Vindication, “extend further than is supposed,” infecting society at large, and then re-infecting other individuals by proxy. Mary’s function in the novel is to somehow disrupt the infective cycle of sociopolitical disease that plagues her mother and father by paying specific attention to the health and wellness of herself and others. As a result, Mary’s story, in the form of a novel, also works to counter the narrative expectations of its readers by rearranging elements of sentimentality into unique constellations. The formal strangeness of the novel (a trait shared by Maria) materializes those sentimental disjunctures. The episodic structure of the narrative and the moments of authorial intervention help to regulate the immunological inclusion of sentimental elements into the body of the novel. The narrative’s frequent starts and stops, indicated
by the extreme brevity of some chapters (Chapter X is only one example), force the reader to engage in the kind of thinking that Eliza’s readerly indulgences inhibit.

Even from an early age, Mary concerns herself with the well-being of others. “Well-being,” here, signifies a range of behaviors, activities, and lifestyle choices, some involving the body, others involving both mind and body. Even her mother’s “sickness called forth all of Mary’s tenderness,” but it is a subtly gothic turn of events that encourages Mary to essentially forfeit her selfhood in favor of an almost absolute benevolence towards others.168 “A little girl who attended the nursery,” Wollstonecraft explains,

fell sick. Mary paid her great attention. Contrary to her wish, she was sent out of the house to her mother, a poor woman, whom necessity obliged to leave her sick child while she earned her daily bread. The poor wretch, in a fit of delirium, stabbed herself, and Mary saw the dead body, and heard the dismal account; and so strongly did it impress her imagination, that every night of her life the bleeding corpse presented itself to her when she first began to slumber. Tortured by it, she at last made a vow, that if she was ever mistress of a family she would herself watch over every part of it.169

Importantly, Mary’s decision hinges upon an illness; a medical concern quickly transforms into an overtly political one. Indeed, the fits, fevers, and deaths which drive the novel reassert the gothic core of unhealthiness that essentially underwrites healthy normativity. Mary chooses not to embrace the indolence and self-indulgence of her mother’s lifestyle, though in the end Mary’s agency is negated by her nearly total immersion in the sufferings of others, which follows the same logic as the cycle to which her mother is a willing victim. Through self-discipline, “the most rigid economy,” Mary “had such power over her appetites and whims,” and “she conquered them so entirely,
that when her understanding or affections had an object, she almost forgot she had a body which required nourishment.”170 The practice of self-command momentarily allows her to absent herself from the very body which ties her to the continuum of decay and regeneration that chronic illnesses expose. Mary ultimately falls into the same condition as her mother (ill-health), though she achieves this state through other means. The illnesses that feature in the novel and Mary’s active participation in, and perhaps the management of, the lives of those whom disease afflicts create a porous form of identity for her that is constantly made mutable and subject to the contingencies of health and other environmental factors. For example, “Ann’s misfortunes and ill-health […] bind” Mary to her friend, exhilarating the heroine but also burdening her with melancholy, “the constitutional black bile” that not even her friendships can successfully “carry off.”171 Mary “imagines” that Ann’s “recovery” from a “hectic cough” could make her happy and in order to keep her “anxiety” at bay, studies “physic.” However, “this knowledge, literally speaking, ended in vanity and vexation of spirit, as it enabled her to foresee what she could not prevent,” that is, the imminent death that awaits her and all humans.172 Fixating on medical knowledge does little to remedy the actual suffering of her friend and, if anything, refocuses Mary’s attention towards the body (her own) that she is so anxious to avoid by investing wholeheartedly in the pains of others. She “forg[ets] all” while “listening to Ann’s cough, and supporting her languid frame. She would then catch her to her bosom with convulsive eagerness, as if to save her from sinking into an opening grave.”173 The convulsiveness with which Mary pulls Ann towards her “bosom,” not only echoes the burst of revolutionary political power that Burke identifies in the *Reflections* as a kind of convulsion or shudder, but it is a literal attempt to enter into Ann’s heart by being as close to her as possible. The sheer physicality of Mary’s gesture challenges the boundaries of proper moral sympathy, outlined by Adam Smith, that the
sentimental novel narrativizes. “By the imagination,” Smith explains, “we place ourselves in his [the other’s] situation, we conceive ourselves enduring all the same torments, we enter as it were into his body, and become in some measure the same person with him.” Mary’s intimate push against the bosom of her friend is an attempt to literalize the analogical mode of bodily confluence that Smith views as facilitating proper moral sympathy. Her desperate act is more closely related to the writhing of “a dancer on a slack rope” that Smith warns should not be copied by the onlooker. Instead, he advocates the controlled modulation of sympathy through the deployment of an imaginary “impartial spectator,” who, by residing “within the breast” of every man, is constantly prepared to prevent one’s over-identification with the suffering other. The “convulsive,” jerking movement that Wollstonecraft imagines Mary making as she pulls her friend closer to her, is Mary’s way of mimicking Ann’s consumptive cough in her own body. This corporeal encounter with Ann is “literally speaking” the only way that Mary can temporarily “prevent” the unpreventable, Ann’s fall into the “grave.” Despite her wish to abstract herself from her body, it becomes clear that Mary’s own “languid frame” is the primary agent of and for the novel’s medico-politics.

By being “carried [...] out of herself” by “the distresses of others,” Mary’s body and mind are simultaneously receptacles and vehicles for medico-political change, even if this is enacted in the space of the novel as a series of primarily personal decisions. These moments of refraction between individual experiences and larger sociopolitical processes are a common feature of radical novels from the period. As Hoagwood contends, these novels are “about something larger than those specifiable persons, those economic facts and legal fictions” that are localized within each individual production. In Maria, Andrew McCann asserts, “relatively inarticulate emotional responses to specific instances of injustice” are “rearticulated as the basis of a politically
useful and generalizable critique of power relations.” This form of structural transmission is given a particular physicality in the novel. Henry’s illness manifests the logic by which radical novels like Wollstonecraft’s effectively provide a link between singularity and commonality. Upon meeting Henry, Mary is struck by his “learning. He had also studied mankind, and knew many of the intricacies of the human heart, from having felt the infirmities of his own.” Firstly, the trajectory drawn between the singular instance of Henry’s ailment and the wider disease that afflicts “mankind” illustrates the fluctuating continuum of individual and collective experience that allows Wollstonecraft to politicize even the smallest instance of illness. Secondly, the slippage between “heart” as a metaphor for love and/or feeling and “heart” as one of the most important organs of the physical human body collapses the gap between representation and reality and subsequently bolsters Wollstonecraft’s view that individual health leads directly to collective well-being. Put differently, Wollstonecraft, in this novel and elsewhere, does not simply re-appropriate medical terminology as metaphorical markers for other phenomena; the body politic is a material condition, not a symbol for an incorporated political unit. Finally, the conflation between feeling and knowing in the passage points to the political potentiality of affective infection as a means to incite what Wollstonecraft would view as positive changes to the social order, that is, a community dependent upon the love and respect of healthy individuals. Henry, himself, admits to Mary that “in a state of bliss, it will be the society of beings we can love, without the alloy that earthly infirmities mix with our best affections, that will constitute [a] great part of our happiness.” Henry’s own “infirmity” offers a medical case for the type of sociopolitical illnesses that Wollstonecraft wishes society to avoid.

Wollstonecraft re-appropriates the cycle of “baneful consequences” in order to construct a form of communitarian identity politics based on the care of self and others,
just as she re-imagines the sentimental novel as a platform for this benevolent political reform. Recall that, in the *Rights of Woman*, Wollstonecraft wishes women to study medicine and politics so that they can “settle their benevolence on the broadest basis.”\(^{182}\) What she implies is that moments of health and illness bring into relief the politics of mutual aid upon which a reformed body politic depends. In other words, there is something innately political about regulating individual and collective health by offering medical help to those in need. The community of mutual benevolence that Wollstonecraft imagines challenges the sovereign individuality of modern political subjectivity that closes off one’s self from others. If laid out systematically, the plot of *Mary* can be shown to contain almost nothing other than eruptions of health and disease of varying severity, beginning with Eliza’s illness and the fever and death of the nurserymaid and ending with the eventual deaths of Ann and Henry from consumption. Mutual infection and affection make Mary and Ann nearly inseparable. When her father is dying, “night after night Mary watched, and this excessive fatigue impaired her own health, but had a worse effect on Ann,” who “after a sleepless, feverish night [...] had a violent fit of coughing, and burst a blood vessel.”\(^{183}\) Mary and Ann are bound by an affective infection, in which the state of one body is determined by the condition of the other. After treating Ann, “the physicians had said change of air was necessary for her as well as for her friend.” Mary tells Ann that “her comfort, almost her existence, depended on the recovery of the invalid she wished to attend.”\(^{184}\) This bold statement declares the quasi-symbiotic relationship that Mary views as the dominant mode of connection between herself and Ann. She is literally nothing without Ann; her own vitality depends upon Ann’s health. Again, the diseased state of Ann’s body (and by proxy, Mary’s) grounds their relationship as a dominantly physical one, in spite of Mary’s desire for the contrary. The
state of one’s health, according to Wollstonecraft, determines the possibility for genuine communality and, by extension, for political cohesion.

*Maria* unfolds similarly to *Mary*, conveying a narrative in which Wollstonecraft “examines individual financial, emotional, and physical suffering in the context of corrupt and oppressive legal and social structures” and, Elizabeth Dolan notes, “present[s] a series of portraits that together convey suffering not just as the author’s ‘personal troubles,’ but rather as a result of an oppressive and neglectful society.” Dolan insists on an autobiographical context for the novel, an issue I will not consider here; rather, I argue that *Maria* illustrates the contagiousness of political oppression and its material and medical outcomes, a concern of the author’s at the very start of the novel. By pointing out in the first lines that her work will differ from the “spectres and chimeras, conjured up by the magic spell of genius to harrow the soul,” Wollstonecraft immediately derides abstract supernaturalism, instead favoring social analysis as the proper content for a novel. Indeed the novel’s very form, with its combination of social case-studies, personal narratives, written letters, and legal testimony, set it apart from the bulk of sentimental novels published during the period. At the same time, Wollstonecraft recovers gothic conventions in order to expose the horror inherent in the everyday lives of women. The decaying “mansion of despair” in which Maria is housed is the “horrid [...] prison” of regressive society. Of the building itself she reflects, “the ivy had been torn off the turrets, and the stones not wanted to patch up the breaches of time, and exclude the warring elements, left in heaps in the disordered court.” This single image of the dilapidated asylum contains the entire logical core of Wollstonecraft’s political philosophy. It is the concrete manifestation of the question Wollstonecraft poses to Burke in the *Rights of Men* essay: “the ivy is beautiful, but, when it insidiously destroys the trunk from which it receives support, who would not grub it up?” The ivy, here, is the
external balm that Burke wishes to apply to the British body politic, a futile remedy, according to Wollstonecraft, because rather than cure political disease it manages to slowly eat away at the very source of political vitality. In Maria, the ivy has been “grub[bed] [...] up,” and reveals the diseased trunk that lies beneath it. Moreover, once the ivy has been discarded in the courtyard, cut off from its life-giving source, it becomes as dead as the stones that also populate the court. The asylum is literally diseased: it is “merely [...] habitable” and houses individuals who require medical care due to mental and physical illness. As McCann notes, “the asylum’s inmates are continually pathologized by their relationship to the materiality of their environment,” which Wollstonecraft envisions as reciprocal; when disease occurs, almost nothing can be free of the infection.  

Hence, the dilapidated state of the building reflects the ill-health of its residents and vice versa. Additionally, its very shape is representative of the kind of archaic political structures that Burke defends and Wollstonecraft critiques. It is a “castle,” complete with “turrets,” architectural features whose upward pointing facades imply a hierarchy leading to a sovereign, precisely the sort of individual who lives in a castle. However, the palace has become pestilential, and in a perverse subversion of Hobbe’s Leviathan, in which the sovereign is composed of the bodies of his subjects, the bodies who inhabit this sovereign space are deemed insane, unhealthy, and subhuman.  

At any moment, as Jemima explains to Maria, she and the other inmates afflicted with the “malady” of madness, could be overcome by a “paroxysm of phrensy.” The sudden seizure must be prevented by habitual surveillance; the asylum exists as a site for watching over those individuals who are irregularly seized by insanity. Maria’s body (like the bodies of the other residents) possesses a revolutionary potential that must be disciplined and reformed by the oppressive institutional structure that imprisons her. In fact, she is apprehended, and her child taken from her, at the very moment when her
Fulfilling her duty as a citizen-mother by suckling her child puts Maria in a precarious situation. The immediacy and intimacy of breast-feeding clash sharply with the reverential, specular politics that sovereignty performs in Burke’s *Reflections*. Like the “hereditary” provenance of Maria’s “malady,” suckling is a kind of transmission during which the mother passes part of herself into her child. This form of maternal infection enables political health for Wollstonecraft, who views breast-feeding as the feminine political act par excellence. It is certainly not the kind of heredity that Burke supports, one grounded in male primogeniture. Furthermore, the interruption of this process by the child’s removal echoes the governmental interventions and preemptive legislative decisions, characteristic of the 1790s, which tried to suppress insurrection and revolution on the domestic front. This makes sense, considering Gary Kelly’s assertion that *Maria* “was fashioned from and for a particular and changing Revolutionary situation,” in which Britain is “mired in economic crisis and social conflict and turning to counter-Revolutionary militarism abroad and anti-reformist repression at home.” The years 1794-6 were particularly brutal for radicals, notes Roger Wells, because “the growth of plebeian political radicalism” led to “repressions commencing with the Gagging Acts,” all of which “played out against a background of eighteen horrendous months of famine, and periodically intense public disturbances.” Furthermore, “the war effort was compromised by military defeat and serious diplomatic reverses.” Maria’s own domestic insurrection is thwarted by the intervention of her tyrannical husband who robs her of her freedoms and, after pursuing her “like an infected beast,” forces her into the asylum. He ostensibly cuts off “the unutterable pleasure of being a mother,” which breast-feeding engenders, halting the transmission of potentially revolutionary materials, “the inflammable quality,” Wollstonecraft writes, that “more or less lurks in all bodies,”
from mother to daughter. George’s action concurs with contemporary medical accounts of breast-feeding and fetal development, which cite the possibility that irritations in the body of the mother can be transferred into the body of the fetus and/or infant. William Smellie concludes that “between the mother and the fetus the connection is so intimate, that a violent agitation in the spirits and blood of the former may be communicated to the latter, and give rise to disorders.” If revolutionary potential is inherent in the body, then maintaining the body in a state of distress guarantees that this potential cannot be harnessed for reform. When Maria is struck by a “fever” (one of many scattered throughout the novel), after hearing about her uncle’s plans to settle his fortune on Maria’s daughter, she “struggled to conquer” her ailment because it inhibited her from “suckl[ing] her “poor babe.” Ill-health interrupts the duties of Maria as a citizen-mother and subsequently obstructs her primary source for the political agency that is already threatened by “the plague of marrying.”

Imprisoning Maria in a dilapidated asylum, populated by inhabitants whose lives are tempered by disease, promises to deprive her of her health and by extension, her rights as an active citizen. Yet, from a conservative standpoint, locking Maria away protects her from the “influx of vices” that Darnford himself argues, “had been let in by the Revolution.” This view is rehearsed by the judge at the very close of the novel who presides over Maria’s trial for divorce: “we did not want French principles in public or private life.” Like Burke, the judge blames the French Revolution for the political infection that eventually facilitates the governmental restrictiveness of the mid- to late-1790s. Maria’s variously healthy and unhealthy body, in its “continual state of alarm,” is the site in which the battle between radical potentiality and conservative oppression plays out in the novel. Importantly, the constant “state of alarm” in which Maria finds herself complicates the radicalness of Wollstonecraft’s medico-politics, aligning her
habitual checks on her own “feverish imagination” and “sickly sensibility” with a much more conservative political agenda. For instance, “when the recollection of her babe was revived by a tale of fictitious woe, that bore any resemblance to her own [...] her imagination was continually employed, to conjure up and embody the various phantoms of misery which folly and vice had let loose on the world.” The hectic volley between her overactive imagination and her loss of bodily strength from fatigue and voluntary malnourishment incites the alarmism that finally pushes Maria to write the lengthy epistle to her infant daughter. John Barrell, in his magisterial study, Imagining the King’s Death, tracks how the imagination is targeted during this period by both radicals and conservatives as a lethal political space and/or faculty. “The supposed irrationality of the imaginative faculty,” which is cited by several political writers, both popular and canonical, “is responsible for a [certain] notion” about the imagination, “that it is easily terrified, that it is the dupe and prey of horrors, spectres, phantoms which it has itself conjured up.” This phenomenon, called “alarmism,” reached some kind of fever point in 1796, with the publication of a political journal aptly titled The Alarmist. The justification for the journal is made clear in its inaugural issue: “the Modern Whigs have coined the term Alarmist to describe one whose understanding is forever disturbed by visions of imaginary public danger, One, who labors to instill into the minds of the People the same vain terrors which infest their own,” a label from which the journal will ultimately attempt to distance itself. Burke is the primordial alarmist for Barrell, the originator of the terrific sentiments that materialize as Pitt’s “terror” in the middle part of the decade. Furthermore, “the suggestion that the alarmism originally instigated by the Reflections is a form of insanity, the effect of a ‘diseased,’ or even a ‘crazed’ imagination, became [...] more or less routine.” Maria’s “alarm” registers a threat that is eventually carried out by the sovereign-like power of her husband. And though she often questions
her residence at the asylum, her “embod[iment]” of the various “phantoms of misery” which continuously haunts her points to the possibility that she is, indeed, a victim of the kind of over-stimulated imagination that Wollstonecraft disdains. Particularly significant in the aforementioned passage from Maria is the positioning of fiction, or “fictitious woe,” as the source for Maria’s alarming effusions. It is the embodiment of fiction (especially of the sentimental variety), and the circumstances that result from that transfusion, that Wollstonecraft ultimately fears.

The intersection among politics, alarm, and the imagination is most astutely illustrated during the scene in which Jemima begins supplying Maria with books that contain annotations from Darnford. After being “buried alive” for nearly “six weeks,” Maria “relapsed into despondency” only to be “cheered” by a “fresh parcel of books.” 208 She imagines that they belong to “a wretch condemned, like me, to reason on the nature of madness, by having wrecked minds continuously under his eye; and almost to wish himself—as I do—mad, to escape from the contemplation of it.” Like other moments in the text when Maria registers conditions mentally and bodily, the reception of the parcel, and the imaginative provenance that Maria invents for it, ushers forth a distinctly bodily experience symptomatic of sentimental fiction: “her heart throbbed with sympathetic alarm; and she turned over the leaves with awe, as if they had become sacred by passing through the hands of an unfortunate being, oppressed by a similar fate.” 209 The visceral physicality of the passage is remarkable. Wollstonecraft turns a simultaneously material (Maria holds the book and throbs with alarm) and immaterial (her imagination is also active) experience into a moment of near-sublimity from which Maria finds it difficult to abstract herself. Unhealthiness, here as in other moments, is composed of bodily and mental elements. In fact, “she read [the books] over and over again; and fancy, treacherous fancy, began to sketch a character, congenial with her own, from these
shadowy outlines. ‘Was he mad?’ She re-perused the marginal notes, and they seemed the production of an animated, but not disturbed imagination.” Maria understands that the boundary between an “animated” imagination and a “disturbed” one is extremely thin. One needs only to give oneself over to one’s “feverish fancy,” as Maria often finds herself doing, in order to cross the line into madness. Wollstonecraft implies that fiction can be just as instrumental in invoking alarm as fact, and perhaps more so; the imagination, if left to ruminate wildly upon horrible “conjecture[s],” can become a source of danger and destruction. A diseased imagination is particularly threatening because, according to eighteenth-century medical practices, “pathology made unassailable the imagination’s ability to change matter” and to produce material effects. Maria’s “trembling,” her frequent “convulsion[s]” of alarm, become corporeal signals for excessive instances of imaginative over-stimulation, but also moments of revolutionary potentiality. These unhealthy symptoms mark her body, and subsequently her mind, as temporarily diseased. Wollstonecraft maintains that, if properly modulated, the imagination possesses the power to envision the frame of a healthy state. “Maria’s imagination,” she reflects, “found repose in portraying the possible virtues the world might contain.” When balanced by reason, the imagination emerges as a possible source for a virtuous form of politics grounded upon the health of the body politic. Wollstonecraft’s novels, as extensions of a healthy imagination, endeavor to prevent vice by warning the reader about the ill-effects of a “disturbed imagination.” As a result, her regulative prescriptiveness, in a strangely immunological way, critiques the alarmism of Burke while recycling the logic of regulatory order that undergirds Burkean conservatism, in which “an irregular, convulsive movement may be necessary to throw off an irregular, convulsive disease.” Maria’s shudders, though debilitating, are not totally overpowering; unlike the torrents of passion she observes emanating from her fellow
inmates, Maria's eruptions of insanity, like Mary's sentimental tremors, must be regulated by reason. In the end, Wollstonecraft's conclusion that a form of regulated, medico-political convulsion is necessary to reform society, aligns her work much more closely to Burke's than has been previously conceived, and positions her as a solid precursor to Wordsworth, whose insistence on the regulation of "powerful feeling" drives his own literary-political project.
Chapter 2

“Contagious Air[s]”: Wordsworth’s Poetics and Politics of Immunity

Addressing the freeholders of Westmoreland in 1818, Wordsworth, campaigning for the Tory party, asks his audience to “remember what England might have been with an Administration countenancing French Doctrines at the dawn of the French Revolution, and suffering them, as it advanced, to be sown with every wind that came across the Channel!” Throughout his speech, Wordsworth uses the French Revolution as a point of comparison with the reformist agitations that his favored candidate derides. A particular issue of contention for Wordsworth and his fellow Tories is the proposal for increased suffrage by political reformers, the very issue that would eventually spur the Reform Bill of 1832. “It is amusing,” he contends,

to hear this plan of suffrage for all who pay direct taxes recommended as consonant to the genius and spirit of the British Constitution, when, in fact, though sufficiently rash and hazardous, it is no better than a timid plagiarism from the doctrine of the Rights of Man. [...] If the spirit of a People, composed as that of England now is, were once put into a ferment, by organizing a democracy on this scheme, and to this extent, with a Press as free and licentious as our's has long been, what a flimsy barrier would remain to check the impetus of the excluded! [...] As soon as the petty Artisans, Shop-keepers, and Pot-house Keepers, of our over-grown Manufacturing Towns and our enormous Cities, had each and all been invested with the right of voting, the infection would spread like a plague. [...] Most of us would deem this a considerable evil—the greatest political evil that could befall the Land.  

The plan for suffrage derived from direct taxation does not reflect what he calls the “rational liberty” of “free Englishmen,” but rather the French revolutionary mayhem,
invoked by Wordsworth as the “Rights of Man” doctrine of the 1790s, that England had already stifled by legislative and martial force. The French plague, he claims, is mimicked by the portentous infection of universal suffrage that would inevitably spread from the mass of “Artisans and Shopkeepers” clamoring for the vote. For,

in certain vocabularies liberty is synonymous with licence; and to be free, as explained by some, is to live and act without restraint. [...] The independence which they [the reformers] boast of despises habit, and time-honoured forms of subordination; it consists in breaking old ties upon new temptations; in casting off the modest garb of private obligation to strut about in the glittering armour of public virtue; in sacrificing, with jacobinical infatuation, the near to the remote, and preferring, to what has been known and tried, that which has no distinct existence, even in imagination; in renouncing, with voluble tongue and vain heart, every thing intricate in motive, and mixed in quality, in a downright passion of love for absolute, unapproachable patriotism.\(^{218}\)

What Wordsworth fears most of all is the overabundance of passion and licentiousness that fuels the reformist fervor; rather than viewing liberty as a “rational” extension of traditional freedoms, the reformers “live and act without restraint.” Blasting “time-honored forms of subordination” and “private obligation,” reformers instead give into a “jacobinical infatuation” with an over-passionate form of “patriotism.” It is, indeed, publicity that presents an irreparable problem for Wordsworth. Once ignited, the “ferment” that follows from the passionate zeal of radical politics breaks the already “flimsy barrier” between public and private that the “Press” exploits. This persistent and exclamatory fear of affective excess in Wordsworth’s addresses to the freeholders, and his critique of the institutions that problematize the borders between one’s private self and one’s public persona, follows the same sort of logic that he employs in his earlier texts. The
contagious spread of radical ideas in the public sphere must be prevented by attention to
one’s private feelings. At stake, here, is the “subordination” of radical-political, potential
affect, in the form of excessive feeling—the very form of creative power that Wordsworth
sees as destructive to the “natural” ordering of human politics—to the power of “private
obligation,” that is, a controlled form of selfhood that he earlier terms “sovereignty
within.” What Wordsworth views as the natural form of subjectivity is precisely a
constructed from of privacy or privation; modern subjectivity here entails the deprivation
of one’s affective potential as a means to construct the abstract, rational subject-citizen.

What I will explore below in more depth is the unique position of Wordsworth’s
politics as poised between a total rejection of absolute sovereignty and an equally
fervent rejection of collective autonomy and insurrection. For Wordsworth, political
freedom extends from neither the tyranny of an absolute ruler nor revolutionary “license.”
Both of these models are cast off in favor of a kind of individual sovereignty that depends
upon the healthy regulation of bodily affect and the stifling of the excessiveness that he
views as equivocal to absolutism and mass uprising. Importantly, according to
Wordsworth, individual sovereignty can be maintained, and political excess prevented,
through the act of reading poetry. Wordsworth’s political poetics highlights how
imaginative literature is the venue through which modern, medico-political subjectivity is
defined. Wordsworth’s plan for a new approach to poetic composition, as outlined in the
famous “Preface” to the *Lyrical Ballads*, emphasizes prevention as the dominant mode
by which readers can control the eruption of “powerful feelings.” Poetic form, in
particular, serves to modulate affects by controlling their distribution throughout the
reader’s body. By relying on prevention, rather than cure, Wordsworth embraces the
dominant form of Revolutionary-era medical prescription. Anita Guerrini, Dr. George
Cheyne’s most recent biographer, cites her subject’s belief that “a proper regimen would
prevent symptoms from appearing in the first place.” By the 1790s, it was commonplace for medical literature to address the preservation of health through preventative regimen. Dr. Thomas Garnett, writing on prevention in 1797, asserts that “most medical gentlemen will [...] agree that the greater part of the numerous train of diseases to which their patients are subject, have been brought on by improper conduct and imprudence.” A proper regimen could prevent the type of “conduct” that Garnett describes from erupting into a full-scale disease. Thus, the aim of many popular medical publications in the late eighteenth century was to inform readers about the importance of preventive medicine to securing a healthy lifestyle.

Texts were also increasingly advocating the practice of inoculation, made popular by Lady Mary Wortley Montagu in the 1720s. Important tracts that would shape the medico-political conversation on contagion for decades, such as Richard Mead’s *Short Discourse Concerning Pestilential Contagion*, Peter Kennedy’s *Discourse on Pestilence and Contagion in General*, and Joseph Browne’s *Practical Treatise on the Plague* (as well as Defoe’s *Journal of the Plague Year*), all appeared in the 1720s. Montagu’s efforts opened a heated debate between medical practitioners and social reformers over the effectiveness of what initially appeared to be a deadly health-related innovation, because inoculation required that a small amount of the disease be introduced into the patient’s body in order to foster immunity. Most inoculated persons survived the initial injection, only evincing moderate symptoms of the disease, but several did not. Adrian Wilson notes that supporters of inoculation favored the approach because of its prophylactic efficacy, allowing physicians to anticipate an outbreak of disease. Furthermore, “threat of the plague epidemic, raging in France” in the early 1720s was “widely feared as imminent in England.” Like any widespread epidemic, “plague posed a passive threat not only to human life but also to trade and to public order.” Medical personnel recognized
that “against smallpox, what was needed was a pre-emptive strike; [...] a blow stuck, not just against the disease, but also against the fear of the disease.”

Because of the potential material effects of smallpox (death, debt, and social chaos), the disease and any form of medical intervention that attempted to counteract its contagion were highly politicized.

The domestic and foreign upheavals of the revolutionary 1790s magnify the political threat of disease that haunted the 1720s, making “preemptive strike,” or prevention, the most efficient form of medico-political intervention. It is not surprising, then, that Edward Jenner’s discovery of vaccination in 1796, coming as it did after the Reign of Terror in France and during Pitt’s Terror at home, takes on a significant political dimension. As Tim Fulford and Debbie Lee note, “smallpox was a contagion” bound up with “Britain’s experience of war,” both at home and abroad. Moreover, “smallpox and other diseases” caused a “shift in perception” that “turned the personal body political.”

Viewing the personal body as an essentially political entity, positioned at the crossroads of private and public, is a necessary precept for Wordsworth’s medico-political poetics. Jenner’s campaign to legitimize vaccination, supported by many medical practitioners, including John Haygarth and Robert John Thornton, turned immunity into a martial and political necessity, one that would prevent the nation from weakening its constitution. Wordsworth shares the fear of constitutional laxity with his medical contemporaries; recall that his enmity towards broader suffrage stems partially from its lack of “consonan[ce] with the genius and spirit of the British Constitution.” In essence, the debates over inoculation, and later vaccination, highlight the indisputable connection between medicine and politics that emerged with modernity. This medico-political matrix is upheld by an immunological logic that, though it stems from material, medical practices (i.e., inoculation and vaccination), extends into the political sphere. If immunity,
which, here, can be taken to mean the normative state of healthiness embodied by individuals and the collective political body that encompasses them, functions by allowing a small amount of disease into an otherwise healthy subject, then it follows that the regulatory category of “health” is naturalized and maintained by an implicit absorption of a diseased element. Once it enters into the body, the infective material wages a constant battle with the immune system and, as such, strengthens the system against a full-scale infection. In other words, the infection is consistently suppressed by the body’s natural forces. Modern political subjectivity works by engaging a similar logic: rational selfhood exists through the constant regulation and suppression of various irrationalities, many of which are bodily and affective. For Wordsworth, this logic can be healthfully facilitated and maintained by exposure to poetry, especially poems that, while they allow for small eruptions of dually infective and affective enthusiasm, modulate response via metrical regularity. Hence, one’s individual sovereignty remains intact and immune from excess.

As I explored in the previous chapter, the function of contagion and immunity in medico-political texts of the period is more than metaphorical; the health of the individual body is directly related to the health of the collective sociopolitical body. The vaccination debate brings the concept of medical immunity directly into the sphere of politics, attesting to what Fuson Wang, in his exemplary article on Romantic disease discourse, calls “immunity’s Romantic origins.” He sees Romantic literature as “a productive and expressive outlet that effectively manages both the social perception and the medical reality of [...] disease.” It makes sense to posit Romantic literature as a bridge between politics and medicine, considering that the Romantic milieu fostered a truly novel confluence of medical immunity (vaccination), political upheaval (the Revolution and Napoleonic Wars), and the emergence of Literature as a specific disciplinary
category, encompassing works of imaginative writing. Furthermore, the healthy or
diseased imagination, a prominent theme for romantic poets, played an immensely
important role in the post-1789 medico-political milieu. “‘Imagination’ and its cognates,”
writes John Barrell, “occur with a surprising frequency in political writing and political
oratory of the late eighteenth century.” On the one hand, radicals accused
conservatives of inciting terror amongst the citizenry by inventing “imaginary dangers,”
against which the people should prepare. On the other hand, conservatives accused
radicals and reformers of engaging in heinous “democratical conjectures,” in which “the
imagination has been beggared to supply invectives against evils which exist only in the
dream of fancy. And by these efforts some have been by no means harmless in their
effects. They have enflamed the sanguine, stimulated the rash, infected the weak” with
their notions of political equality. In my first chapter, I explained how Wollstonecraft,
following the prescriptions of popular medical advice and conduct books, cautiously
employed fiction as a form of auto-immunity that can, if used properly, regulate bodily
excess and other vices by absorbing the pathogen of sentimentality into its textual body.
In this section, I will consider the preventive potential of poetry, specifically Romantic
poetry, to curb the kinds of affective infection that lead to political transgression. I argue
that two examples of Romantic literary production, Wordsworth’s 1802 “Preface” to the
*Lyrical Ballads* and the 1805 *Prelude*, figure poetry as a filter for a variety of dually
medical and political diseases. Proper forms of poetry, those making use of “the real
language of men,” serve to regulate individual and political health by immunizing the
reading subject against the force of fanciful “invectives,” which spread from person to
person in a haze of contagion. Wordsworth enacts his prescriptions for healthy poetry in
the *Prelude*, an extension of his earlier poetic “experiment,” by anatomizing the French
Revolution and then dissecting it. Finally, an examination of the role of the heart, as both
a metaphor for feeling and sympathy, and a physical organ through which events are registered bodily, leads to the unfolding of a disability that consistently haunts Wordsworth's texts: the poet's and the citizen's inability to escape the confines of the material body.

Despite Wordsworth's association with several major figures in Romantic-era medical science, only a handful of studies have thoroughly considered what Paul Youngquist has called the poet's “physiological aesthetics, one that puts bodily health among its main concerns.”231 Claiming that Wordsworth largely effaces his commitment to physiology after the *Lyrical Ballads*, Youngquist subsequently ignores the medical and clinical motifs threaded through the 1805 *Prelude*. However, he rightly pinpoints the 1802 preface as a manifesto for a kind of literary healing, “commit[ed] to a poetry of bodily effect.” According to Youngquist, Wordsworth, similarly to Wollstonecraft, “posits the health of the body as an index of social justice.”232 Anthony Jarrells not only argues that Wordsworth “helps to render literature safe” for consumption, by attending to the possibility that “good,” or “well-conducted” literature possesses the power to avert violence, but also that he transforms literature into “something capable of ‘warding off’ revolution,” that is, keeping the British nation “safe” from insurrections.233 Likewise, Paul Keen notes that, for Wordsworth, “poetry immunizes the reader against the danger of excess by exposing him to precisely those situations which are most likely to lead to excess. It teaches him to feel, but not to feel too much.”234 In the same manner as Wollstonecraft, Wordsworth recognizes literature’s implicit potential for reforming politics and preventing revolutionary upheaval, a possibility that is acutely tethered to the human body and its health. The need to modulate feeling, in order to limit excessive sympathy between reader and text, reflects a model that is already immunological: Adam Smith’s “impartial spectator,” the fictional paragon of proper moral sympathy, which I will explore
In spite of their distinct generic allegiances, Wollstonecraft and Wordsworth agree on the necessary role that fiction, or more specifically, the imagination, plays in medico-politics.

Smith’s *Theory of Moral Sentiments* contains a fundamental model for the imaginative provenance of preventive immunity, the “impartial spectator,” or “the ideal man within our breast,” with whom we identify when we employ what he calls “self-command.” This self-discipline is a form of consistent immunization that protects us from over-identifying with others, a decidedly improper form of moral sympathy. The spectator is essentially an imaginative construction that emerges from an internal separation of the self and the establishment of an exterior point from which one can objectively view oneself. Without the aid of the spectator, affective encounters become potentially excessive, ultimately threatening self-control. The process of sympathetic exchange is a delicate one, since “as we have no immediate experience of what other men feel, we can form no idea of the manner in which they are affected, but by conceiving what ourselves should feel in the like situation” and “it is by imagination only that we can form any conception of what are his sensations.” The spectator thwarts the natural effusions of the body into acceptably polite and civil channels and does so through a fundamental, artificial cleave in selfhood. Smith further explains that “by the imagination we place ourselves in his situation, we conceive ourselves enduring all the same torments, we enter as it were into his body and become in some measure the same person with him, and thence form some idea of his sensations” though they are generally “weaker in degree.” This imaginative transfusion of feeling often produces distinctly corporeal effects: “His agonies, when they are thus brought home to ourselves, when we have thus adopted and made them our own, begin at last to affect us, and we then tremble and shudder at the thought of what he feels.” It is in the bodily effect of
the shudder, an involuntary contraction of the muscles, that the almost gothic potential for political subversion lies. Yet, the shudder is quickly reinserted into the rational trajectory of feeling that the spectator upholds, and its radical potential is subsumed into what has become, over time, the naturalized order of civil society. Sympathy, as Catharine Packham writes in her analysis of Smith, is “as much [about] being infected, as affected,” and if left unchecked, the sympathetic shudder transforms into a larger convulsion, witnessed amongst the mob, that mass of persons who are unable to momentarily abstract themselves from their bodies in order to control their feelings.239 “The mob,” Smith explains, “when they are gazing at a dancer on the slack rope, naturally writhe and twist and balance their own bodies, as they see him do, and as they feel that they themselves must do if in his situation.”240 Smith forms a clear demarcation between the actions and feelings of the “mob” and those of “civil society.”241 The members of the latter, though they may tremble and shudder at the sight of pain or distress in others, possess the self-command needed to recollect themselves: “when the paroxysm of emotion, in the same manner as when the paroxysm of distress, is fairly over, we can identify ourselves, as it were, with the ideal man within our breast, and, in our own character, view, as in the one case, our own situation, so in the other, our own conduct, with the severe eyes of the impartial spectator.”242 A “paroxysm,” a medical term implying a sudden, violent attack of disease, necessarily engenders an instance of distress; however, imagining how we appear to the terrific gaze of an unbiased observer allows us to overcome momentary disturbances.

The immunological logic that Smith’s spectator follows is of the same variety that Wordsworth employs in the Prelude, when he discusses his “ideal man” as “Lord over himself.” The subjective cleave that engenders the impartial spectator also accurately describes the constitution of sovereignty about which Hobbes writes in Leviathan.
Wordsworth’s notion of individual sovereignty, in which being “Lord over” oneself means modulating affective response, such that politics is indubitably connected to the body, and specifically the heart, links Smith’s primarily emotional model of spectatorial impartiality with the political model of sovereignty offered by Hobbes. Modern sovereignty is constituted, like the impartial spectator, when man, in order to preserve his life, consents to “constitute a transcendental point from which [he] receives orders.” According to Hobbes, in order for men to “get[.]” themselves out from that miserable condition of Warre, which is necessarily consequent to the natural Passions of men,” they form a “covenant,” or “Artificial[.]” agreement in which they “give up the right of Governing [themselves]” and “Authorise” all of the actions of the newly-created sovereign. Because they are technically the authors of the sovereign’s will, “none of his Subjects, by any pretence or forfeiture, can be freed from his Subjection.” This means that the constitution of subjectivity is also simultaneously the loss of subjectivity; it not only contains its own negation, but originates from it. In other words, the very construction of subjectivity is contingent upon a relinquishing of one’s subjective freedom. We already glimpsed this same logic in Wordsworth’s addresses to the freeholders: one’s subjective freedom is established and maintained not through licentiousness, but rather through an essential act of “restraint.” The resulting logic is specifically immunological because immunity is established, not by a healthy additive, but by the introduction of a deleterious agent into the body. It depends upon an intrinsic negative in order to be constituted as a normative state. The impartial spectator mimics sovereignty’s uniquely immunological logic because one authorizes the mechanism (the overseeing “ideal man”) that negates one’s complete free will.

The impartial spectator, then, is the internalized sovereign that we “call” upon in order to regulate our affective encounters. Our very individualism, in fact, is guaranteed
by a repeated internalization of the sovereign power of the spectator. This necessary
individuation, then, allows us to enter into civil or public relations with others.

Wordsworth’s notion of “private obligation” works in this same way. Consistently
remaining attentive to one’s “private” affections facilitates morally proper sympathetic
responses between individuals. The way in which we imagine how we must feel
ultimately determines how we act. Do we choose to calmly reflect upon the distresses of
others, and behave accordingly? Or do we indulge in our passions, contorting out bodies
in mimicry of the suffering other? The sovereign gaze engendered by the impartial
spectator establishes an essential, yet privative gap in communal relations. Just as the
constitution of the sovereign artificially separates men into individuals from the common,
warring mass of the multitude in the state of nature, so the spectator maintains a
“healthy” distance between the suffering other and the sympathetic self. To over-invest in
the affective struggles or joys of other individuals means to forfeit one’s individuality and
to become subsumed into the transpersonal vacuum of the other, thus establishing a
dangerous commonality. Hence, the process by which we (re)embody the impartial
spectator, that imaginative homunculus who resides simultaneously inside and outside of
us, contains a singular, nearly incomprehensible moment during which we could
potentially choose what Smith would view as the path to disorder and insurrection.246

The immunological process that secures sovereignty, along with the individuals who
must deprive themselves of complete communality in order to forge sovereign
protection, thwarts the kind of affective contagion that could potentially destroy
sociopolitical order. Wordsworth extends the mode of imaginative, immunological
regulation that defines Smithian sympathy in order to counteract the possibility of
political disease, and conceives of poetry as a preventive tool that safely redirects the
imagination away from subversion. He does so, as I will explore below, by subtly
incorporating the body into his poetics in a way that attempts to avert any actual, revolutionary, mass convulsion.

Wordsworth establishes the “Preface” to the 1802 *Lyrical Ballads* as a preventive text within the first few paragraphs. Indeed, his very proposal depends upon a binary between interiority and exteriority that allows immunity to function properly as a preventive rather than curative measure. As I mentioned previously, immunity via vaccination functions by inserting a pathogen into the body that, by triggering a reaction in the immune system, conditions the body to protect itself against a particular disease. Vaccination, then, contorts the boundary between the body’s interior and exterior because its very success requires an initial infection (a mode of entering into the body) that eventually reestablishes the interior/exterior boundary by defending the body against more severe infections. In other words, immunity opens up the body, only to close it off again. Though Wordsworth vows that his preface does not seek “to determine how far [public] taste is healthy or depraved,” he nonetheless assumes a position against the disease of “gaudiness and inane phraseology.” Despite the fact that he “decline[s] to enter regularly upon this defence,” he declares that “there would be some impropriety in abruptly obtruding upon the Public, without a few words of introduction, Poems so materially different from those, upon which general approbation is bestowed.” As a result, Wordsworth indirectly positions the preface as a porous filter that aims to slowly expose the public to his “experiment[al]” poems by offering a seemingly rational explanation for their existence. The filter is porous because, unlike past poetic efforts which contain “certain classes of ideas and expressions” while “others [are] carefully excluded,” Wordsworth’s collection of lyrical ballads strategically includes elements that may tempt “the Reader to censure” the author because they do not conventionally belong in a volume of poetry. To avoid this calamity, Wordsworth asserts...
that the preface is in place not only to protect the discerning powers of a public readership, but to protect the poet as well: “at least [...] I myself may be protected from the most dishonorable accusation which can be brought against an Author, namely, that of an indolence which prevents him from endeavoring to ascertain what is his duty, or when his duty is ascertained, prevents him from performing it.” The repetition of two key terms, “protect” and “prevent,” as well as their cognates, signals that the poet views protection and prevention as complementary practices, both of which are explicitly inherent in the aims of immunity. The preface preempts discord, mirroring the ultimate aim of the poems themselves.

By including “incidents and situations from common life” in his poetry, Wordsworth works against the tactics of literary quarantine performed by those “Poets who think that they are conferring honor upon themselves and their art, in proportion as they separate themselves from the sympathies of men.” Instead, Wordsworth claims that his poetic inclusion naturally “purifie[s]” the language of men from its “defects” and as such, conditions it to correspond to, and perhaps deeply infiltrate, “the essential passions of the heart.” Allowing the seemingly destructive pathogen of “rural life” into poetry effectively immunizes the reader by regulating the degree to which “the spontaneous overflow of powerful feelings” is incorporated into the reading body. The active reading of poetry, according to Wordsworth, involves a constant process of immunization and modulation uniquely similar to Smith’s model of moral sympathy. “For our continued influxes of feeling,” the poet writes, are modified and directed by our thoughts, [...] so, by repetition and continuance of this act, our feelings will be connected with important subjects, till at length, [...] by obeying blindly and mechanically the impulses of those habits, we shall describe objects, and utter sentiments, of such a nature and in such connection
with each other, that the understanding of the being to whom we address ourselves, if he be in a healthful state of association, must necessarily be in some degree enlightened, and his affections ameliorated.  

Poetry is the ideal mediator for this immunological process because it possesses the power to both incite and regulate those “influxes of feeling” that, if “modified and directed by our thoughts,” lead to the proper use of fellow-feeling. It accomplishes these important modulations through metrical regularity. “I answer,” he writes, “that the distinction of rhyme and metre” in this new “class of Poetry,” “is regular and uniform, and not, like that which is produced by what is usually called poetic diction, arbitrary and subject to infinite caprices upon which no calculation whatever can be made.” Its metrical uniformity and regularity render lyrical poetry safe for readerly consumption since “the metre obeys certain laws, to which the Poet and the Reader both willingly submit.” Striking here is the clear enunciation of regular poetic meter as akin to sovereign power, a political force to which men “willingly submit” in order to protect themselves from the conditions of the state of war, as I discussed above. Uniform poetic meter, if “blindly and mechanically” obeyed, becomes internalized through repetition and allows for the “healthful association[s]” that engender and sustain affective and intellectual regularity. The mechanical nature of habit guarantees stability, a sentiment that Wordsworth shares with both Smith and Burke. Recall, for example, Burke’s conception of “succession,” what he calls the “healthy habit of the [British] constitution,” which enables citizens to, again, “blindly and mechanically” submit to a political constancy in the form of a monarch. For Wordsworth, metrical regularity triggers, in like manner to Smith’s impartial spectator, the immunological process that sustains rational, political subjectivity via an internalization of sovereign power. The “effect which is in a great degree to be ascribed to small, but continual and regular impulses of
pleasurable surprise from the metrical arrangement,” mixes with “something regular” and thus succeeds in “tempering and restraining the passion by an intertexture of ordinary feeling.” In distinctly immunological fashion, the sensations that arise from reading poetry—the very affects that always threaten to extend “beyond the bounds of pleasure”—are released in small, regular streams into the reading body and this regularity is attained by metrical arrangement. “Words metrically arranged will long continue to impart such a pleasure,” and in doing so, maintain immunity.

“The human mind,” Wordsworth proposes, like political change, “is capable of being excited without the application of gross and violent stimulants.” The poet may “throw [...] a certain coloring of imagination [over]” the common incidents to ease their inclusion into poetry, but he will necessarily avoid covering them with a patina that is, in Smith’s words, much too “dazzling.” Over-stimulation is a risk endemic to the reading and writing of poetry, and must be avoided in order to “purpose[fully]” facilitate the affective transfusion that occurs progressively among poet, poem, and reader.

Wordsworth is not deterred from drawing out the political implications of the poetical process that he outlines in the preface. Though writers of “any period” are obliged to perform the “service” of “elevating” one subject “above another,” Wordsworth explains that “this service, excellent at all times, is especially so at the present day.” By historicizing the lyrical project that he is undertaking, the poet is simultaneously politicizing it, and slowly reveals its connection to the dually literary and political situation in which England finds itself in the earliest years of the nineteenth century. A “multitude of causes,” he claims,

unknown to former times, are now acting with a combined force to blunt the discriminating powers of the mind, and unfitting it for all voluntary exertion to reduce it to a state of savage torpor. The most effective of these causes are the
great national events which are daily taking place, and the encreasing accumulation of men in cities, where the uniformity of their occupations produces a craving for extraordinary incident, which the rapid communication of intelligence hourly gratifies.\textsuperscript{259}

This passage explicitly connects the involuntary eruption of affect with the sometimes violent instances of domestic unrest experienced by English citizens since at least 1790, but also with the literary (i.e., written) (re)presentation of these events within various published materials, that is, \textit{how} these eruptions are imagined. The “[in]voluntary exertion[s]” that Wordsworth fears are precisely related to the trembles and shudders of the multitude towards which Smith feels an equal sense of derision. Though Wallen accurately confirms that Wordsworth’s “success in establishing [...] the standard way of talking about poetry and the poet was enabled by the shift in medical theory that began looking at the body as an inward structure bounded by skin and besieged by pathological threats from without,” he does not take into consideration the degree to which the trebly pathological, literary, and political threats that affect the public, according to Wordsworth, are subsumed and re-appropriated by the receiving body, and gradually transformed into a viable portion of that body.\textsuperscript{260}

Wordsworth manages to distance himself from the “frantic novels, sickly and stupid German [i.e., foreign] Tragedies, and deluges of idle and extravagant stories in verse” by “counteract[ing]” the “degrading thirst after outrageous stimulation” that these products both satiate and incite, through a subtle and minute inclusion of those “powerful feelings” that constantly threaten, in their very involuntary nature, to overwhelm the human body and mind.\textsuperscript{261} In fact, poetry can borrow from its supposed others, without necessarily losing its generic particularities since “a large portion of every good poem, even of the most elevated character, must [...] in no respect differ from that of good
prose” and “some of the most interesting parts of the best poems will be found to be
strictly the language of prose, when prose is well written.”

Poetry, he claims, “can
boast of no celestial Ichor that distinguishes her vital juices from those of prose; the
same human blood circulates through the veins of them both.”

This second
enunciation of poetry’s resemblance to prose is significant not only for its explicit use of
medical or bodily terms, but for the way in which it fuses poetry to the material processes
of the living body. Poetry does not contain an immaterial blood-like substance that
enlivens it, a heavenly “Ichor” akin to the vital fluids that course through the veins of
classical gods, but rather derives its vitality from “human blood.” Poems, though not
“alive” in a completely literal sense, are nonetheless “clothed” by a “bod[y]” that pulsates
with life, another kind of real, yet “ideal man” with whom the reader can identify.

The
reading of poetry, then, imitates proper moral sympathizing, with the poetic body acting
as a human body whose feelings can be “deeply interfused” with the reader’s.

This
process is neither wholly literal nor totally metaphorical, however; the human blood that
circulates within the poetic body also bleeds out into the world, playing upon the
secondary, pathological conception of “ichor” as a discharge or fluid “emanation” emitted
from an open wound or incision. A poem’s affects, its blood, enter into the reading or
“receiving” body and are “carried alive into the heart by passion,” thereby catalyzing
responses in the reader that are certainly mental, but also physical.

The work of
sympathy between poet, reader, and text, David Simpson suggests, “sustains sociability”
in a “virtual construction that embodies neither the passions of the sufferer nor those of
the beholder.”

As a result, Wordsworth can “keep [his] Reader in the company of flesh and
blood,” without the taint of vulgar physicality that such an immersion might include.

He
constructs a medial, or virtual, space between those experiences that are “felt in the
blood” (interior) and those that are “felt along the heart” (exterior), a gap that he
traverses continuously in his poetry as a way to resist and confront “the fever of the
world.” The very form of Wordsworth’s poetry, complete with its cadences that echo
“the language really used by men,” manages this gap and, thus, attempts to prevent the
misdirection of affect into dangerous registers of human experience, specifically bodily-
political ones. Though “the end of Poetry is to produce excitement,” described by
Wordsworth as “an unusual and irregular state of the mind” during which “ideas and
feelings do not [...] succeed each other in accustomed order,” he confesses that “there is
a danger that the excitement may be carried beyond its proper bounds.” This threat is
particularly significant because “the power of the human imagination is sufficient to
produce such changes even in our physical nature as might almost appear
miraculous.” Hence, a poetics of prevention controls and sometimes intercepts
physical changes by “calling attention to experiences and individuals that exceed their
re recuperative containment,” figures like “The Discharged Soldier,” “The Old Cumberland
Beggar,” and other outcasts who function as both infections that disease communality by
their inclusion and as conditions for the possibility of communal inclusion via fellow-
feeling. Put differently, Wordsworth’s pariahs possess the power to disease the very
entity (a community based on sympathy) that their poetic existence sets into motion.
Though the beggar reminds us that “we have all of us one human heart,” and that the
constant “touch of sympathy” for others enables communities to thrive, there is little drive
in Wordsworth’s poem (apart from the gesture of the “Neighbor” who weekly offers “one
unsparing handful” of meal to the man) to resuscitate or heal him. In fact, Wordsworth
asserts, the kindest action we could perform for the beggar is to “let him die” at peace “in
the eye of Nature.” There is no attempt, in the space of the poem, to incorporate the
beggar into the body of the community; he is nearly, though not completely, “useless,”
but it’s clear that his old age (and the infirmities that necessarily accompany this state) disables him from contributing to the larger economy of the community. Thus, the poem allows us to sympathize with the beggar without overstepping the bounds of proper sociability. Our reading of the poem becomes one node in a system of prevention that regulates the movement of affects between people and things.

Wordsworth’s claim that the imagination produces physical transformations attests to its somewhat ambiguous characterization in medical, literary, and political texts as a physiological entity capable of enacting or suppressing material changes. As Simon Jarvis asserts in *Wordsworth’s Philosophic Song*, the “Imagination as imagined” by Wordsworth is never “purely transcendental,” but remains imagined “as what is indubitably real and lived in experience.” Furthermore, he argues, “Imagination happens to us at that instant when we are brought emphatically to affirm that we live.” Though Jarvis does not extend his brief epilogue on the Wordsworthian imagination to consider its connection to biomedical ideas about life, the implication of such a statement, grounding the imagination in the materiality of life itself, nonetheless hints at a physical or embodied notion of the imagination rather than an immaterial one. John Haygarth’s 1800 medical pamphlet, *On the Imagination, as a Cause and Cure of Diseases of the Body*, offers a specific case of the imagination’s relationship to the human body during illness. His primary aim in the treatise is to substantiate the claims made by medical practitioners, especially in the popular spa-town of Bath, that “false tractors” (what we would now call placebos) are just as effective at eliminating symptoms of disease as real ones, mainly because of the imagination’s influence upon the patient’s perceptions of effectiveness, or what he calls “medical faith.” Haygarth ushers forth a number of testimonials from witnesses, many of whom are medical professionals, that in his view “prove to a degree which has never been suspected, what powerful influence upon
diseases is produced by mere imagination.” In one report, a practitioner explains that though Dr. Beddoes had “lent” him “a pair of the real patent tractors” for his experiments, they were never “used” because the “spurious tractors,” made of materials like bone, slate, and wood, were completely successful at lessening the patient’s spasms. Haygarth remains confident that experiments with “fictitious tractors” ultimately “prove that the imagination can cause, as well as cure, diseases of the body.” If the imagination exerts such a powerful influence over the body’s condition as either healthy or diseased, then the possibility of over-stimulation threatens not only the health of individuals, but the well-being of all, especially if we consider the role of sympathy in the culture of infirmity. Sympathy is triggered when “we conceive ourselves enduring all the same torments” of the suffering other, such that its transmission between bodies functions as an affective contagion. However, driven largely by the imagination, registering sympathy for those who are ill always threatens to become excessive, causing the observer to become ill herself. Thus, the safeguarding of one’s self-command through a conditioning of affective response in the form of “private obligation” strengthens political order at the macro-level.

What Sha considers as the “physiological” provenance of the imagination, and the fact that “pathology made unassailable the imagination’s ability to change matter,” convert Wordsworth’s fluctuating fear and awe for the “power” of the imagination into a distinctively medical, or more precisely, medico-political, concern. Fiction, and other forms of “imaginative literature,” since they possess the capability to become “dangerous as the source of delusions,” figure as potentially lethal agents of “changes [...] in our physical nature.” On the other hand, “if the imagination [and its literary products] were subject to the senses and environment [the primary source of contagion and disease according to eighteenth-century scientists], that subjectedness could be offset by
education or a healthy regime [...], moral management,” or other forms of prevention.  

These medical considerations make Wordsworth’s poetic project into a preventive regimen aimed at fostering “private obligation” or self-sovereignty and preempting the spread of unregulated affects between persons and texts, affects capable of causing immense physical damage to both individual and collective readers already jolted by those “great national events daily taking place.” The “lived,” affective events encompassed by the imagination are also highly “contagious experiences,” reflective of “the period’s concomitant tendency to characterize feelings as transpersonal, as autonomous entities that do not always belong to individuals but rather wander extravagantly from one person to another.”  

Affects, in similar fashion to diseases, travel between bodies through the environment. 

In an 1802 treatise on “the necessity and means of suppressing contagious fever,” Christopher Stranger remarks that “contagion, which produces infectious fever originates from the accumulation of human effluvia, which is multiplied by the disease it occasions. It is communicated by breath, by exhalations from the body, and from excretions of persons infected and diseased, and by effluvia from substances imbued with this poison.”  

Importantly, Stranger notes, contagion is a political issue, and can only be eradicated by “parochial and parliamentary assistance,” since its effects are felt in every corner of human life. His opening remarks, structured as a suspenseful and chilling narrative about the spread of contagion “in populous towns,” construct an ominous image of the pervasiveness and indifference of disease:

it pursues its prey through all ranks of society and through every channel of communication. The latent poison may be imbibed from the necessaries of life, the means of comfort, or the sources of enjoyment. It pervades the seats of business, the board of social intercourse, and is found lurking even in the haunts
of pleasure. It is unwarily conveyed by the gay companion, the faithful domestic, or the affectionate friend. Its unsuspecting victim is sometimes arrested whilst in the full vigor of health [...]. The insidious and unrelenting enemy saps, by degrees, the health of the infected [...].

Dissolution is imminent once the contagious fever attacks the heart: “the blood retires from the extremities to the faint and palpitating heart” and “the chill of extinction follows its retreat.” Stranger adds to his story by tracking the journey that disease takes from humans to things (“clothes, linen, furniture”), and back to humans again, spreading via “hackney-coaches and other public vehicles.” The above passage illustrates the coalescence between military-political rhetoric and medical discourse, as it posits disease as an “enemy” with which the population is constantly at war. The martial threat of disease that Stranger explores corroborates with Wordsworth’s own comments on the innate connectedness between protection and prevention. Contagion is a state of war, between persons, but also within the individual body, laboring to fight disease. Overcoming the possibility of contagion requires the body to “willingly submit” to an external agent that is poised to protect it by infecting it, almost counterintuitively, with contagious matter.

If a proper poetic regimen can control the contagion of affects, then the 1805 Prelude, more so than the Lyrical Ballads, stands as the exemplar of Wordsworth’s poetics of prevention. As “Wordsworth’s fullest attempt to deal with the French Revolution,” the Prelude pieces together what I call a “morbid anatomy” of Revolutionary politics and society, an exercise that includes an important enunciation of self-sovereignty. Wordworth, himself, sees his evaluation of the French Revolution as a kind of dissection: “I took the knife in hand,/ And, stopping not at parts less sensitive,/ Endeavored with my best skill to probe/ The living body of society/ Even to the heart.”
It is precisely the “heart” of society (and of the *Prelude*) that manifests the virtual space upon which Wordsworth’s preventive poetics depends, since it appears throughout the poem as both a palpable human organ and the representational core of properly modulated affective exchange, manifesting itself in what he calls the “universal human heart.” Furthermore, Wordsworth’s morbid anatomy identifies two competing forms of contagion: the kind of pestilential or feverish contagion that Stranger identifies as immanent to city life (since, “in cities, […] the human heart is sick”) and the dually beneficial and injurious circulation of fellow-feeling via affective infection, the very form of sympathy that maintains the immunological process fundamental to “private obligation.” The constellation created by the dueling conceptions of “heart” and “contagion,” ultimately reveals that despite its sometimes “feeble” state, the “corporeal frame” maintains a necessary place in the development of the poet’s, as well as the reader’s, capacity for feeling. Wordsworth’s narrative traces his own “heart-experience,” while simultaneously narrating the pulsating history of the French Revolution, emphasizing the interconnectedness between the body politic and the individual body and offering a warning of sorts to potential readers.

As I hinted at above, to accomplish his morbid anatomy of the Revolution, Wordsworth must supply the reader with an “entry” point into “the frozen world of the dead,” by anatomizing and then dissecting both his own body and the larger body politic. In this gesture, he follows early nineteenth-century physicians like Matthew Baillie, who believed that the heart could “be analyzed and understood, its changes seen, only after the death of the patient.” He allows the body to come forward, despite his own reservations about its ability to control “the spontaneous overflow of powerful feelings” that are inevitably incited by the poem itself. By focusing on the heart, and the broader circulatory system, Wordsworth is able to retain the fluctuations between the
literal and metaphorical senses of the “heart” that the *Prelude* consistently exploits, and that I will explore below. It is essential to note that Wordsworth’s virtual notion of the heart corroborates with a number of eighteenth- and nineteenth-century medical viewpoints about the organ and its relationship with affect. As Fay Bound Alberti asserts in her illuminating study of the intersections among medicine, history, and emotion, “the heart of the eighteenth century was, above all, a material structure. And yet, particularly at the level of lived experience and medical therapeutics [of which preventive regimen is a part], it continued to be invested of emotional meanings.”

Medicine may have witnessed a decisive shift over time from humoral, or Galenic, approaches to the body towards a more chemically based Hippocratic science of corporeality, yet “emotions remained primarily bodily events” that often “caused disruption to the [heart] when excessive, but in the same way as other extremes, mental, physical, and environmental. As such, they could be managed only by the careful maintenance of the non-naturals.”

Thus, diseases of the heart could be attributed to either “bodily exertion” or “the affections of the mind,” as Alberti shows in the case of Dr. John Hunter’s angina pectoris, the eighteenth-century catch-all term for heart disease, a previously undiagnosed affliction that only revealed itself in his autopsy.

“Angina attacks,” Alberti explains, “often followed on the arousal of the body through exercise or emotional excesses, or any other condition that forced the blood to move rapidly around the body, and delivered too great a load on the heart.”

Wordsworth’s claim in the “Preface” that “great national events” and the “accumulation of men in cities” cause a “savage torpor” takes on new meaning when considered in light of medical views on angina pectoris. A 1791 treatise by William Butter on heart disease describes one of the symptoms of angina as a “numb pain” that afflicts the chest, but that also spreads to other parts of the body. Wordsworth, again, highlights that the
causes of the violent listlessness that plagues society are exacerbated by further “craving[s]” for excitement and the rapid circulation of information that momentarily satisfies those needs. On the one hand, Wordsworth clearly envisions human society as a circulatory system, complete with a heart, that, if diseased, quickly spreads its “contagious air” everywhere. His discourse echoes Wollstonecraft’s conception of political corruption as a “baneful, lurking gangrene” that “spreads its mass through society.” On the other hand, the same surge of affect that disables the heart can also (if “recollected in tranquility”) diffuse fellow-feeling and catalyze the sympathetic, immunological process that secures proper individuation. The trick, then, is to modulate and control the intensity of these affective infections. By examining his own body, Wordsworth exposes how even he, under the sway of the pulsing beat of revolution, allowed his heart “to feel—perhaps too much.”

The heart of the Prelude is truly diffuse. The first six books establish the virtual space of the heart, as well as the connection that the poet will make between his own body and the body politic, which the later books flesh out quite literally. He admits that “sometimes it suits me better to shape out/ some tale from my own heart, more near akin/ To my own passions and habitual thoughts,/ [...] But deadening admonitions will succeed,/ And the whole beauteous fabric seems to lack/ Foundation, and withal appears throughout/ Shadowy and unsubstantial.” Several essential claims are announced in this brief passage. To begin with, the implication here is that something deadly or “deadening” (in this case the “admonitions”) must be applied as a “cure” for the ensuing narrative to be successful. The sense of deadening offered here implies that the success of the poem depends upon rendering dead those objects (himself and his milieu) that the poet wishes to “shape” in his narrative. Importantly, the act of taking “his knife” to the two enfolded hearts (one material, the other metaphorical) is both
murderous and revealing at the same time. His method is to allow only so much of the infective substance in, enough to stimulate the imagination without overburdening it. Indeed, there is “a grandeur to the beatings of the heart” that can only be reached by “purifying thus/ The elements of feeling and of thought,/ And sanctifying by such discipline/ Both pain and fear.” Wordsworth’s early development includes “fits of vulgar joy” and “pure organic pleasure” that are steadily overcome by this discipline of fear. The seemingly unfiltered exchange that occurs among the poet-child, the natural landscape, and his own dormant imagination (the “lifeless” impressions that are “doomed to sleep/ Until maturer seasons”) is full of risks, yet necessary because their circulation, once regulated “habitually,” becomes absorbed into the “affections.” The recollection of these sensations, in their deadened form, “revive[s]” the poet, who feels that “a tranquilizing spirit presses” on his “corporeal frame,” and opens up the “vacancy” between his present, vital self and the poet-corpse of the narrative, that “other being.” It is precisely the juxtaposition of spirit and body, the material and immaterial, which presents the virtual chasm that the poet must negotiate. Wordsworth’s claim about the “two consciousnesses” that haunt him is problematized by the fact that his body is clearly employed here to mediate immateriality. As Stuart Allen notes, “simultaneously in and before the world, [consciousness] is not simply attuned to context: it is fundamentally shaped by matter—or, in other words, embodied.” The spirit “presses” itself upon him; it touches him in some physical way that prompts the opening of the space of the poem. This sedating air will “split” his body, mimicking the plight of the “native rock” in the succeeding lines. The spirit infects the speaker, making him part of that larger circulatory system encompassed by “the universal human heart.”

Indeed, as he clams later in Book Two, “our hearts,” those “trembling” and “beating” organs, can hold “an intimate communion” with elements outside of the
This is perhaps best illustrated by “the intercourse of touch” through which the poet “held mute dialogues with [his] mother’s heart.” The dialogue is “mute,” unheard by the “fleshly ear” and “to the human eye/ Invisible,” because the sentiments communicated by the heart “liveth by the heart” alone. These affects occupy the realm of the virtual, the same space that enables Wordsworth to fluctuate between the representational and material hearts of the poem. He describes this process of virtualization in Book Eight:

Even then the common haunts of the green earth
With the ordinary human interests
Which they embosom—all without regard
As both may seem—are fastening on the heart
Insensibly, each with each other’s help,
So that we love, not knowing what we love,
And feel not knowing whence our feeling comes.
Such league have these two principles of joy
In our affections. I have singled out
Some moments, the earliest that I could, in which
Their several currents, blended into one—

[...]

Flowed in by gushes.

The material spaces of nature and humanity are combined “into one” and “embosom[ed],” taken into the very site of the heart upon which they are “fastening” themselves. This moment of affective infection returns us to the process of embodiment entailed in the watchful gaze of Smith’s impartial spectator, but adds several distinctive elements to it. Here, the circulating “currents” invade the heart “insensibly,” that is,
without our knowledge or even prior to sense. As a result, we experience or “feel” these “gush[ing] currents “not knowing whence our feeling comes,” and yet, they dominate our “affections.” The poet tells us that he has “singled out” moments to poeticize, abstracting them from the virtual, while holding on to some of its formlessness. Here the porous outline of immunological space is echoed by the way in which virtuality, in order to be cognized into moments or even events as it is in the *Prelude*, must be shaped but left open at the same time. That the chosen moments are “the earliest” that the poet could bring forth attests to the troubled temporality of the poem and of virtuality, itself. The implication is that there are “moments,” even before time is registered that the poet can never reach, the source of the affective “gushes.” This, of course, complicates the poem’s entire agenda because the instance of potentiality, the point at which affects swerve into various possible outlets and at which revolutionary energies are first embodied, is always beyond being grasped.\(^{313}\) In recognition of the fact that the source of affect is potentially ungovernable, Wordsworth shapes the poem to redirect affective energies towards a “sovereignty within.”\(^{314}\) The containment of affect, via the poetic regimen enunciated in the “Preface,” prevents the “frantic” politics of the “swarm[ing]” mob from spreading and, in the end, maintains a form of individualized sovereignty.\(^{315}\) Hearts can, and even should, communicate affectively, Wordsworth avers. Affects “should spread from heart to heart,” reinforcing Adela Pinch’s view that feelings are inherently contagious “autonomous entities,” often beyond human control.\(^{316}\) However, the results of these almost unconsciously facilitated moments of affective infection ultimately determine the degree to which they can be considered healthy or depraved. Like the imagined affects that poetry itself compels the reader to feel, these affective exchanges must be controlled or “discipline[d]” if they are to avoid becoming excessive.
Wordsworth shows the reader what excess affect looks like (and feels like) in the later books of the *Prelude*, specifically those which cover his residence in France.

The remainder of this chapter will focus primarily on those later books and Wordsworth’s general conclusions about the Revolution, the portions of the narrative that most acutely illustrate the confluence between medicine and politics at which the “Preface” only hints. During his first sojourn to France, narrated in Book Six, the poet makes palpable the joy felt by citizens in the immediate aftermath of revolution. He claims that “all hearts were open,” but qualifies many of his seemingly happy recollections with language that registers suspicion. The dancing French “swarmed” and “some vaporized in the unruliness of joy,/ And flourished with their swords as if to fight/ The saucy air.”317 These “delights” possess an undercurrent of depravity: in their festive movements the people are described as chaotic insects that, like the mob in Smith, swarm and contort themselves, carried away by their own ebullience. Moreover, several individuals withdraw their swords and jab at the air, as if in battle with an invisible enemy. Wordsworth, in a moment of subtle foreshadowing, positions the revolutionary cause of the French as nothing more than air. Their battle is simply an imaginary one, undergirded by insubstantial, utopian values. Despite the fact that “the fife of war/ Was then a spirit-stirring sound indeed,” the poet remains somehow distant from the action, his heart remaining only partially open to the joy of the French. He writes, “I looked upon these things/ As from a distance—heard, and saw, and felt,/ Was touched but with no intimate concern.”318 Trying to escape the enthusiasm of revolution is difficult. The affective exposure and transmigration engendered by the openness of the revolutionaries’ hearts follow the poet back to London, where he asserts “the pulse of being everywhere was felt.”319 And though seemingly surrounded by the “divine effect of power and love,” Wordsworth is not untouched by the “present”: “I trembled, thought of
human life at times/ With indefinite terror and dismay,/ Such as storms and angry elements/ Had bred in me; but gloomier far, a dim/ Analogy to uproar and misrule,/ Disquiet, danger, and obscurity." His terror, exacerbated by the “pulse” of revolution, recalls an earlier moment in the poem (in Book Six) when, suffering from melancholy, Wordsworth evokes an historical definition for the condition as an irritation of “humours of the blood.” Contaminated blood and a quickened pulse are both symptoms of heart disease, according to contemporary medical practitioners. Alberti cites “the irregularity of pulsations, a ‘sort of rushing’ felt through the body,” as well as “extremes of emotion” and a variety of temperamental “derangements” as signs of angina pectoris. Eventually, “palpitations of the heart” and “trembling” ensue, often leading to what we would, today, identify as a heart attack.

Significantly, these symptoms can be traced back to the poet’s first French journey. Once the narrative returns to France in Book Nine, Wordsworth proclaims that he “feel[s]/ An impulse to precipitate [his] verse.” Simply recalling the experience, we are told, quickens the poet’s pulse. Upon arriving in France, he sees “the revolutionary power/ Toss like a ship at anchor, rocked by storms,” using the same metaphor of stormy weather that he previously employs to describe his trembling body. Bustling citizens hustle about Paris in “ant-like swarms,” and the poet, again maintaining the “distance” or objectivity that dissection requires, finds it difficult to make sense of the “wild” scene before him. Wordsworth has “read [...] the master pamphlets of the day,” those very same treatises by Burke, Paine, Wollstonecraft, and others out of which his own medico-politics stems, but he has yet “to see a regular chronicle which might shew—/[...] Whence the main organs of the public power/ Had sprung, their transmigrations, when and how/ Accomplished (giving thus unto the events/ A form and body), all things were to me/ Loose and disjointed, and the affections left/ Without a vital interest.” Though
ostensibly about the poet’s general confusion over the sequence of events that both led
to and continued to drive the Revolution, this passage also performs an essential
function in his morbid anatomy. Wordsworth constructs a body, wracked by disease to
mimic his own, out of his “disjointed” view of the revolutionary fervor, a corpse that he
can then open up in order to sift through the confusion. He deems himself a “patriot,” but
remains clearly aware of the debilities of that label. The “military officers” with whom he
associates are, likewise, walking corpses that, despite their commitment to the cause,
are slowly consumed by their politics. As he describes of one soldier,

His temper was quite mastered by the times,

And they had blighted him, had eat away

The beauty of his person, doing wrong

Alike to body and mind. His port,

Which once had been erect and open, now

Was stooping and contracted, and a face

By nature lovely in itself, [...] made by thoughts

Unhealthy and vexatious. At the hour/ [...] in which

The public news was read, the fever came,

A punctual visitant, to shake this man,

Disarmed his voice and fanned his yellow cheek

Into a thousand colors.326

A once beautiful man is marked physically by signs of the revolutionary malady, made
weak and dejected by “the times.” The symptoms of heart disease are made visible in
the soldier’s countenance, on his “face,” one of the first places that medical practitioners
look to confirm a case of angina pectoris.327 Importantly, his once open nature (and, by
extension, his open heart) is contracted by “unhealthy” imaginings. Wordsworth offers
the reader a tragic example of how the imagination can “eat away” at the body, targeting what he sees as its sovereign organ. Not only is the soldier afflicted by what appears to be a chronic disease of revolution, but a new “fever” erupts every time he confronts the “public news.” These are “shocks repeated every day,” and “felt” throughout the country, such that this disease, in plague-like fashion, quickly spreads its affective punishments from heart to heart. In this case, unlike the heart-to-heart transfusion that Wordsworth describes earlier, affective infection is conceived of as a pestilence that produces sickness and confusion.

The flashes of disease and disaster that haunt the revolutionary body in Book Nine are magnified in Book Ten and gradually reveal the poet’s disillusionment with the French cause. After the fall of the King, the crowds “swarm” with joy, “a race of victims—so they seemed” who “had assumed with joy/ The body and venerable name/ Of a republic.” Walking through Paris, following his return to the city, Wordsworth observes a public square, “heaped up with dead and dying,” the result, but also a prophetic image, of revolutionary carnage. He “was most moved/ And felt most deeply in what world I was [...] And felt and touched [in] them [the massacres], a substantial dread.” The juxtaposition of the joyous, vitally charged crowd and the putrefying corpses draws out Wordsworth’s own confusion about the efficacy of revolution. The “body” of this new “republic,” though seemingly alive, is also simultaneously dying, a fact that can hardly be fathomed by the young poet. Though he is physically observing the events, their heinous magnanimity overwhelms reason, forcing Wordsworth to rely on “tragic fictions,/ And mournful calendars of true history,/ Remembrances and dim admonishments” in order to fully conceptualize what he sees around him. The importance of the imagination in this process cannot be underestimated; via its power, Wordsworth resolves “inly” that only the exercise of “self-restraint,/ In circumspection and simplicity” leads to political
liberty and order. Certainly, “tyrannic power is weak,” lacking “gratitude,” “faith,” and “love,” but “the godhead which is ours,” the sovereignty of the self, “can never utterly be charmed or stilled.” Only “equity and reason” should last, the poet claims, and “all else/Meets foes irreconcilable, and at best/ Doth live but by a variety of disease.” The smaller, internal “revolution” that the poet undergoes “at this one time” propels him to diagnose what he sees in France, the violence, death, and derangement of spirit, as a form of heart disease inaugurated by the delusions of revolutionaries. He wills himself to remain unaffected by its contagion, but admittedly feels “the ravage of this most unnatural strife in my own heart,” or what he calls a “pain of heart.” Without the ability to reason, “even thinking minds/Forgot at seasons whence they had their being,” the “heart-stricken” naturally fall victim to the disease of revolution, and herein lies the penultimate threat of a distempered imagination. Since we “cannot but chuse to feel,” to respond to the “[heart]beat/ Of those atrocities,” affective infection carries with it the possibility of destruction, despite its claim to liberty and communal unity.

Like Burke, who believes that post-Revolutionary French principles are dangerously “contagious,” Wordsworth perceives and, indeed, feels, the spread of the French malady, one that he views as attacking the heart of man. As James Chandler astutely points out, Wordsworth is similar to Burke in not simply content, but also idiom. In *The Convention of Cintra*, for example, Wordsworth decries the “pestilential philosophism of France.” He is as much a victim of its symptoms as others, but steadily (so he tells us) remains at a distance, attempting to quarantine himself in a cloak of “power and love.” Put differently, Wordsworth employs the imagination as a remedy for, or prophylaxis against, political disturbance. In this way, he manages to explore both sides of the medico-political debate about the imagination as a cause for upheaval and a potential cure. The French may cling to the “contagious air” of their ideals, imagining
themselves as liberators, but when considering his own body in relation to the disease of revolution, Wordsworth enlists the imagination (and its literary extension, the *Prelude* itself) as a useful filter that allows a measured amount of pathogenic material into the body (of the poem and the man), without completely annihilating it. However, he incorporates an auto-immunitary twist to this model, by “deadening” himself and his narrative in order to perform the dissection that will reach the “living body of society/Even to the heart.” Clearly, Wordsworth’s distinction between life and death is quite fluid, echoing definitions of vitality proposed by other Romantics.\(^\text{334}\) Here, Wordsworth advances a theory of “life-in-death,” akin to the Keatsian notion of “death-into-life,” in which the body is murdered in order to be revitalized.\(^\text{335}\) Once politicized, this argument figures individual resurrection, rather than collective insurrection, as a viable and healthy political condition. This conception of “life-in-death” ultimately fuels the poet’s resurrection of “sovereignty within.”\(^\text{336}\) Viewed in this way, Wordsworth’s claim appears to be not so different from Hobbes’s claim about the sovereign’s “Artificial Eternity,” reasserted by Burke in the *Reflections*. Hobbes acknowledges that because “all […] formes of government” are mortall, so that not only Monarchs, but also assemblies die, it is necessary for the conservation of the peace of men, that as there was order taken for an Artificial Man, so there be order also taken, for an Artificial Eternity of life; without which, men […] should return into the condition of War.\(^\text{337}\)

Hobbes is suggesting that the eternal continuation of sovereignty, that is, the life of the sovereign, must extend beyond the natural, physical lives of those persons who represent the commonwealth. He calls this “Artificial Eternity of life,” “Succession.” Without continual succession, the commonwealth becomes prey to war and invasion. “The only way,” Hobbes writes, “to erect […] a Common Power, as may be able to
defend them from the invasion of Forraigners, and the injuries of one another, and thereby to secure them in some sort [...] is to conferre all their power and strength upon one man, or an Assembly of men.”

In order to seek protection from foreigners, men must authorize the power of the sovereign, itself a force external to the assembly of men that protects them by infiltrating their multitude. This internalization of sovereignty forms the commonwealth of individuals who willingly and consensually become subjects of the sovereign power that they themselves confer. Note the immunological language that Hobbes invokes: by describing sovereign protection as a guarantee against foreign invasion, Hobbes uses the same medico-political logic that Stranger’s 1802 treatise on contagion embraces when it describes disease as a military enemy that persistently seeks to invade the body. In both cases, a clear distinction is maintained between inside and outside, a differentiation that arises only after an initial infection.

The sovereign, or “Artificiall Man,” is also the heart of the commonwealth; he “maintains his resemblance to the Naturall [Man]; whose veins receiving the Bloud from the severall Parts of the Body, carry it to the Heart, where being made Vitall, the Heart by the Arteries sends it out again, to enliven, and enable for motion all the Members of the same.”

Hobbes’s account of circulation echoes major medical texts of the seventeenth and eighteenth centuries that elevate the heart as the sovereign organ of the body. Most famously, William Harvey’s treatise On the Motion of the Heart and Blood (1628), a confirmed influence on Hobbes’s Leviathan, proclaims that “the heart of animals is the foundation of their life, the sovereign of everything within them,” and “the King, in like manner, is [...] the heart of the republic.”

Burke extends Hobbes’s reasoning, arguing that hereditary titles can be said to “live on” even after the bodies of those who possess those titles expire: “the idea of inheritance furnishes a sure principle of conservation, and a sure principle of transmission.” “The whole” of the body politic, he explains further,
“moves on through the varied tenor of perpetual decay, fall, renovation, and progression. Thus, by preserving the method of nature in the conduct of the state, in what we improve we are never wholly new; in what we retain we are never wholly obsolete.”

Wordsworth does not incorporate loyalist sympathies wholesale into his narrative; instead he deviates slightly from both of these positions by asserting a liberal conception of sovereignty as the rule of each individual over himself. In this sense, he relies more on a Smithian notion of “self-command,” an individualized power directed by the imaginative presence of the impartial spectator. Wordsworth’s politics are fueled by neither absolute sovereignty nor mass revolution, but rather by attention to “private obligation,” that is, to the sovereign individuality that emerges from an essential immunity.

Wordsworth is clear that the Revolution returns its supporters to a Hobbesian state of nature, a clearly undesired condition: “To Nature then,/ Power had reverted: habit, custom, law,/ Had left an interregnum’s open space/ For her to stir about in, uncontrolled.”

His use of the term “interregnum” to describe the period in which France is between kings is even more significant in light of the connections I am making between Wordsworth’s conception of “sovereignty within” and Hobbe’s political theory. The chaos associated with an interregnum would not have been unknown to Hobbes, whose discussion of sovereignty in *Leviathan*, as the “natural” form of political order, was written in direct response to the English Civil War and particularly the execution of Charles I in 1649. Whereas Hobbes advocates absolute sovereignty, for Wordsworth only a resurrection of the sovereign immanent in every body, fueled by a virtuous Imagination and the modulation of excessive affect, can cure the heart disease that he has identified in the corpse of the Revolution. Wordsworth clarifies this position in Book Nine, asserting that the
Imagination, potent to enflame
At times with virtuous wrath and noble scorn,
Did also often mitigate the force
Of civic prejudice, the bigotry,
So call it, of a youthful patriot’s mind,
And on these spots with many gleams I looked
Of chivalrous delight. Yet not the less,
Hatred of absolute rule, where will of one
Is law for all, and of the barren pride
In those who by immunities unjust
Betwixt the sovereign and people stand.344

The poem, then, in its function as an imaginary artifact, works on and in the reader as a preventive agent against future mass revolt by perpetually steering the imagination away from collective subversion and towards the revitalization of the sovereign heart.

“Absolute rule” occupies a position opposite revolution on Wordsworth’s political spectrum, but both forms are perceived as excessive in some way. The tyranny of a totalitarian ruler, lacking an affective connection to the people over whom he reigns, is excessive in its utter deficiency of feeling. By contrast, the swarming mob of revolutionaries, in their “uncontrolled” state, harbor and exude too much feeling.

Wordsworth refers to the legal definition of immunity in this passage, a sense of the term that, as I explored above, was gaining currency in the emerging science of biomedicine due to the public discussion of vaccination in the 1790s and beyond. Also important here is the distinction that the poet implies between the French mob of earlier sections and “the people.” Those who thrive despite their “barren pride” are the public officials who, according to French law, receive immunity from political prosecution. The poet's attempt
to seek out a middle way for political agency, however, problematizes his own view of
immunity. Taken seriously as an extension of the poetic project ignited by the *Lyrical
Ballads*, the *Prelude* quite explicitly demonstrates that sovereignty (individual or
otherwise) immunizes rather than communizes and that poetry actively participates in
this process of immunization. If community, Roberto Esposito writes, “is that relation,
which in binding its members to an obligation of reciprocal donation, jeopardizes
individual identity,” then immunity “is the condition of dispensation from such an
obligation.” Furthermore, immunity as the negative form of community, “to the degree
it protects the one who bears it from risky contact with those who lack it, restores its own
borders that were jeopardized by the common.” By advocating self-sovereignty and
individuality, Wordsworth actively undermines the communitarian foundations of the
“universal human heart.”

Wordsworth begins concluding his project in Book Eleven, openly declaring that
“thus I was at war against myself.” The confrontation with selfhood that the poet
experiences by opening his “deaden[ed]” body and exposing his own heart intersects
with the French Revolution and the wars that erupted in its wake. As in Wollstonecraft’s
work, the *Prelude* illustrates the intractable connection between individual and collective
health and the body’s material importance to this connection. Wordsworth’s corporeal,
beating heart, complete with its palpitations and pains, responds to his temporal
environment. He consistently reminds the reader about the ways in which events are felt
physically in his body and in the bodies of others. Yet, at the same time, he wishes to
convince the reader that the object of his politics and poetics is to reaffirm the seemingly
immaterial space of human sympathy. By overlapping his own body with the anatomy of
the revolution, Wordsworth is able to dissect them concurrently, ultimately revealing his
contention that “society has parted man from man,/ Neglectful of the universal human
However, the object of dissection is precisely to cut open or off portions of the body, illuminating the corpse’s materiality as a construction of living parts. The very form of the *Prelude*, then, and of Wordsworth’s poetics more generally, negates the genuine communality implicit in the poet’s conception of a “heart” shared by all. His theme, he tells us, has been “the very heart of man/ As found among the best of those who live,” an assertion that is immediately at odds with the heart’s claim to universality. In ways similar to his statement in the “Preface” about poetry’s mode of inclusion and exclusion, the community shared within the seemingly inclusive affective space of the “universal human heart” is actually exclusive, limited to “the best of those who live.” The “best” in Wordsworth’s understanding are those who manifest “lord[ship]” over himself” or “sovereignty within,” a form of “freedom” that “alone is genuine liberty.” Wordsworth’s ideal political community is one composed of men who maintain their “individual state[s],” whilst still being connected by the “diffusive sentiment” of self-sovereignty. Unlike absolute sovereignty that invests power in one individual, the diffusion of sovereignty advocated by the poet allows each man to rule over himself. He is absolutely clear about the imagination’s role in this immunity:

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Imagination having been our theme,
So also hath that intellectual love,
For they are each and each, and cannot stand
Dividually. Here must be thou, O man,
Strength to thyself—no helper hast thou here—
Here keepest thou thy individual state: [...] 
The prime and vital principle is thine
In the recess of thy nature, far
From any reach of outward fellowship.
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The man who achieves this state, empowered by the imagination, “shall want no humbler tenderness, his heart/ Be tender as a nursing mother’s heart.” To maintain this immunity, the human heart, now healthy, must strive to prevent excesses of affective infection. If these sentiments are connected back to the arguments that Wordsworth makes in the “Preface” about poetry’s ability to prevent affective excess, then they make explicit that the “timely exercise” of reading poetry insures continuous immunity by fostering the individual’s indivisibility from itself. According to Wordsworth, the process of reading poetry is (or should be) a constant resurrection of self-sovereignty, encompassed by the very act of abstraction (embodied, again, in the impartial spectator) that maintains the dichotomy between the physical heart and the metaphorical one.
Chapter 3

Playing Doctor: Individuality, Property, and Health in Austen’s *Sanditon*

If reading poetry, according to Wordsworth, maintains the immunological process that underlies proper individuality—that is, the subjective cleave that segments humans into disparate, private identities—then what place does the novel occupy, if any, in the formation and maintenance of political subjectivity? If we follow Wordsworth’s own assertions, then the “frantic novel” must be viewed as one of many forms of excess that undermine self-sovereignty. The novels of Jane Austen, however, simultaneously uphold and critique individuality; in particular, they reveal some of the holes in enlightenment theories of sovereignty, property, and liberty by closely examining the unevenness of human relationships and especially the lack of female agency in early nineteenth-century society. Austen is strikingly adept at illuminating those moments in human life when conventions seem utterly absurd. Her heroines are often extremely attuned to the strangeness that pervades human encounters. These nuances, though certainly entertaining, have a specific narrative function: they scrutinize the very foundations of “proper” human subjectivity. Austen essentially authorizes this elemental subjective process and, at the same time, exploits the ways in which fiction both lends authority to individuality and undermines it. According to Locke, in the *Second Treatise of Government*, “every man has a property in his own person: this no body has any right to but himself. The labor of his body, and the work of his hands, we may say are properly his.” The man who is invested in himself is necessarily “proper”; he is his own. Self-possession extends from this formula, as does individuality. As I explained in chapter two, individuation occurs when one is sovereign over himself. In Lockean terms, one becomes an individual via the separation of one’s private property (including his own body) from what is common. Property involves an abstraction from “the common state,”
a kind of parceling out of the world that establishes individual ownership. If property is instinctively tethered to the body that labors to produce it, then what happens to one’s personal property when illness or disease disrupts bodily stability? And, if women do not labor in the Lockean sense, then how do they establish self-possession? How are their bodies important to the human economy of Austen’s imagined, yet intrinsically real, worlds? The novels explore the possibility that sickness can both enable and disable human (but especially, female) agency, by simultaneously reinforcing and subverting the Lockean model of individuality. They also illustrate how certain medical practices authorize individual subject formation for both men and women. Though John Wilshire claims that sickness and health, at least prior to Austen’s last novel, Sanditon, were themes “scattered, in a more incidental fashion, throughout the earlier books,” I argue that the stability of the body is an essential aspect of Austen’s narratives.\textsuperscript{353} Austen’s novels often attempt to both define and deconstruct the modern political subject by paying close attention to human physicality: the strength or health of the body, the position of one’s body or one’s place in both nature and society, as well as one’s relations to others, familial or otherwise. The networks of modern subjectivity that the novels highlight, but also authorize, manifest themselves on or through the human body. In this sense, rather than closed off, indivisible entities, Austen’s bodies are porous, ever evolving nerve centers for political and emotional change. Take, for example, the gradual return of Anne Elliot’s “bloom” in \textit{Persuasion}:

When they [the party assembled at Lyme] came to the steps, leading upwards from the beach, a gentleman, at the same moment preparing to come down, politely drew back, and stopped to give them way. […] As they passed, Anne’s face caught his eye, and he looked at her with a degree of earnest admiration, which she could not be insensible of. She was looking remarkably well; her very
regular, very pretty features, having the bloom and freshness of youth restored by the fine wind which had been blowing on her complexion and by the animation of eye which it had also produced. It was evident that the gentleman (completely a gentleman in manner) admired her exceedingly. Captain Wentworth looked round at her instantly in a way which showed his noticing of it. He gave her a momentary glance [...] which seemed to say, ‘That man is struck with you, and even I, at this moment, see something like Anne Elliot again.’”

Anne’s improved physical appearance, itself prompted by her position in nature (reflecting the importance of outdoor immersion to the health of Austen’s heroines), here triggers a chain of affection between herself and both previous and new acquaintances. Captain Wentworth is particularly struck by the “something” that reminds him of a younger Anne Elliott, and his renewed admiration for her is thus implicitly connected to their earlier engagement. The other “gentleman,” an appellation that, in this case, is totally defined by the individual’s “manner” (a combination of bodily deportment, dress, and carriage) is also clearly taken by Anne’s fresh “complexion.” His gentlemanly demeanor marks him as a man of property, although we discover later in the novel that Mr. Elliot’s financial losses have been great. Anne’s healthy physical presence is directly linked to her marriageability, one of the only vehicles to property and status that a woman can take in the realistic worlds that Austen constructs. Anne, limited by her gender in traditional property relations (indeed, she, like the Dashwood sisters in Sense and Sensibility, is shuffled from one property to another in the novel, largely because her “place” in society as a married woman has not yet been determined), must rely on the stability of her body in order to attract attention. Anne’s “recovery,” because it propels her out of the background of human relations, allows her to be noticed and to develop a distinct identity—the very form of limited individuality that undergirds modern political
subjectivity. She ultimately chooses to marry Captain Wentworth despite the wishes of her family. Thus, she exercises the liberty to choose that reinforces a status quo in which women are subject-properties whose identities are determined by a set of property relations that they are officially barred from entering. At the same time, Anne’s recovery is linked to the naval/nautical culture associated with post-Waterloo British nationalism. Her refreshed appearance remains tied to Britain’s own political and military successes. Like Maria’s nervous body in Wollstonecraft’s 1797 novel, Anne’s body registers the fluctuations of British politics. The radical nature of Austen’s critique of property relations and individuality extends from the fact that Anne appears to be freest when she is, legally speaking, the least free. As Austen hints at the close of the novel, being a naval captain’s wife is eternally risky: “the dread of a future war […] could [potentially] dim her sunshine.”

Austen develops the connections among property, individuality, and the body found in *Persuasion* in her other novels. In what follows, I will draw out these connections further in both Locke and Austen in order to argue that Austen’s treatment of individuality is indebted to a specifically medicalized view of individuality that stems from Lockean political theory. Furthermore, through a close analysis of Austen’s last, unfinished novel, *Sanditon*, I will explore how contemporary medicine exploited the underlying relationship between property and the body. The expanding medical market of the late eighteenth and early nineteenth centuries, poised in a transitional state between the era of self-doctoring, or regimental medicine, and the credentialed clinical practices that transformed the patient’s body into an object of observation, increasingly figured the body as a source of profit, a kind of medical property whose health guaranteed national stability. Austen’s late novel looks forward, in both form and content, to a culture increasingly reliant on medical surveillance and the transformations that individuality undergoes as a result. The spa culture of Sanditon offers a model for the
kind of shifting subjectivities that the medico-politics of the period manipulates. These subjective shifts are mirrored in Austen’s fragmented prose; the characters of the novel are both “formed” and “deformed” by the authorial doctoring of Austen’s narration and simultaneously by the wellness culture in which their identities are played out. In this way, Austen uses medicine to question how “character” or subjectivity is established and she does so by interrogating the ways in which property and the body intersect in a typical spa town.

Thomas Tierney writes that “self-ownership” as the “foundation for the liberal notion of private property [...] shape[s] individuals to follow certain routines in their behavior,” and “to treat their bodies in specific ways.” Furthermore, this conditioning of the body, Tierney argues, “served an important role in making people amenable to the discipline of medicine.” Locke, himself a physician, recognized the long-term benefits of a proper “Government of Health,” in which the body, via regimen, preserves itself. Regimen and other self-help techniques “helped to instill the obligations of self-preservation and self-ownership in individuals” who needed to “be trained in the proper use of their primal property.” Locke frequently makes clear that health is a valuable asset to civil society. He opens his 1693 treatise, Some Thoughts Concerning Education, by claiming that “a sound mind in a sound body, is a short, but full description of a happy state in this world” and that “he, whose body is crazy and feeble, will never be able to advance in it.” “How necessary health is to our business and happiness,” he asserts, imploring parents to pay close attention to the “preservation and improvement” of their children’s health “without the help of physic.” Healthy children grow into healthy adults, the very individuals whose sound constitutions allow them to “advance” in the world and to carry out the “business” necessary to an ordered society. The importance of individual health to the body politic is already noted by Locke in the Second Treatise: “No
one,” he asserts, “ought to harm another in his life, health, liberty, or possessions,” for each man “is bound to preserve himself” and to strive to “preserve the rest of mankind.” For Locke, “civil government is the proper remedy for the inconveniences of the state of nature” in which self-preservation and self-ownership are not respected. Part of this remedy lies in the constitution of private property, self-ownership through the act of labor that emerges when man is “master of himself and proprietor of his own person.” Appropriation, implicit in the laboring self, induces man to “join in society with others […] for the mutual preservation of their lives, liberties, and estates, which I call by the general name, property.” Because the primary aim of civil government, what Locke deems “the chief end […] of men’s uniting into commonwealths,” is the “preservation of property,” the health, well-being, and livelihood of its citizens remain a dominant concern.

Naturally Locke advocates regimen; guaranteeing the health of citizens’ bodies through preventative measures simultaneously guarantees the health of civil governments. Protecting one’s property, the very source of the commonwealth’s strength, includes protecting oneself from disease. Illness and bodily dissipation threaten man’s mastery over himself by disrupting the labor that creates property, thereby weakening the bonds that undergird the commonwealth. Roberto Esposito explains these vital connections thus:

Just as work is an extension of the body, so is property an extension of work, a sort of prosthesis that through the operation of the arm connects it to the body […] not only because property is necessary for the material support of life, but because its prolongation is directed to corporeal formation. […] The body is the primary site of property because it is the location of the first property, which is to say what each person holds over himself. […] Seeing how through work the
appropriate object is incorporated into the owner’s body, it then becomes one with the same biological life.\textsuperscript{361}

Important here is the notion of “prolongation”: increasing one’s life expectancy ensures the maximum protection for one’s property (both the self and its outward, material prostheses). Esposito implies that because property is localized in the body, its manifestation and maintenance are irrevocably bound to the body’s vitality, a condition dependent upon health. Locke’s and Esposito’s sentiments on health and vitality, and their importance to self-preservation and self-ownership, are corroborated by preventative medical texts of the period. The preface to James Parkinson’s \textit{Medical Admonitions Addressed to Families, Respecting the Practice of Domestic Medicine and the Preservation of Health} (1799) addresses the importance of the circulation of medical knowledge to the maintenance of health, and subsequently, vitality: “Convinced that many lives are lost by neglecting to apply sufficiently soon for medical aid, and by improper treatment of diseases by domestic practitioners, the writer of the following observations offers them to the public, with the pleasing hope that they may lessen the number of victims to negligence and presumption.”\textsuperscript{362} Note that Parkinson attributes medical negligence to both domestic techniques, those encompassed by self-doctoring, and to the lack of speed with which patients and families appeal to “medical aid,” that is, the advice of trained professionals. Parkinson’s treatise, published at the end of the eighteenth century, reflects the different forms of medical treatment to which individuals appealed. Though still largely reliant on regimen and home remedies, the British population was increasingly encouraged to consult doctors for medical advice.

Austen’s novels, as precursors to nineteenth-century realism, uniquely employ narrative techniques that echo the kind of “clinical” or “medical” realism that accompanied the commodification and institutionalization of medicine in the early
nineteenth century.\textsuperscript{363} 
\textit{Sanditon}, in particular, epitomizes this clinical style, in which an author offers "a consistent \textit{medical} view of [her] characters—that is, a view in which illness would be articulated along with, and as a means of illuminating, the developing life of an embodied self."\textsuperscript{364} In addition to the ways in which Austen (and by extension, her narrative voice) plays the authorial doctor, an issue that I will explore in more depth below, the novel also addresses the fluctuating opinions about medical professionalism held by middle-class citizens, evidenced above by Parkinson’s admonitions. The period from roughly 1794 until the passage of the Medical Act in 1858 was an era typified by medical reform as well as "the transition from the disparate group of mid-eighteenth-century practitioners […] to a structured and unitary profession in the mid-nineteenth century in which the ranks and divisions within the profession were clearly demarcated."\textsuperscript{365} While many individuals believed that medical treatment should be directed by a trained doctor, some remained tied to the tradition of vernacular self-help, communicated via popular medical literature. However, the increasing specialization of medical practices made medical literature much less accessible to general readers. Medical texts gradually transformed from motley guidebooks to physical and moral health, sometimes written by a doctor, but often not, to technical manuals written by medical professionals for their trained colleagues. \textit{Sanditon}, as what one critic calls a "manic satire on medical consumerism," uniquely captures how the broad changes in medical care occurring at the macro-level were absorbed into, and had important material effects upon, local economics.\textsuperscript{366} The novel’s setting, a typical coastal spa-town in Britain, signals the text’s often critical consideration of eighteenth- and nineteenth-century cultures of wellness, milieux engendered by a medical market that targeted middle- and upper-class consumers. These cultures of wellness were sustained by, but also encouraged, the popularity of retreats designed to “cure” or “prevent” a variety of
ailments, from gout to infertility. As *Sanditon* makes clear, these spa-communities (with Bath being the most prominent) were economically driven; property investments made by wealthy patrons (like Lady Denham in the novel) could produce significant profits. However, because resorts were subject to the whims of fashion, investment remained risky. The persistence of speculation in the novel, both as a form of financial investment and as a means of assessing characters’ identities, illustrates how Austen’s late novel is as much about the subjective economy of character formation as it is about financial exchanges of goods and services.

The novel opens rather succinctly, utilizing the kind of clinical distance found in accident reports and medical case studies of the period.367 We are told that the carriage belonging to “a gentleman and lady traveling from Tunbridge” was “overturned in toiling its long ascent.”368 This “accident,” like many others in Austen’s novels, facilitates a meeting between two characters, Mr. Parker and Mr. Heywood, which becomes the condition of possibility for the primary trajectory of the narrative.369 As Parker enthusiastically explains while looking upon a “romantically situated” cottage affixed to Heywood’s estate, “There, I fancy, lies my cure.”370 Parker’s assertion possesses three essential layers. We learn, several sentences later, that the gentleman has injured his ankle and will require care, a service he believes could be temporarily rendered by the inhabitants of the cottage. Though he claims that “the injury to [his] Leg is [...] very trifling,” Parker nonetheless maintains that “it is always best in these cases to have a surgeon’s opinion without loss of time.” Parker hopes that one of the inhabitants is the surgeon that he and his wife are traveling to seek out in order to entice him with an offer of employment in Sanditon. To his surprise, however, a surgeon is not “at hand,” but Heywood assures him that “we shall do very well without him.”371 Finally, Austen implies
that the “romantic” image of the cottage, its potentially picturesque situation, has a palliative effect upon the viewer.

Parker’s statement also includes a subtle critique of the kinds of romantic, pastoral voyeurism that Austen exposes elsewhere in her oeuvre. *Sense and Sensibility*, in particular, highlights the fad for pretty landscapes and rural cottages of which Parker has become a victim. Marianne confesses to Edward that

‘it is very true [...] that the admiration of landscape scenery is become mere jargon. Every body pretends to feel and tries to describe with the taste and elegance of him who first defined what picturesque beauty was. I detest jargon of any kind, and sometimes I have kept my feelings to myself, because I could find no language to describe them in but what was worn and hackneyed out of all sense and meaning.’

Edward’s response, in which he claims to “not like ruined, tattered cottages,” certainly counters his brother’s feelings on the subject. In a later conversation, Robert tells Elinor that he is “excessively fond of a cottage; there is always so much comfort, so much elegance about them. And I protest, if I had any money to spare, I should buy a little land and build one myself, within a short distance of London, where I might drive myself down at any time, and collect a few friends about me, and be happy. I advise every body who is going to build, to build a cottage.”

Robert’s “vapidly fashionable” reflections on cottage dwelling situate this essentially romantic trope as an object of derision for Austen. Because Robert and Parker, his equally “fashionable” cohort in the Austenian universe, view the cottage as a source of cure, the author’s latent criticism necessarily figures Romantic tropes as diseases rather than remedies. Marianne’s comment about the picturesque’s loss of meaning and Edward’s detestation of “ruined cottages” are clearly stabs at the literary and cultural fads engendered by Romanticism.
As Claudia Johnson contends, “one of the novel’s most painful ironies is that what has meant hardship and dispossession for [the Dashwood women] has meant something very much like regeneration to the shiftless men who retreat [to Barton Cottage] now and then.”376 The “sentimentalization” of the cottage is an extension of the “comfort” felt by the narrator of Wordsworth’s “Ruined Cottage,” whose very own “regeneration” stems from a tale of female adversity not completely unrelated to the narrative of the Dashwoods.377 The logic of Austen’s politico-economic critique of “ruined cottages” involves an unraveling of superficiality reminiscent of Wollstonecraft’s critique of Burke in *A Vindication of the Rights of Men*, a judgment that resurfaces in *Maria*. “A surgeon,” Wollstonecraft explains, “would tell you that by skinning over a wound you spread disease through the whole frame; [...] by smearing a sentimental varnish over vice, [you] hide its natural deformity.”378 Like the “sentimental varnish” that covers an infected wound, the picturesque beauty of a dilapidated cottage seen from afar hides the inherent societal inequities that make it the only viable option for the Dashwoods’s residence.

“Idle and selfish gentleman,” Johnson writes, “here take a spectatorial delight in the uncomfortably confined life to which the Dashwood ladies have been reduced, a delight which forestalls concern for the injustices that have placed them there to begin with.”379 In the case of Sanditon, Austen highlights the superficiality of cottage-building and figures it as a kind of fashionable disease: “the Village contained little more than cottages,” a reflection of the fact that “the Spirit of the day had been caught.”380 Though written some eight years before Hazlitt’s famous tome, *The Spirit of the Age*, Sanditon does not remain immune to the currents of English Romanticism. Instead, like Wollstonecraft before her, Austen uses tropes from the literary phenomenon that she strives to work against as fuel for socio-political critique. The “romantic disease,” it
seems, is not limited to human bodies, but spreads itself expansively into the material world that those bodies inhabit.

The introductory conversation that ensues between Parker and Heywood sets up a dichotomy that will be maintained throughout the fragmentary novel, one that posits medical professionalism against vernacular medical care. Like many rural parishes, Willingden, the site of Heywood’s estate, is not inhabited by a professional surgeon. This bit of news strikes Parker as perplexing, primarily because he has travelled to the area in search of a physician who has recently dissolved his “Partnership in the Medical Line.” Heywood clears the confusion by suggesting that the Willingden in question is not his parish but another similarly named place “seven miles off,” though he admits that “if Gentlemen were to be often attempting this Lane in Post-chaises, it might not be a bad speculation for a Surgeon to get a House at the top of the hill.”

381 Despite their slightly different opinions on the merits of institutionally trained medical practitioners like surgeons, Parker and Heywood both quickly align medical practice with the commercial market. Heywood’s comment suggests that a physician might succeed financially in the parish if more gentlemen in carriages frequented the high road. His wry observation also insinuates that medical men are purely profit-seekers who benefit from the illnesses and injuries of others. The aim of Parker’s journey to Willingden is specifically to inquire after a surgeon who has lately separated from his business partner and “wish[es] to form a separate Establishment,” most likely because financial gain would be greater. Parker’s intention is also commercially induced:

His object in quitting the high road, to hunt for an advertising Surgeon was also plainly stated;—it had not proceeded from any intention of spraining his ancle or doing himself any other Injury for the good of such Surgeon [...]; it was merely in consequence of a wish to establish some medical Man at Sanditon [...]. He was
convinced that the advantage of a medical Man at hand would very materially promote the rise and prosperity of the Place—would in fact tend to bring a prodigious influx.\textsuperscript{382}

Aware that invalids are increasingly seeking out the advice of medical professionals in addition to the various remedies offered in a spa-town like Sanditon, Parker wishes to enhance the profit and popularity of the town by employing a resident physician. Spa culture and the forms of invalidism that sustain it reflect “changes in the nineteenth-century medical market such as a restructuring of the doctor-patient relationship and the introduction of new diagnostic technologies.”\textsuperscript{383} In fact, physicians regularly recommended the “Bracing Sea Air” and “Saline [...] immersion” that Parker’s “sensations tell” him are needed in his own case.\textsuperscript{384} In \textit{A Second Treatise on the Bath Waters}, George Smith Gibbes argues that bath “waters possess very active powers when introduced into the body,” which may account for Parker’s elevated “sensations” as he thinks about the medicinal benefits of Sanditon’s water and air.\textsuperscript{385} William Buchan’s \textit{Domestic Medicine}, one of the most popular medical titles of the era, clearly advocates the practice of sea-bathing: “Such as can afford to go to Bath, will find great benefit from bathing and drinking the waters.”\textsuperscript{386} Though spa-towns are beneficial to those suffering from the gout and other illnesses, Buchan also recognizes that places like Bath are accessible mainly to middle- and upper-class consumers. As Roy Porter confirms, “the main public healing place in Georgian England was the spa” and “they were thoroughly commercialized.”\textsuperscript{387} Though spas were popular destinations for travelers from at least the sixteenth century, Phyllis Hembry remarks that “the first half of the nineteenth century was the period of maximum development for British spas.”\textsuperscript{388} Hembry notes further that between 1800 and 1850, “as many as 70 new British spa centers were established.”\textsuperscript{389} Parker’s initial descriptions of Sanditon, interlaced with the personal
history that he communicates to Heywood at their meeting, echo the staccato bursts of enthusiastic prose found in the kinds of advertisements aimed at marketing new spas to possible consumers. Parker confesses, for instance, that although he is "by no means the first of my Family, holding Landed Property in the Parish of Sanditon," his name "may be unknown at this distance from the Coast—but Sanditon itself—everybody has heard of Sanditon—the favorite—for a young and rising Bathing-place, certainly the favorite spot of all that are to be found along the coast of Sussex;—the most favored by Nature, and promising to be the most chosen by Man." Parker’s persistent advertising of Sanditon as a desirable destination squares well with the historical record, given the sheer number of spas operating during the period.

The role of the health spa in Austen’s narrative economy extends beyond its connections to finance. The spa town serves as a site for personal development; its very existence—and subsequent success—is contingent upon ill-health. As a place where people go to speculate—to see and be seen—the health spa functions as a location in which one’s character is formed under the persistent gaze of others. In this way, spa culture, like the burgeoning field of clinical medicine, helps to regulate the body, both its internal physicality (through medical treatment) and any external excesses that verge on social impropriety. Importantly, Austen explores those excesses through her unique metacommmentary on novel writing and reading. One’s authority as a reader (and a writer) of fiction plays directly into one’s ability to read the bodies of others. As a result, Austen’s characters, along with Austen herself, employ the same medical gaze that professional doctors use to read the symptoms of their patients in order to make a diagnosis. Medical culture, then, provides Austen with a useful model for the ways in which character(s) should be constructed and read. The battle waged between Parker’s desire to bring a real doctor into Sanditon’s fold and the resistance that he encounters
from some of the town’s inhabitants (especially Lady Denham, his partner “in [...] Speculation”) to employ a doctor, encapsulates a much broader tension between competing forms of subjectivity. On the one hand, the role of the doctor is precisely to subject the patient to observation and treatment. On the other hand, self-doctoring forms the subject through various kinds of self-discipline. In both cases, bodily excess (disease, mental instability, etc.) is modulated. Clinical medicine, then, appears to undermine Lockean self-possession by removing one’s ability to work on oneself. Professional doctoring, which places authority over the body in the hands of a few, produces a novel kind of individuation and, important to Austen, a new kind of characterization.

Parker’s attempts at “selling” Sanditon’s eminence as a popular resort to Heywood are disrupted at every turn by Heywood’s subtle disdain for spas in general: “Every five years,” he proclaims, “one hears of some new place or other starting up by the Sea, and growing the fashion.—How they can half of them be filled, is the wonder! Where People can be found with Money or Time to go to them!—Bad things for a Country;—sure to raise the price of Provisions and make the poor good for nothing.”

Parker counters Heywood’s conservative opinion with yet another, insisting that “a small Village like Sanditon, precluded by its size from experiencing any of the evils of Civilization,” is “the sure resort of the very best Company, those regular, steady, private Families of thorough Gentility and Character, who are a blessing everywhere, excite the industry of the Poor and diffuse comfort and improvement among them.”

Both men associate the resort with luxury and with the leisurely pursuits of the landed gentry; however, whereas Heywood views spa culture as a detriment to economic stability because its popularity risks inflating the cost of goods, thus disabling the poor from cheaply procuring needed provisions, Parker implies that the well-being of the upper-
classes will serve as a healthy model for the behaviors and attitudes of the poor. Moreover, their conversation meanders into a topic related to the popularity of health spas, the sort of niche marketing that makes illness an almost desirable feature of middle-class life. “Never was there a place more palpably designed by Nature for the resort of the Invalid,” Parker declares, “the very Spot which Thousands seemed in need of.”

Sanditon is a place that “seem[s]” or appears, to be an essential destination for invalids, yet, in reality, it remains part of a manufactured culture of invalidism that, like other luxury goods and services, appeals to consumers’ notions of fashion. This phenomenon, Porter asserts, “signals a stage in medicine itself, with lay desires generating a medical consumerism integral to the wider development of market society.”

Spa culture is the commercially attuned byproduct of the cult of beauty and its equally prevalent antagonist, the cult of suffering, both features of popular culture during the Romantic period. As Maria Frawley notes, “the invalid was [...] a multivalent social actor, one who played the ‘sick role’ scripted in various ways by society and inflected by other dimensions of identity, chief among them gender, class, nationality, and religious belief.”

Because “the body is the repository of social tensions [that] in turn give rise to cultural phenomena,” the invalid’s physical self both reflects social, political, and economic tensions, and engenders them. As Parker’s and Heywood’s opinions make clear, the body of the invalid could be a source of profit, but also of financial loss and greater economic disturbances.

Not every character in Sanditon shares Parker’s enthusiasm for doctors. Indeed, spa culture and the wider phenomenon of invalidism uniquely encapsulate the dueling conceptions of medical treatment held by individuals during the late eighteenth and early nineteenth centuries. Parker’s sisters, confirmed invalids who suffer from a variety of ailments, refuse to rely on a doctor’s medical aid. In a letter to her brother, Diana Parker
attests that “we have entirely done with the whole Medical Tribe. We have consulted
Physician after Physician in vain, till we are quite convinced that they can do nothing for
us and that we must trust to our own knowledge of our own wretched Constitutions for
any relief.”397 “In intriguing ways,” Frawley contends, “the culture of invalidism existed
outside of the practice and understanding of medicine in the period.”398 At the same time
that some invalids sought out credible medical attention for their afflictions, the
increasingly scientific perspective employed by medical practitioners effectively excluded
invalidism from its worldview, except in systematically diagnosed cases of hysteria and
hypochondria, and later, neurasthenia. Medicine in the early nineteenth century was
gradually becoming clinical, relying more on careful medical observation, a technique
gleaned from professional study in institutions like hospitals, and less upon the
subjective feelings of patients. As Foucault explains, “the medical gaze was [...] no
longer the gaze of any observer, but that of a doctor supported and justified by an
institution, that of a doctor endowed with the power of decision and intervention.”399 In
Foucault’s terms, the gaze of the clinical doctor acts as a form of surveillance. Parker’s
siblings, in both conversation and correspondence, typify the kind of invalidism,
grounded in the self-help practices indicative of seventeenth- and eighteenth-century lay
medicine, that disdains the interference of doctors. By refusing to be treated by a
physician, the Parker sisters hold on to their agency and maintain their self-ownership.
Their continuous illnesses, though they disrupt the sisters’ ability to gain and protect
external, material property, nonetheless grant them control over their own bodies. They
ultimately succeed at protecting their independence because their status as invalids
allows them to escape some of the duties that their culturally ascribed gender roles
might otherwise dictate for them, such as marriage and childbearing. “The invalid
occup[ies] a fluid position within the [...] taxonomy of illness and health,” Frawley
contends. This fluidity extends to other aspects of the invalid’s life such that, as Frawley points out in regards to the invalidism of Florence Nightingale, persons deemed ill could bend or even thwart traditionally prescribed social roles. Illnesses, though certainly debilitating, could also enable an invalid’s individual agency.

Parker’s description of these “sad Invalids,” reiterated by their own letters, leaves open the possibility that his siblings’ ailments are products of imaginary affectation, rather than genuine, chronic illnesses. Sidney, another brother of the Parker clan, Parker proclaims, “will have it [that] there is a good deal of Imagination in my two Sisters’ complaints—but it is really not so—or very little—They have wretched health, [...] and are subject to a variety of very serious Disorders.—Indeed, I do not believe they know what a day’s health is.” We are also told, a few pages prior, that Parker himself is “of a sanguine turn of mind, with more Imagination than Judgment,” implying that his speculative investment in Sanditon as a marketable spa-town may be a mistake. This potential source of conflict is left unresolved in the novel; however, the narrator’s critique of Parker’s “enthusiastic” imagination, aligned as it is with the sometimes fanciful complaints, exclamations, and admonitions of the invalids, subtly insinuates that a critique of invalidism simultaneously serves as a critique of the Imagination. If linked back to the criticisms of revolutionary alarmism and its “imaginary dangers” made by radical and reformist commentators during the 1790s, Austen’s oblique denunciation of invalidism signals a politics of health not unlike the medico-politics of Wollstonecraft. In this way, Heywood’s suspicion that invalid culture is a “Bad Thin[g] for a Country,” is validated by the novel’s latent political assumption that an ill nation is necessarily a weak one. Any institution that undermines or discourages individual health is, by extension, a threat to the stability of the nation.
Though Sidney may speculate as to whether the Parkers’ symptoms are feigned or real, his own position in society, as well as Parker’s, is nonetheless determined by the culture of invalidism of which the siblings are a part, a milieu upon which the spa of Sanditon thrives economically.\textsuperscript{403} Parker’s rampant enthusiasm for his residence translates into a desire to fancy everyone ill. Though the Heywoods are “undeniably […]
healthy,” a condition, at first fostered by “Prudence’ but “now rendered pleasant by Habit,” Parker “foresaw that every one of them would be benefited by the sea. He held it as certain, that no person could be really well, no person (however upheld for the present by fortuitous aids of exercise and spirits in a semblance of Health) could really be in a state of secure and permanent Health without spending at least six weeks by the Sea every year.”\textsuperscript{404} Austen, miming Parker’s whimsical mental rambles, catalogues the Sea’s “nearly infallible” advantages: “Sea air and Sea Bathing together” are a match for every Disorder, of the Stomach, the Lungs, or the Blood; They were anti-spasmodic, anti-pulmonary, anti-sceptic, anti-bilious and anti-rheumatic.
Nobody could catch cold by the Sea, Nobody wanted Appetite by the Sea, Nobody wanted Spirits, Nobody wanted strength.—They are healing, softing, relaxing—fortifying and bracing.\textsuperscript{405}
Parker eventually convinces the Heywoods to send their daughter Charlotte to Sanditon with the Parkers “to bathe and be better if she could,” because she already possesses “excellent health.”\textsuperscript{406} In order to “capitalize” upon illness, Parker must construct a fluctuating definition of health, in which individuals can never be healthy enough or too healthy. This notion of health takes prevention to its logical extremes: rather than simply depending on the imagination to foresee potential illnesses, Parker’s concept of hyper-prevention actively employs the imagination to invent symptoms that do not exist, and will likely never exist.
As I discussed in chapter two, medical research in the late eighteenth and early nineteenth centuries was increasingly recognizing that the imagination had a powerful influence over the body’s reception, and expulsion, of disease. Haygarth’s conclusions about “imaginary tractors” attest to the importance of the patient’s mentality during illness and recovery. Parker’s reverence for the Sea and its myriad benefits triggers a physiological response that can only be explained through recourse to the type of imaginary power about which Haygarth writes. After arriving at Sanditon, “his Spirits rose with the very sight of the Sea and he could almost feel his Ankle getting stronger already.”407 A single glimpse at the sea acts as a placebo for Parker’s sprained ankle; he clearly relies on his imagination to render himself momentarily better. The fact that the Sea’s healing emanations are absorbed by the eyes offers a telling foil to clinical medicine’s mode of objective observation. Here the glance is not the authoritative gaze of a physician assessing a patient, but the look of an injured man, cast down to the calming waters of the ocean, out of which he acquires a temporary sense of relief. The healing effects of landscape viewing are threaded throughout Austen’s novels, though in most cases, a vigorous walk in the countryside is not a complete substitute for professional medical advice. Charlotte’s arrival in Sanditon leverages local opinion by introducing a viewpoint that ultimately remains suspicious of self-care. After hearing Parker read his sister’s personal letter, weighed down as it is by references to her and her siblings’ ill-health, Charlotte forcefully asserts that “in any illness, I should be so anxious for Professional advice [...] But then, we [the Heywoods] have been so healthy a family, that I can be no Judge of what the habit of self-doctoring may do.”408 Yet, Charlotte shows that she is willing to judge the Parkers on the subject of ill-health after considering Diana’s wavering symptoms “since [she] had been told by her feelings, that the Sea Air would be the death of her, and now she was at Sanditon, intending to make
some stay.” Austen informs us that “it was impossible for Charlotte not to suspect a
good deal of fancy in such an extraordinary state of health. [...] The Parkers, were no
doubt a family of Imagination and quick feelings— [...] Some natural delicacy,” she
concludes, “with an unfortunate turn for Medicine, especially quack Medicine, had given
them an early tendency at various times, to various Disorders; —the rest of their
sufferings was from Fancy.” Charlotte watches this process of affectation as it plays
itself out in the body of Parker’s younger sister, Susan. Unlike Parker’s glance at the
sea, Charlotte’s gaze is precisely attuned to the type of medical judgment required by
clinical practitioners, the kind of “distanced observation associated with clinical
realism.” The Terrace House, where they meet, quite fittingly contains a lovely view of
the Sea, an appropriate backdrop for the assembled crew of self-doctoring individuals.
Charlotte views Susan from across the room, “with a peculiar degree of respectful
Compassion,” a distance that purports to establish objectivity. Though Susan’s body
appears “more thin and worn by Illness and Medicine,” she nonetheless chatters
incessantly with the other guests. “And excepting that she sat with salts in her hand, took
Drops two or three times from one, out of several Phials already at home on the
Mantelpiece,—and made a great many odd faces and contortions,” Austen writes,
“Charlotte could perceive no symptoms of illness which she, in the boldness of her own
good health, would not have undertaken to cure, by putting out the fire, opening the
Window, and disposing of the Drops and the salts.” Though Charlotte never acts on
her impulse to “cure” Susan Parker, her willingness to momentarily embody the medical
counterpoint to the Parkers’ quackery places Charlotte in an intermediary position. Her
attempt to “assert the sovereignty of reason” and objectivity is slightly opposed to her
need to evince compassion for the patient. Though clearly an advocate of
professionally granted medical advice, she, at least in her mind, happily plays doctor just
like the others. Charlotte’s character, thrown as she is into the spa culture of Sanditon, reflects the transitional state of medicine in the early nineteenth century. Austen’s clinical style, often mimed by Charlotte’s pensive considerations of other characters, negotiates not only the transition between the “sovereignty of reason” reminiscent of the eighteenth century and “romantic ideas,” as Wiltshire points out, but also looks forward to the expansion of clinical medicine in the Victorian period. Sanditon is a novel poised between the medical discourses of empiricist curiosity and clinical objectivity.

“Eighteenth-century medical narrators,” Meeghan Kennedy explains, “authorize observation and plain speech but flirt with spectacle” whereas “nineteenth-century physicians valorize mechanical observation and clinical realism.” The clinical style that characterizes the opening of the novel gives way to moments of whimsy, driven by the affectations of figures like the Parkers and Lady Denham. Charlotte serves to re-anchor the narrative in the practical zone of the medical clinic, in which “spectacle,” one of the dominant features of invalid culture, is usurped by objective distance. The fragmentary status of the novel highlights the oscillation between these two modes; just as the novel was left unfinished at Austen’s death, the debate between medical subjectivity and clinical objectivity remained largely unresolved during the period.

Importantly, Charlotte’s own clinical gaze and her assumed authority over the other inhabitants of Sanditon are directly linked to Austen’s own narrative authority. The novel’s clinical style thus plays out the relationship between authority and subjectivity that exists in both medicine and in literature. Much of the novel is taken up with attempts to find the best vantage point or an authoritative perspective. Indeed, Austen’s own innovations in narrative aim for the same and Sanditon represents her most experimental attempt at omniscience, a trait that connects her writing to the realist novels of the Victorian period. The narrative cycles among a full third-person perspective
(as in the opening lines, “a gentleman and a lady traveling from Turnbridge...”), Parker’s harried thoughts (“Nobody could catch cold by the Sea, Nobody wanted Appetite by the Sea, Nobody wanted Spirits...”), Charlotte’s clinical, though often passionate, opinions (“I must judge for myself...”), and Lady Denham’s self-aggrandizements (“she had been too wary to put anything out of her own Power...”). If we include the perspectives offered by dialogue, then Austen’s authority is nearly all-encompassing. This imposition of medico-literary authority is illustrated in several moments of metacommentary in the novel, but more so by Charlotte’s heated conversation with Sir Edward over reading. During a trip to the “Library” (a place that, like literature itself during Austen’s life, contains many disparate kinds of products—books, as well as “rings and Broches”), Charlotte picks up a volume of Burney’s *Camilla* and vows that “she had not Camilla’s Youth” and so “had no intention of having her Distress.”

Here, Austen firmly announces her break with the eighteenth-century novel: however, she does so via the developing subjectivity of one of her characters. Charlotte’s rejection of the book, accomplished via observation (recall that she is in the Library to browse through “so many pretty Temptations”) is an important step in her development as Austen’s clinical prosthesis. Her ability to “check herself,” to stay objective, will play directly into her assessment of Sir Edward after their conversation. “She was a very sober-minded young Lady,” Austen informs us, “sufficiently well-read in Novels to supply her Imagination with amusement, but not at all unreasonably influenced by them.” The narrative, in a clearly clinical vein, remains suspicious about its own efficacy and, as a result, contains its own implicit surveillance system. Charlotte’s “checks” upon herself function simultaneously as narrative checks that ensure the novel’s authoritative perspective. The novel’s very setting, a spa town struggling to be “seen” by the public, is one in which surveillance (medical and social) is the norm.
Sir Edward’s exceedingly romantic discussion of literature and feeling exposes the kinds of excess that clinical and narrative authority try to counteract. Importantly, we are shown Edward’s excessiveness through Charlotte’s perceptive gaze. While observing Lady Denham and Clara Brereton (Edward’s suspected love interest in the novel), Charlotte also observes Edward’s reaction to the walking ladies “which altogether gave an hasty turn to [her] fancy, cured her of her halfhour’s fever [that is, her awe over Edward’s character], and placed her in a more capable state of judging.”  

418 By just looking at Edward, Charlotte declares that he is sufficiently “agreeable,” but their subsequent discussions, notably involving literary taste, reveal Edward to be a “Man of Feeling” in the most paradigmatic sense. When discussing the sea, Charlotte notes that Edward “ran with Energy through all the usual Phrases employed in praise of their Sublimity, and descriptive of the undescribable Emotions they excite in the Mind of Sensibility.”  

419 Austen’s critical stance, enunciated through Charlotte’s acute judgment of Edward, implies that the rather romantic idea of using scripted phrases, culled from literature (such as “Scott’s beautiful Lines on the Sea”), to describe the indescribable destroys the authority of realistic, clinical narrative, an authority dependent upon relaying what is precisely describable. Edward’s ensuing exposition over the “true soul” of Wordsworth and the way in which Campbell “touche[s] the extreme of our Sensations” prompts Charlotte to reflect on his reasons for speaking to her so passionately when it is clear that his real feelings are set aside for Clara. “His chusing to walk with her,” Charlotte surmises, “was done to pique Miss Brereton. She had read it, in an anxious glance or two on his side.”  

420 Charlotte diagnoses Edward as “very sentimental, very full of some Feelings or other, and very much addicted to all the newest-fashioned hard words—had not a very clear Brain she presumed, and talked a good deal by rote.”  

421 Edward, like Sanditon itself with its rows of rustic cottages, has caught the spirit of the
Austen’s narrative diagnosis, then, figures the romantic disease as a baneful influence upon clear, clinical, literary prose. Romantic disease, however, is not limited to poetic sublimities and philosophical obfuscations. Austen extends the chronology of “romanticism” back to the very sentimental novels that had initially influenced her own work. “The truth,” she writes

is that Sir Edward [...] had read more sentimental Novels than agreed with him. His fancy had been early caught by all the impassioned, and most exceptionable parts of the Richardson’s; and such Authors as have since appeared to tread in Richardson’s steps [...] had since occupied the greater part of his literary hours, and formed his character—With a perversity of judgment.

Edward’s character is “formed” by his excessive collection of “hard words and involved sentences,” which ultimately mar his judgment. He represents an earlier, largely subjective way of viewing the world while Charlotte symbolizes the clinical model of observation that relies on the vigilant and objective surveillance of bodies and things. Edward’s way of viewing the world is a clear extension of a medical Weltanshauung that is, itself, indebted to sentimental literature and its immediate successor, romanticism, a view in which signs and symptoms (such as the tear and the blush) are read in order to determine the often “undescribable” condition that exists within the body. Charlotte’s viewpoint is cemented by the piercing gaze of clinical objectivity, an approach that ostensibly opens up with body in order to expose what has been previously invisible. As Foucault explains,

in anatomo-clinical experience, the medical eye must see the illness spread before it, horizontally and vertically in graded depth, as it penetrates into the body, as it advances into its bulk, as it circumvents or lifts its masses, as it descends into its depths. Disease is no longer a bundle of characters
disseminated here and there over the surface of the body and linked together by statistically observable concomitances and successions; it is a set of forms and deformations, figures, and accidents and of displaced, destroyed, or modified elements bound together in sequence according to a geography that can be followed step by step.\textsuperscript{423}

Charlotte’s medical gaze then, is also the method by which Austen constructs her narrative. Rather than piece together “a bundle of characters disseminated here and there,” the author (as doctor) amasses a “set of forms and deformations, figures, and accidents” complete with “displaced, destroyed, or modified elements” in order to form a realistic narrative. I have already mentioned the importance of accidents in Austen’s novels earlier in this chapter, but displacement also figures as a frequent theme in her narratives. Her heroines are especially susceptible to reconfigurations: the lives of Anne Elliot and the Dashwood sisters are consistently defined by the ways in which they are shuffled from one position to another. Austen’s literary surveillance system encompasses these often jarring shifts along with the more regular movements of other characters and things. In essence, her authorial gaze, like the medical one, prevails because it enfolded both the regular and irregular, and importantly, uses the irregular as a way to define regularity—hence, the importance of excessive characters, like Sir Edward, to Austen’s medico-political message.

Just as Dr. Austen creates her characters by actualizing the invisible deformations and displacements that comprise real life, it is through the pervasiveness of surveillance that individual subjectivity is constructed in the clinical age. Medical surveillance functions not as a “body of techniques for curing ills” but instead, normalizes a certain idea of the healthy individual that it can then dictate through constant
The conditioning of the body that health-spa culture upholds reflects a transformation from the self-doctoring of invalids like the Parker sisters to the internalization of medical authority that prompts patrons to frequent spa towns in the first place. In other words, Austen’s illustration of wellness culture shows how individuals are embodying the doctor’s clinical gaze in order to constantly survey their health. Parker’s wish to bring a doctor to Sanditon emphasizes this transition. The doctor’s function would literally be to oversee the medical services that the spa offers to patrons and by extension, oversee the entire population of Sanditon.

On the other side of the medical debate, Lady Denham, the “great Lady” of Sanditon, questions the validity of professional doctors:

what should we do with a Doctor here? It would be only encouraging our Servants and the Poor to fancy themselves ill, if there was a Doctor at hand. Oh! pray, let us have none of the Tribe at Sanditon. We go on very well as we are. There is the Sea and the Downs and my Milch-Asses [...] Here have I lived seventy good years in the world and never took Physic above twice—and never saw the face of a Doctor in all my Life. 425

Contrasted with Parker’s and Heywood’s conversation about health and invalidism at the start of the novel, Lady Denham’s comments offer another insightful angle from which to view the relationship among ill-health, economics, and socio-politics. Rather than evince genuine concern for the laboring-classes, Lady Denham declares that medical authority only serves to make the servants and poor more idle. If an aristocratic woman can remain healthy without the interference of “Physic,” then it follows that the Poor would not benefit from professional care either. The implication is that the laborers have access to the same Sea, Downs, and potentially, to the very same ass’s milk that Lady Denham imbibes. However, historical statistics reveal that few members of the poor or laboring-
classes would have had enough leisure time to enjoy the coast and its therapeutic airs. Indeed, as a significant investor in Sanditon’s welfare, Lady Denham would be well aware that the village and other spa towns like it cater primarily to the middle and upper classes. A major conflict of the novel involves this very predicament, since Parker and his associates spend much time and energy finding wealthy individuals and families to vacation in Sanditon. There is the possibility, his sister writes, of “securing you two large Families, one a rich West Indian from Surry, the other, a most respectable Girls Boarding School, or Academy, from Camberwell.” This prospect concerns Lady Denham directly, not only because she has invested money in Sanditon’s success as a popular resort, but because she hopes a visiting heiress might be a good match for one of her potential heirs, Sir Edward. “Heiresses are monstrous scare,” she proclaims,

I do not think we have had an Heiress here, or even a Co- since Sanditon has been a public place. Families come after Families, but [...] it is not one in a hundred of them that have any real Property, Landed or Funded. [...] And what good can such people do anyway? [...] Now, if we could get a young Heiress sent here for her health—(and if she was ordered to drink asses milk I could supply her), and as soon as she got well, have her fall in love with Sir Edward! What Lady Denham fails to realize is that her plan requires the services of a medical professional, one of the few people who could feasibly “order” an Heiress to visit a Spa and drink ass’s milk. Her blinding reverence for property ultimately thwarts her ability to acknowledge the financial advantages of employing a trained physician at Sanditon. When an heiress, a very “sickly and rich” Miss Lambe, does arrive in the town, Lady Denham is shocked to find out that “all her calculations of Profit would be in vain.” Mrs. G., Miss Lambe’s traveling companion, “would not allow [her] to have the smallest symptom of Decline or any complaint which Asses milk could possibly relieve. ‘Miss L.
was under the constant care of an experienced Physician;—and his Prescriptions must be the rule’—and except in favor of some Tonic Pills, which a Cousin of her own had a Property in, Mrs. G. did never deviate from the strict Medicinal page.”

Though strictly reliant on the skills of an eminent physician, Mrs. G. makes a telling exception to her rules for some pills, the profit of which is gained by her own family. The connection made here between medicine and property neatly encompasses the ways in which medical practices were not in any way immune to the burgeoning capitalist system. The tonic pills, an infamous quack remedy said to cure a variety of illnesses and conditions, owe their existence to a medical marketplace, driven by profit, in which the care of the patient becomes a secondary concern. Michael Brown explains that “the later eighteenth and early nineteenth centuries appear to have witnessed an increase in the production and consumption of proprietary medicines.” The gradual reform of professional medicine made “unorthodox” forms of medical treatment much more transparent, and sometimes more desirable, to consumers. Tonic pills were just one of many remedies or preventative tools that patients could buy without consulting a physician, a luxury that many individuals could hardly afford. These drugs were freely advertised in newspapers and other periodicals and were made available “over the counter” in shops and on street corners. Called “patent” or “proprietary” medicines by historians, these pills, powders, and other nostrums appealed to customers who sought efficient, inexpensive means to cure or prevent illnesses. Patent medicines were often used as a supplement to professional medical advice and many were actively advertised as the chosen tonic of the wealthy. These “extravagant claims of patronage were common,” Irvine Loudon writes. One particular pill was “used with good effect, according to [its advertisement] by ‘The Dukes of Devonshire, Northumberland, and Wellington, the Marquesses of Salisbury, Angelsea, and Hastings, the Earls of Pembroke, Essex, and Oxford, and the
Though considerably different in its basic ideology from medical orthodoxy, quack medicine remained tied to the marketplace in like manner to the “tribe” of physicians who openly disdained it. Though Parker conveniently ignores his wife’s admonition that, along with his brother, Parker “carries” his ill-health “too far sometimes,” he agrees with his brother Arthur that “it is bad that he should be fancying himself too sickly for any Profession—and sit down at one and twenty, on the interest of his own little Fortune, without any idea of attempting to improve it.” Parker’s assertion importantly posits invalidism as an acceptable state for women, but not necessarily for men. Furthermore, male invalidism is deemed fanciful because chronic illness prevents men from taking respectable employment and subsequently increasing their income. Invalidism interrupts men’s ability to invest in, labor over, or create property, and hence, limits their development as individuals. In fact, apart from Arthur and Parker himself, all of the individuals who frequent Sanditon are female. Taking into account Austen’s entire oeuvre, only one other prominent male, Emma’s father Mr. Woodhouse, fitfully occupies the role of a persistent invalid. Invalidism, or even the sudden eruption of disease experienced by otherwise healthy women, simultaneously disrupts and reconfirms existing social patterns related to gender. While invalidism can grant women a form of unconventional independence, as in the case of the Parker sisters, it also re-enforces traditional views about women’s physical and mental weaknesses. The politics of Sanditon extend from a critique of “national” weakness to various subtle commentaries on the ways in which invalidism, and the medical markets tied to it, shape and manipulate the lives of middle-class women. Furthermore, Austen’s and Charlotte’s feats at “playing doctor” show how sickness, health, and the clinical judgment needed to determine these states are directly related to the formation of particularly modern subjects.
Chapter 4

The “Magnificent Drama” of Personhood: Humanity and Immunity in Shelley’s The Last Man

William Rowley’s 1805 anti-vaccination polemic, Cow-Pox No Security Against Smallpox Infection, contains a grotesque engraving of a young boy whose face is severely distended on the left side. The caption to the image, written in a contrastingly fluid script, reads: “Cow-Poxed, Ox-Faced Boy.” The boy seems to glare somewhat painfully at the viewer; because of his facial swelling, his eyes have expanded horizontally so that they are made to resemble the ox eyes of Homeric epic. The implication here is that this “victim” of vaccination, as Rowley wishes to paint him, has become distinctly other: an animal of sorts, more closely related to the fictional gods and goddesses of classical literature than to the humans who are supposed to be saved by the new method of smallpox prevention. Rowley’s treatise rails against the pernicious effects of vaccination and proffers the image of the ox-faced boy in order to assert his fear that an injection of animal matter into the human body will inevitably cause humans to transform into animals, at least partially. Benjamin Moseley, a colleague of Rowley’s and fellow opponent to vaccination, observed that “the boy’s face seemed to be in a state of transforming, and assuming the visage of a cow.” Moseley’s own polemical remarks on the cowpox blatantly confront the prospect that humans have no idea “what may be the consequence of introducing the Lues Bovilia, a bestial humor—into the human frame?” He suspects that vaccination may ultimately cause “the human character [to] undergo strange mutations from quadrupedan sympathies.” The sentiments shared by Rowley, Moseley, and other anti-vaccinationists reflect the belief that vaccination promulgates, in David Shuttleton’s words, “a blasphemous erosion of the firm category division between humanity and the beasts.” Moseley’s 1800 Medical
Tracts connects cowpox inoculation to other bestial diseases, insinuating that mixtures between animal and human matter are ultimately destructive. The introductory section on cowpox is immediately followed by a discussion of Yaws, another “distemper of bestial origin” about which little is known in Europe. Moseley, whose other works include treatises on tropical diseases and a novel on the West Indian practice of Obeah, makes explicit that the Yaws is an “African distemper” that “may be communicated to whites by inoculation” but that “breaks out in negroes without any communication, society, or contact,” that is, seemingly at random. Moseley, taking an overtly imperialist view of disease transmission, clearly qualifies the Yaws, because it extends from Africans, as a beastly disease. Cow-pox, then, is linked with other diseases (like Yaws) that extend from beasts, in the most expansively racist sense of that term. At stake here is the fact that, for Moseley, “beast” refers to any nonhuman other, even humans who, in his opinion, resemble animals.

For Moseley and his colleagues, the division between animal and human is a sacred demarcation. When the definition of humanity is in flux, a problem that routinely alarms the anti-vaccinationists, then the very nature of political subjectivity—grounded as it is on the development and fostering of individual persons endowed with certain legal and political rights—becomes strained. The tracts of Rowley and Moseley raise an important provocation about what exactly constitutes humanity. Moseley, for instance, in his Treatise on the Lues Bovilia, calls vaccination an “imposition on humanity” and a “brutal foe to mankind.” Both writers fear that vaccination calls into question the very qualities that make human beings human: signs of humanness that manifest themselves on and in the body. These qualities are compromised when humans, in a sense, become animals through vaccination’s failures. Despite the fact that humanity, and the political institutions that accompany it, evolve out of an animalistic state of nature—according to
Enlightenment thinkers like Hobbes, Locke, and Rousseau—vaccination threatens to overturn the seemingly natural progression out of animality that engenders humanity. What happens when this process is disrupted by an injection of animality back into the human body? The anti-vaccination debate exposes that this “natural” progression is utterly artificial: vaccination’s ultimate success as a prophylactic against small pox depends upon the radical idea that humans and animals are not totally distinct and that animal matter is necessary to humanity’s healthiness as a species. In a sense, humanity needs animality in order to sustain its own normativity.

In his book, Third Person: Politics of Life and Philosophy of the Impersonal, Esposito unravels this problematic issue by reading back into the political philosophy of some of the aforementioned Enlightenment thinkers, but especially Hobbes. To begin with, Esposito argues that the clear separation between personhood in its legal sense (persona) and humanity in its basic biological sense (homo) that pervades Roman law collapses in the modern period. He traces this collapse to the Enlightenment’s investment in reason as the fundamental determinant for human rights: “The moment all human beings were considered to be bearers of a rational will, regardless of differences in status and social standing, they were for this very reason also considered to possess a legal personality.” Furthermore, he explains, “the moment the person ceased to be a general category into which someone could be transferred, passing in and out of it the way they did in Rome, and became a quality implicit in every human being, it revealed itself to be different and superimposed on the natural substrate it was implanted in.”

One’s persona, especially after the French Revolution, began to be “identified with the rational and volitional or moral part of the individual, the part invested with a universal value” and, as a result, the split between homo and persona is “re-established within every individual [...] penetrat[ing] [the body] from the outside inside dividing the human
being into two areas: a biological body and a site of legal imputation, the first being subjected to the discretionary control of the second.” Esposito uses Hobbes’s explanation of sovereignty in *Leviathan* to explain the logic of the splitting that allows the artificial, legal persona to be superimposed on and in the biological body. I will explore this example in more depth below, but it is important to note up front how Esposito links personalization—the abstraction into personhood that modern subjectivity entails—to politics through Hobbes’s characterization of sovereignty. Because the sovereign “represents all other persons,” he is the penultimate example of an “artificial person” and, even more importantly, “before the sovereign is constituted nobody can define him- or herself as person, […] because in a state of nature everyone coincides with his or her living […] being” or, in Hobbes’s words, “such things cannot be personated, before there be some state of civil government.”

Esposito eventually links the biological body that is under the control of the rational person to the animal. “An animal part,” he writes, “is disclosed within the human: the human harbors the animal inside of it” and at least since “the Enlightenment, the human being is such—a person, that is—if it is in a position to control the animal, to dominate its animal life.” Personhood remains dependent on a kind of self-discipline that modulates animality within the body of the human. This form of regulation echoes the self-sovereignty that Wordsworth proffers in his poetry and prose, and which I examined in Chapter 2, because it allows the normative condition of personhood to sustain itself by suppressing an excess that the self nonetheless needs in order to function. As Esposito explains, animality is the necessary excess that guarantees the proper functioning of modern personhood. In this way, it follows the same logic as vaccination. The vaccination debate, then, challenges not only medical and social views on small pox eradication, but also the very categories that we use to define ourselves as
persons or non-persons. Yet Esposito’s theory resuscitates the latent animality within the human by appealing to Giles Deleuze’s notion of “becoming-animal,” a potential state that is markedly different from the bounded concepts of human and other because “unlike blood affiliations and racial membership,” that is, categories imposed on the body by the rational persona, the becoming-animal brings into relationship completely heterogenous terms—like a human being, an animal, and a micro-organism; [...] because what matters in the becoming-animal, even before its relationship with the animal, is especially the becoming of a life that only individuates itself by breaking the chains and prohibitions, the barriers and boundaries, that the human has etched within it.445

Esposito explores an alternate form of politics, based on the “becoming-animal,” that departs from the self-sovereignty that he identifies as endemic to modern personhood. The “impersonal,” emblematized by the “third person,” “points to this [...] being that is both singular and plural—to the non-person inscribed in the person, to the person open to what has never been before.”446 Esposito poses the impersonal as a kind of politics that does not take the person—and all of the strictures that this term comprises—as its basic unit. The impersonal is also not simply the opposite of the personal (i.e., the non-personal); rather it cuts across these categories and becomes the entry point at which a radically open form of politics can be imagined.

Esposito makes important claims about how modern politics has privileged the person as its foundational category and, as I noted above, he views this structure as originating in the period following the French Revolution when the concept of human rights and the definition of personhood were fervently debated. Much of the discourse of the period, anchored as it is in the language of the “rights of man,” considered exactly what rights could be (and should be) guaranteed to individuals at birth and as citizens.
As this book has explored thus far, particular attention was paid to the physical body, despite its contentious relationship to the rational, personal subject that was supposed to control it. I have tracked the ways in which the language and aims of medicine and politics combined, in the aftermath of the Revolution, as a means to define how individuals and nations should act when threatened by war and disease, dilemmas arising from both inside and outside of English society. I have also considered the aid that literature, as both a material expression of the imagination and a newly distinguished discipline, that is, a newly partitioned way of seeing the world, provided to this medico-political nexus of modern self-definition. The health of English political subjects and of the country in which they reside, a condition contingent upon a certain conception of immunity, is modulated by attention to what one eats, how much one exercises, the purity of the air one breaths, but also what one reads. Alan Bewell contends that *The Last Man*, Mary Shelley’s 1826 novel, “examines the limits of the social control of disease. When the epidemic takes root on the island, the British discover to their dismay that their social institutions do not constitute a safeguard.” In essence, Shelley’s novel scrutinizes the failure of the very forms of sociopolitical disease control that Wollstonecraft, and others of an earlier generation, advocate in their essays, novels, and poems. The discussion of the previous chapters has hinged upon a given conception of medico-politics as a human phenomenon, one that takes human needs and desires as its *raison d’etre*. Human-centered and human-constructed political institutions fail, however, to withstand the destruction of *The Last Man*’s great, nonhuman other: the plague. Perhaps the novel’s most powerful claim is that the medico-politics of Wollstonecraft’s generation—with its emphasis on human health and perfectibility—does not solve the immunological problem at the heart of human politics. Hence, every political model—from monarchy, to democracy, to socialism—that the
novel explores is quickly disassembled by its very own mechanisms. This final chapter will probe the immunological problem at the core of human politics, by reading *The Last Man* as a text that, in many ways, offers a capitulation of the medico-political agenda of the Revolutionary period. Shelley’s novel challenges the categories, like human and person, that the “rights of man” dialogue of the revolutionary controversy takes for granted. It does so, in part, by introducing a sublimely destructive entity into the sanctity of humanity: a plague that eventually destroys the human race, save for one individual, the protagonist Lionel Verney. Verney’s own struggle to seek acceptance in a society that, at first, shuns him, registers the larger immunological problem at the level of personhood. Verney cannot seem to fit into human society, even at the end when he becomes the last living representative of humanity, because he is a unique product of the larger immunological process that haunts human life. Though, as Esposito notes, all humans harbor a portion of animality inside them, Verney’s animality often overtakes his humanity, threatening the success of personhood’s immunizing logic. As a result, Verney must “play human,” constantly reprising his role in the “magnificent drama” of personhood. Verney’s plight unveils, and gradually disentangles, the fictional act—the taking on of personae—that makes human beings human. Shelley’s novel challenges personhood as the dominant social category by which we define modern political subjectivity and confirms the irrevocable interconnection between medicine and politics that undergirds the constitution of humanity, encapsulated in the concept of immunity. As Audrey Fisch comments, the novel is “an argument about how to change the conditions of politics in order to bring about political change,” and hence, “seems to provide a subversion of all politics.” Yet, Fisch’s claim that “Shelley’s innovative critique lies in her insistence that [the] political leaders [of the novel], and their systems, are flawed in their emphasis on the idealization of the male leader and their glorification of imperial
England,” misses the truly radical criticism that *The Last Man* stages against the foundations of human politics in general. It begins the construction, through its multifaceted critique, of a novel form of politics based on the impersonal, one grounded in a conception of literature as the ultimate defacement of the human. In what follows, I will trace the ways in which Verney’s (im)personal struggles—with animality, the plague, and even literature itself—represent and eventually challenge the complex immunological process that defines political subjectivity in the modern era.

Fuson Wang has aptly identified the ways in which the novel challenges the accepted categories of “humanness” in its Enlightenment sense. He explores the subversion of gender—embodied by the androgynous pair of the frame story and Evadne’s multiplicitous identity as lover, architect, and soldier—as well as of race and class. On somewhat different grounds, Cynthia Schooler William calls the novel a “profound inquiry into the insufficiency of categories” and traces this failing by interrogating the novel’s presentation of human-animal relations. Wang pinpoints Evadne’s “challenge to the ‘natural’ via destabilized categories of gender, race, and class” as a major moment of radical political potentiality in the novel, an aspect that he claims has been overlooked by previous critics. Though this chapter will not engage Evadne’s story to the same degree as does Wang, her identitarian dynamism offers a useful model for the way that human categories—and eventually the concept of humanity itself—are effectively combatted in the various narrative threads that the novel intertwines.

Whereas Evdane self-consciously subverts proper human identity through her vacillating roles throughout the novel, Verney often misrecognizes or misconstrues the events and actions that set him apart from the rest of humanity. Verney’s narrative functions using a similar ploy—both reader and author(s) (that is Shelley and Verney-as-
narrator) already know that Verney will be the last man. Verney-as-actor, the Verney who plays a character in his own narrative, must continuously play out his role despite our recognition of its futility: he “acts” human, and through his acting reveals the fundamental political act that defines personhood. In fact, the success of the literary narrative depends upon this play between recognition and misrecognition. The split between character and author (or actor and spectator) that Verney embodies, the disjuncture that is necessary for Verney to tell his story, keenly illustrates the split between body and persona (or animal and human) that personhood requires for its constitution. At the level of content, Verney wavers between misrecognizing his own humanity and recognizing, though obliquely, that humanity already contains its own disease and the source of its destruction. Verney’s animalistic gestures, however, safeguard him from annihilation. His interactions with birds, goats, and other non- and subhumans throughout the novel, as well as his own animal impulses and savage upbringing cause the reader (and often Verney himself) to question his humanity. “Verney’s failure,” Wang writes, “is the inability to transform [his] species shame into a familial embrace with [a] diseased negro.” Verney’s gestural denunciation of the negro towards the close of the novel, however, must be countered with the other successful and unsuccessful gestures that he enacts throughout, and which I will highlight below. Verney’s role as a human is constantly threatened by his physical needs and animal behaviors. In the end, he performs the ultimate dissimulation by playing human when his body remains tethered to the animal world. His own immunity from the deadly plague thus stems not from mild exposure to the disease, as Wang claims, but from his overflowing animality. Verney is guaranteed immunity from the plague by the very animal impulses that disrupt the immunological process that engenders personhood. Because Verney’s animalian core is never fully contained in the novel—despite his attempts to govern it—he develops an immunity to a
major pestilence that targets only fully-formed persons. As Wang points out, the plague in *The Last Man* “cannot circulate across different species.” Verney’s inhumanity—or impersonality—is what, at the end of the novel, allows him to survive as the last man. Yet, while Verney’s biological immunity saves him from a fatal disease, he fails to develop the political immunity needed to become a person. This failure, misconstrued by Verney even in the novel’s final moments, facilitates a novel way of thinking about impersonal politics.

At the beginning of the novel, Verney undergoes a process of transformation from animal to human that will later be undermined by the appearance of the plague. He explains that as a young man he “was as rough as the elements, and unlearned as the animals I tended.” Verney drifts “among the hills of civilized England as uncouth a savage as the wolf-bred founder of Rome.” The “savage habits” that underwrite Verney’s membership in the state of nature become “acts of tyranny” as he matures. The distance between Verney’s animal nature and his soon-to-be civil persona is figured geographically by his residence in the countryside, “far from the busy haunts of men,” a place where “the rumor of wars or political changes came worn to a mere sound.” The distant “changes” to which Verney alludes culminate in an abdication of the monarch and the institution of a republic, events that will come to invade, and superimpose themselves upon, Verney’s savage condition. The insertion of an outside, in the form of Adrian, the Earl of Windsor, into the pastoral milieu catalyzes Verney’s shift from animal to person. He refers to this imminent shift himself, as he describes an imagined meeting with his self-proclaimed enemy:

He would be hedged in by servants; nobles, and the sons of nobles, were his companions; all England rang with his name; and his coming, like a thunderstorm, was heard from far: while I, unlettered and unfashioned, should, if I
came into contact with him, in the judgment of his courtly followers, bear evidence in my very person to the propriety of that ingratitude which had made me the degraded being I appeared.\textsuperscript{458}

Verney’s degradation stems not from an infirmity of body, for we are informed in a previous passage of the narrator’s health and stamina. “I was tall and athletic,” Verney claims, “I was practiced in feats of strength, and inured to the inclemency of the elements.”\textsuperscript{459} Rather, his “person,” the artificially constructed attribution of civil rights onto his body, has suffered the decay of “ingratitude.” It is precisely through his forthcoming association with Adrian—note that Verney describes this meeting by using the term “contact”—that Verney will repair the damage inflicted to his “person” throughout the trials of his youth. “I now began to be human. I was admitted within the sacred boundary which divides the intellectual and moral nature of man from that which characterizes animals.”\textsuperscript{460} Verney’s transformation from animal to human is an immunological process that will be both mimicked and subverted by the plague that appears in the later sections of the novel. Recall that, for Esposito, the boundary that effectively quarantines the human species as a set of rational or intellectual beings from the sphere of other living, but also non-living, entities is fashioned by an intrusion of a seemingly foreign matter (animality) into the body of humanity. Each human carries within her a minute remnant of her animal nature that, through a sort of constant repression, insures immunity.\textsuperscript{461}

Yet, it is clear that despite his reservations about society, Verney wishes to be acknowledged as the human being that he ultimately believes himself to be. “I clung to my ferocious habits,” he admits, “yet I half despised them; I continued my war against civilization, and yet entertained a wish to belong to it.”\textsuperscript{462} This fluctuation between a wish to remain a part of the state of nature and a desire to be accepted as a member of civil
society highlights the problematic version of nature that Shelley constructs in the novel. The form of the novel, as an autobiography of sorts told from a future date with the addition of an ambiguous frame story, adds to this problematic by rendering suspicious Verney’s supposed savagery. To begin with, Verney knows that his current state of pastoral poverty is an aberration; he grows up with the awareness that his family, once part of the elite circle of the king, has been slighted and that his poverty extends from his father’s exclusion from the court: “A remembrance of the discourses of my parents, and the communications which my mother endeavored to impress upon me concerning my father’s friends [...] floated like an indistinct dream through my brain. I conceived that I was different and superior to my protectors and companions [...] The sense of injury, associated with the king and nobles, clung to me.”

In similar fashion to the very real epidemic that will strike England later in the novel, the knowledge of Verney’s entitlement is “in the air” and becomes absorbed, miasma-like, into his subjectivity.

Furthermore, the civilized perspective of Verney’s narrative brings his so-called “wild” origins into striking relief. Measured against his intellectual transformation, Verney’s state of nature appears especially primitive. The gap that exists between Verney’s experience of savagery and his future record of that period in his life allows Shelley to connect literature or the literary to the politicization of life illustrated by Verney’s passage from animal to human and subsequently to person. The role of literature, and especially drama, in Verney’s transformation cannot be underestimated. His efforts to historicize his experience authorize his life as a human one. He can successfully “play human” by recording his experiences in a literary form. Shelley adds the problem of secondary and tertiary narrative to this configuration by opening the novel with a record of the translation from “sibylline leaves” of what appears to be the future prophecy of the plague enveloped in Verney’s story. This narrative artificiality calls into
question the stability of the process that Verney undergoes from a member of the state of nature to a member of society. The state of nature that Shelley evokes through Verney’s narrative echoes Locke’s formulation that “individuals in nature are not quite natural” and that the “state of nature is not quite the original condition it purports to be.”

Locke, quite differently from Hobbes, “reject[s] [...] the view that all natural law is based on the principle of self-preservation.” The future account, in its very form as prophecy, obstructs the nature/society binary by introducing the element of fiction into this categorical problem. The narrator of the frame story admits to doctoring her transcription of the writing on the leaves. She was “obliged to add links, and model the work into a consistent form” since “they were unintelligible in their pristine condition.”

Hence, the labor of the narrative reveals that the animal/human divide may in fact be a kind of frame story that humans construct to separate themselves as a species from other forms of animal life and to justify their humanity.

In order to pursue the unraveling of this problematic further it is necessary to consider what constitutes personhood as something distinct from the state of nature in eighteenth-century thought. The novel simultaneously identifies and subverts the ideal notion of personhood as delineated in enlightenment political philosophy. Hobbes writes in *Leviathan* that “a person is he whose words or actions are considered, either as his own, or as representing the words or actions of an other man, or of any other thing to whom they are attributed, whether truly or by fiction.” In order to explain this notion of personhood further, Hobbes likens the person to “an Actor,” since “to personate, is to act, or represent himself, or an other; and he that acteth another is said to beare his Person, or act in his name.” Hobbes exploits the gap between body and person that he sees developing out of Greek and Roman poetics, in which an actor, with the use of a mask or persona, impersonates another being. He briefly traces the trajectory of the persona
from its origins on the classical stage through its use in “Tribunalls,” and finally, to his own reappropriation of the term for modern politics. Importantly, from the beginning of his excursus on the person, Hobbes identifies the gap between body and person as a literary one. Sometimes, he claims, a person is “artificall,” a “ficton[al]” attribution, and “he who owneth” that person’s “words and actions, is the Author.”

There are a few things, however, “that are uncapable of being represented by Fiction. Inanimate things, as a Church, Hospital, a Bridge, may be Personated by a Rector, Master, or Overseer. But things Inanimate cannot be Authors, nor therefore give Authority to their Actors,” a precept that will be challenged in The Last Man. Hobbes makes clear that, despite its distance from the state of bare life, personhood requires a living body in order to function. Hobbes utilizes his theory of personhood to explain how “Civill Government” works by transforming a “Multitude of men” into “One person,” that is, a sovereign who represents them and their interests. “The agreement [...] of men” to enter into a “Covenant” that binds them into a unified body politic, or “Commonwealth” is, Hobbes admits, completely “artificially.” The covenant made by men to form a united political body carries them out of the state of nature, in which “the foresight of their own preservation and of a more contented life” is the only aim. Most notable about Hobbes’s formulation of personhood as the basis for civil government is that the very foundation of human politics is maintained by a fiction, but particularly, a literary fiction. For, as Hobbes notes, the covenant men enter into in order to eschew their natural state is fashioned not by “the Sword” but through “Words.” Fiction, in effect, quarantines personhood such that it remains protected and distant from the zone of base subsistence, symbolized by the physical, animal body.

All human politics is, then, personal in the sense that properly political actors must become personae in order to participate in the sphere of the political. “The person,”
according to Esposito, “is specifically defined by the distance that separates it from the body.” The distancing of the person from the body, characterized by an ownership or mastery over the body, propels the person into its position as a political subject. “The mastery of the necessities of life in the household,” writes Hannah Arendt, “was the condition for the freedom of the polis.” This “freedom” from the immediate needs and desires of a purely bodily existence is predicated upon an essential appropriation and a “status depending first of all on wealth and health. To be poor or to be in ill health meant to be subject to physical necessity” and hence to be a kind of slave, rather than an owner or master. This health-induced, politically-oriented way of life is what Arendt distinguishes as the “vita activa” or active life. An existence based on action differs dramatically from a life of labor or work, neither of which “was considered [...] an autonomous and authentically human way of life; since they served and produced what was necessary and useful, they could not be free, independent of human needs and wants.” Neither labor nor work can produce a polis, since “the political realm rises directly out of acting together, the sharing of words and deeds,” a space “where men exist not merely like other living or inanimate things but make their appearance explicitly through acting.” Action “has no physical limitation in human nature” or “in the bodily existence of man,” but actually “lives on” beyond the lifespan of mortals. Hence, in Arendt’s words, “human essence [the vita activa] can come into being only when life departs, leaving behind nothing but a story.” Human actions are preserved despite death and can only be immortalized or drawn upon by future generations if the traditional, mortal life cycle is kept intact. Arendt also plays on her earlier definition of “life”—in its naked state—as a condition of bodily necessity that must be relinquished for political subjects, or personae to thrive. Her illustration of the vita activa as a story that continues in spite of individual human deaths is important to Verney’s narrative.
persistence. The point of his record is to forge an active continuum between the annihilated human race and the future lives in whose birth he is irrevocably invested. However, as we see in the novel, Verney's final act must inevitably fail. Without any guarantee that humans will flourish again, the human institution of politics and the vita activa from which it stems become like the ruins that Verney desperately embraces at the close of the novel. Yet, a potentiality remains at the core of this failure.

Personhood requires one to abstract oneself from the body as a means to enter into the realm of political society. In *The Last Man*, Shelley examines and undermines the logic of personhood through characterization, that is, through the novel's manifestation of personae. Verney's self-proclaimed transformation from animal to person is constantly troubled by his mental and physical reversions to various degrees of savagery. As a figure who rests on the threshold between animality and humanity, Verney must constantly work on maintaining a balanced persona that is identifiably human. At one point, Verney becomes a recluse, “por[ing] over the poetry of old times” and “stud[y]ing the metaphysics of Plato and Berkeley” as a means of self-improvement. Yet Verney's literary-intellectual, and innately human, enterprise is threatened by the core of animality harbored within him. "In the meantime," he explains, “while I thus pampered myself with rich mental repasts, a peasant would have disdained my scanty fare, which I sometimes robbed from squirrels of the forest. I was, I own, often tempted to recur to the lawless feats of my boyhood, and knock down the almost tame pheasants that perched upon the trees, and bent their bright eyes on me.” Unlike Adrian, who is “all mind,” Verney remains tethered to, and haunted by, his bodily needs and the bodily conditions of those around him. Here, his need to sustain himself through regular nourishment inhibits his disconnection from the animal world, the very break that would enable him to fully join human society. Importantly, Shelley, via Verney,
seems to reverse the roles between human and animal since, while Verney craves to kill the pheasants in order to eat, the birds turn "their bright eyes" on him in a clearly humanized gesture. The gaze of the pheasants presents yet another challenge to the animal-human divide that functions as the basis for political society. The implication of Verney’s lapses into animality is that if one can transform from an animal into a human person, then it is just as easy to reverse the process, to become-animal. The very fluctuation of these categories and of the "shifting border" that separates them ultimately calls into question the efficacy of maintaining distinct categories for living beings. Verney’s struggles reveal the immunological process that provides the condition of possibility for personhood, but also the alternate political terrain that opens when humans become-animal. Though Verney wishes to stifle his animality—indeed, he sees his imminent violence towards the aforementioned pheasant as a regression to his "boyhood"—his animal instincts exempt him from the biopolitical imposition of personhood. The fluctuations of Verney's identity throughout the novel, especially the moments during which he becomes-animal end up being the most politically liberating of all Verney’s actions. It is at these instances that Verney stands out as a figure of multiplicity whose uncertain subjectivity frees him for the impersonal political encounters that I will explore below. Unlike Adrian, who, "in person," Verney proclaims, "hardly appeared of this world; his slight frame was overinformed by the soul that dwelt within," Verney’s personhood requires consistent attention. The conditioning that upholds his unstable immunity from the needs of his body is accomplished partially through the reading of literature, a pursuit that he lauds throughout his narrative. Importantly, literature, or more broadly, writing, becomes both the means by which Verney maintains his persona and the trigger for its unraveling. On the one hand, recalling Hobbes, it is fiction that upholds personhood; Verney’s reading conditions him into an outwardly
acceptable political subject. On the other hand, the “fictional” narrative that Verney constructs reveals the seemingly insignificant moments during which his personhood is called into question, those specific instances of animality that I will explore in more depth below. Verney’s story is not a simple retelling of events, but a self-consciously manipulated representation of them.

Verney appeals to reading, one of the few skills inherently tied to personhood, as a means to repress his eruptions of animality. Verney confesses that “for my own part, since Adrian had first withdrawn me from my selvatic wilderness to his own paradise of order and beauty, I had been wedded to literature. I felt convinced that however it might have been in former times, in the present stage of the world, no man’s faculties could be developed, no man’s moral principle be enlarged and liberal, without an extensive acquaintance with books.” 489 In other words, literary enrichment leads to humanity. It functions both as a prerequisite for the process of becoming-human and as a guarantee that one’s morality is “liberal,” which in the Shelleyan framework figures as a label encompassing genuine compassion and fellow-feeling for others. Notably, Verney perceives his relationship to literature as an almost legal one; he asserts that he is “wedded to literature,” implying that he views his association with the written word as a binding contract, assumedly entered into for life. By casting his literary interests as affirmations of civil law, Verney can position himself as a legal subject, a person with specific rights and duties. Once implicitly accepted into the sphere of law through his copious reading, Verney seeks to actively participate in the maintenance of legality by becoming an author, thus collapsing the categories that Hobbes ascribes to the differing roles of actor and author in the process of personation. “Of Persons Artificiall,” Hobbes writes, “some have their words and actions Owned by those whom they represent. And that Person is the Actor; and he that owneth his words and actions, is the Author.” 490
Verney explains that “the collation of philosophical opinions, the study of historical facts, the acquirement of languages, were at once my recreation, and the serious aim of my life. I turned author myself.”

“Turn[ing]” into an author makes Verney more than just an empty persona, or so he believes. He begins to see his authority as part of his duty towards humanity. Through his “authorship,” he writes, “I found another and a valuable link to enchain me to my fellow-creatures; [...] the inclinations and capacities of all human beings became deeply interesting to me. Kings have been called the fathers of their people. Suddenly I became as it were the father of all mankind. Posterity became my heirs.”

Again, Verney invokes the kind of legal binding indicative of human contracts; he feels himself to be “enchain[ed]” to humanity, who he, in slightly inhuman terms, calls his “fellow-creatures.”

By comparing his newly granted authority over mankind to kingly sovereignty, Verney typifies the Hobbesian relationship between actor and author. According to Hobbes, the most prominent example of the confluence of actor and author is the sovereign. The being in whom “consisteth the Essence of the Common-wealth; [...] is One person, of whose Acts a great Multitude, by mutuall Convenants with one another, have made themselves every one the Author [...] An he that carryeth this Person, is called Sovereign.”

The sovereign is both an authority in whom power is vested by the multitude and an actor who represents the interests of his subjects.

Following this line of inquiry, Verney’s narrative becomes the sovereign voice of humanity, in part because he is the last man, the final remnant, and thus representative, of a bygone race. Verney’s story makes literal the Hobbesian construct of sovereign-as-Artificial Man, who through an “Artificial Eternity of life” guarantees that men will not “return into the condition of Warre” after the death of each monarch. This kind of life-beyond-death is precisely what Verney strives for in his narrative. His “heirs,” following
what Hobbes calls the “rule of Succession,” are the potential readers to whom he addresses his lengthy history. Verney’s sovereignty, however, is complicated by the fact that, as the last living human, he has become the embodiment of truly absolute sovereignty and yet, simultaneously, an emblem of liberated, democratic subjectivity. This deactivation of the traditional sovereign/subject relationship calls into question the efficacy of political models that are founded upon arbitrary distinctions. Furthermore, Verney’s seemingly empty addresses to future readers, contingent as they are upon the resuscitation of intelligent life, simultaneously engender and negate his personhood. Is personhood, or more generally, humanity, even possible when only one man is left on earth? This is the political problem that the close of the novel presents. The persona that Verney enacts at the novel’s end, the aforementioned role as sovereign/subject, is only the culminating part in a much more expansive political drama. Indeed, the whole notion of acting, bound to the construction of personhood as outlined by Hobbes, is exemplified in a scene in which impersonation literally breaks down.

At one point in the novel, Verney accompanies a woman to a public hospital in order to locate her dying husband. The graphic images of plague-stricken individuals, coupled with the “effluvia” that pervades the space, first cause Verney to give into his “tormentor, the imagination,” as he pictures his own family dying, but they later prompt him to leave the hospital in disgust. Hoping to escape the misery of death that haunts him, he ducks into Drury Lane Theater, where a drama is being staged. “The play was Macbeth,” he writes, “the first actor of the stage was there to exert his powers to drug with irreflection the auditors; such a medicine I yearned for, so I entered.” He, like the other men in attendance, had “come hither to forget awhile the scenes of wretchedness, which awaited them at their miserable homes. [...] The wildness and supernatural machinery of Macbeth, was a pledge that it could contain little directly connected with
our present circumstances." Verney believes that this literary performance will be safe, free from references to the plague that is decimating humanity. Like elsewhere in the novel, Verney positions literature as a buffer against the ills of society, both literal and figurative. The “medicine” of Macbeth, Verney hopes, will continue the process of literary immunity that Adrian’s friendship, and Verney’s supposed entry into personhood, engendered. At first, the play safely upholds this pretense:

the entrance of Hecate, and the wild music that followed, took us out of the world.

The cavern shape the stage assumed, the beetling rocks, the glare of the fire, the misty shades that crossed the scene at times, the music in harmony with all witch-like fancies, permitted the imagination to revel [...] We forgot that Malcolm and Macduff were mere human beings, acted upon by such simple passions as warmed our own breasts.

The reveries that the scenes invoke are interrupted by a “shudder like the swift passing of an electric shock,” a mass-audience response to Rosse’s lines from Act 4, Scene 3. Rosse cries out “alas, poor country;/ [...] It cannot be called our mother, but our grave:/ [...] good men’s lives/ Expire before the flowers in their caps,/ Dying, or ere they sicken.” As an involuntary, uncontrollable movement, the shudder serves to redirect the audience away from abstract musings back to the material, physical world of their animal bodies. The shudder is followed by a recognition that literature implores the audience to confront their corporeal lives, rather than abstract themselves from the suffering that surrounds them. “Each word,” Verney claims, “struck the sense, as our life’s passing bell; we feared to look at each other, but bent our gaze on the stage, as if our eyes could fall innocuous on that alone. [...] Real anguish painted [the actor’s] features; his eyes were now lifted in sudden horror, now fixed in dread upon the ground. This shew of terror increased ours, we gasped with him, [...] each face changed with the
actor’s changes.”499 Impelled by the prescient words of Rosse’s speech, the audience members refuse to glance at each other, realizing that their own humanity, and the hope of eternal posterity bound up with it, is an utter fiction. The distinction between stage-acting and reality implodes, mimicked in an abrupt reaction from Verney, punctuated by a series of long dashes: “A pang of tameless grief wrenched every heart, a burst of despair was echoed by every lip—I had entered into the universal feeling—I had been absorbed by the terrors of Rosse—I re-echoed the cry of Macduff, and then rushed out as from an hell of torture, to find calm in the free air of the street.”500 Verney, so struck by the momentary coalescence between literature and reality, joins the drama along with the rest of the audience. Importantly, this exchange between actors and audience points to the already established drama of personhood that becomes subverted in this scene. Verney is already an actor; his transformation from animal to human at the beginning of the novel and his subsequent eruptions of animality attest to the various forms of acting in which Verney engages in order to play human. Furthermore, the very movement of the exchange, signaled by the diction of the passage—Verney “enter[s] into,” is “absorbed,” and “re-echoe[s]”—manipulates the variously inclusive and exclusive motions that medical and political immunity utilize in order to create categorical and bodily boundaries. Fuson Wang, in his article on Romantic disease discourse, refers to “the plague victim’s carefully regulated contamination of and participation in an inoculated social system,” an idea that Shelley clearly exploits in her novel.501 He argues further that “Romantic disease discourse models a contaminated biopolitics that requires something like Verney’s inoculating embrace with alterity rather than a coercive and purifying bodily defense against disease.”502 However, I argue that rather than “embrace [...] alterity,” Verney and his “fellow-[human] creatures” are forced to realize that humanity is a failed concept. This failure thus makes any form of cosmopolitanism
impossible; what Verney never completely understands, and what remains for the reader to uncover out of the ruins of humanity, is that human concepts—including alterity—no longer make sense in the post-human world. Shelley’s politics in the novel are “radical,” indeed, but in ways that have not been considered. The Macbeth scene exhibits how the failure of representation, here figured as the failure of literature to fully abstract the person from the materiality of the body and its burdens, unravels the fiction that upholds the distance between personhood and the animal-body that is required for modern politics. Recall that Verney enters the theater to “escape the scenes of wretchedness” that he glimpses throughout the plague-ridden city. What he (and the reader) ultimately discover is that, while literature functions as a regulative source of discipline in its ability to craft the socially acceptable traits of proper personhood, at some point its closeness to life takes on a materially haunting form. In other words, when the scaffolding of representation collapses and literature becomes life, personhood breaks down with it.

The theater is an exemplary literary space for this unraveling because it stages a fiction that is, nonetheless, played out by real living beings. As Frederick Burwick notes of dramatic literature in the Romantic period, “when suspended disbelief is transformed into sustained belief, psychological intensity becomes pathological.” Verney’s bodily “terrors” evince how suspended disbelief transforms into a pathologically registered sustained belief. He flees from the theater largely because fiction has become much too real for him to stomach.

Verney differentiates his project from previous texts that take pestilence as their primary concern for those very reasons: “It would be needless to narrate those disastrous occurrences” like “the mournful passage of the death cart—[...] of harrowing shrieks and silence dire—of the variety of disease, desertion, famine, despair, and death. There are many books which can feed the appetite craving for these things; let
them turn to the accounts of Boccacio, Defoe, and Browne. [...] The lonely state of singleness which hems me in,” he avers, “has deprived such details of their stinging reality.”

Without a community of humans who can share in the “universal feeling” of sympathy for others excited by the gruesome images and scenes that Verney lists, the graphic nature of a traditional plague narrative loses its effect. Importantly, though Verney admits to taking up his pen in order to safeguard his humanity, once the plague begins to spread he relinquishes his calling as a writer. “I longed to return to my old occupations,” he asserts, “but of what use were they? To read were futile—to write, vanity indeed. The earth, late wide circus for the display of dignified exploits, vast theater for a magnificent drama, now presented a vacant space, an empty state—for actor or spectator there was no longer aught to say or hear.” The “magnificent drama” of humanity has ended and with it, the institutions and practices that characterize human beings as separate from other living creatures. The theatrical motif that prompts Verney’s realization that the gap between abstraction and reality is closed by the plague is threaded throughout the remainder of his narrative. “Again and again,” Adrian asks Verney later in the novel, “will the tragedy be acted?”

Perhaps the strangest reference to drama appears in Chapter Twenty-four, as the remaining survivors of the plague prepare to evacuate England. Verney describes a “hollow oak tree” that grows in Windsor Park “which doubtless once belonged to the forest, and which now in the moonlight shewed its gaping rent; to whose fanciful appearance, tricked out by the dusk into a resemblance of the human form, the children had given the name Falstaff.” The tree, like Verney, once inhabited “the forest,” the recesses of nature that are free from humanity. Now, however, the tree stands solemnly in the cultivated space of an English park due to human interference. That the children, awed by the uncannily human guise that the tree dons at sundown, grant it the name of a character from Shakespearean
drama cannot be overlooked. Shakespeare’s Falstaff is the quintessential rake who embraces animalistic behavior: drunkenness, theft, and other forms of debauchery. That is, Falstaff’s role in the two parts of *Henry IV* is precisely to display the kinds of behavior that Henry must cast-off in order to become a successful sovereign. Prince Hal reveals early in Part I that he is engaging in licentious behavior so that his eventual transformation from youthful rogue to virtuous sovereign will dazzle his subjects: “Herein will I imitate the sun,/ Who doth permit the base contagious clouds/ To smother up his beauty from the world,/ That when he please again to be himself,/ Being wanted, he may be more wondered at/ By breaking through the foul and ugly mists/ Of vapors that did seem to strangle him.”509 Read through the lens of *The Last Man*, Falstaff comes to represent the animality that must be repressed in order for a sovereign form of personhood to emerge. In the above passage, the personification of the tree reflects the abstract, arbitrary process by which the basic biological life of the body becomes personated. This tree stands as one of many markers throughout the novel that signal the problematic lacuna between persons and other living things.

Shelley’s use of drama and dramatic conventions in the novel uniquely engages with the predominant liberal views on theater expressed by other writers during her time, particularly William Hazlitt and Leigh Hunt. Hazlitt calls actors “the motley representatives of human nature” who “hold a glass up to humanity” while the stage upon which they act “is an epitome, a bettered likeness of the world.”510 As Julie Carlson explains, for Hazlitt, “dramatic characters must be ‘real beings of flesh and blood’” and “this closeness to life distinguishes Shakespeare’s characters,” who are like “living persons, not fictions of the mind.”511 Hazlitt lauds the realism with which Shakespeare imbues his characters. It is this very realism that strikes Verney and the other audience members witnessing *Macbeth*. Indeed, most of the major references to drama in the text
are Shakespearean. Hazlitt argues that “what brings the resemblance [between actors and spectators] nearer is, that, as they imitate us, we, in our turn, imitate them.” As an active example of how to live, the theater provides humans with a running commentary on their own behavior and desires. In particular, drama “points out the selfish and depraved to our detestation, the amiable and generous to our admiration,” thus instructing its viewers in proper ethical behavior. In doing so, plays “often prevent or carry off the infection [of vice] by inoculating the mind with a certain taste and elegance.” Hazlitt clearly perceives the theatrical space as one in which an important inoculation takes place. The transfer of virtuous feelings from actor to spectator immunizes humanity against vicious practices, thus creating a standard for human excellence. It follows then that humans are most human in the theater, while undergoing an essential inoculation that guarantees their own humanity. Hazlitt disagrees with those critics who view the stage as the seat of “immoral tendency,” but claims rather that “a person after seeing” a play, “is too deeply imbued with a sense of humanity […] to set about cutting throats or rifling pockets.” As I noted before, Shelley figures this theatrical inoculation as an intended transfer of affects between Verney, his fellow spectators, and the actors playing in Macbeth. Anne McWhir confirms that “poetry and drama,” in other words, literature, “heighten the susceptibility of readers and audiences” to an affective inoculation.

Shelley exploits Hazlitt’s ideas about the immunological role of dramatic performance by subverting the imitative mode by which drama functions. What begins as a fairly innocuous escape from the woes of plague-ridden England, in which Verney engages in a “willing suspension of disbelief for the moment,” what Coleridge calls “poetic faith,” transforms into a stark instance of distress when the fictional aspect of Macbeth fails. Verney’s ability to suspend disbelief is impaired by the jarring
coalescence between literature and reality. If theater, through its very imitative mechanism, strengthens the spectator’s humanity, then what happens when the gap between representation and reality closes? I argue that the closing of this gap must precede the suturing of the gap between personhood and the living body (alternately conceived of as a human/animal divide) by disabling the mechanism of fiction, the very process upon which personhood is based, as Hobbes contends. It makes further sense then that Verney’s attempts at mimicking human gestures, a standard acting practice in the Romantic period, also mostly fail. “Gesture,” Burwick explains, “is an instinctively honest language, often exposing a truth that a speaker may attempt to deny or disguise.”

Mastering the science of gestures insures the success of actors performing on stage. These prescribed movements must “be successfully replicated so that the audience does not perceive the artifice.” According to Hunt in *The Examiner of July 20, 1817*, the theaters “assemble people smilingly and in contact, not cut off from each other by hard pews and harder abstractions [...] They [...] are universal, not exclusive.”

Theatrical spaces, he argues, are arenas in which humans are naturally forced to confront their humanity, a confrontation that inevitably unites them. As Betsy Bolton notes, Romantic “discussions of theater and politics tend to dwell on the theater’s ability to shape a mass of spectators into an audience and, by extension, its power to shape that audience into a nation.” Furthermore, “the playhouse as a microcosm of the state could be used to present an idealized view of English people coming together as a nation.”

The notion of being “in contact” proves especially important to Shelley’s narrative, since Verney’s struggle to remain in touch with his fellow beings ultimately fails. Hazlitt’s essay “Our National Theaters” echoes Hunt’s sentiments and offers a more expansive exposition on how theatrical inoculation works politically. He begins by claiming that “the motto of the English nation is ‘exclusion.’ [...] Everything resolves itself
Only “the other night,” he explains, “an attempt was made to shut out improper people from the theater.” Hazlitt positions himself against this practice by asserting theater’s natural inclusiveness; nearly everyone from “the chimney-sweeper” to “a young lady who mopes away her time in the country” benefits from attending the theater. Indeed, for Hazlitt, access to dramatic performance is a kind of political right since “the stage is become part of the vital existence of this civilized country.” The theater, in its current exclusiveness, works via a form of sociopolitical inoculation which allows only a small amount of the “improper” inside in order to exclude the rest. Hazlitt makes the point that the theater is a reflection of British society, such that the vitality of a “civilized country” depends on the democratic inclusiveness of its theaters. Whereas Hunt and Hazlitt imagine that the theater provides a means for extensive sociability, Verney’s (potentially improper) intrusion into Drury Lane only serves to underscore the problems inherent in human sociality. By witnessing the collapse of the drama’s personae, Verney simultaneously glimpses the mechanism behind the curtain, so to speak, that upholds the fiction of personhood. This experience and his subsequent encounters with theatricality, or “acting” in its broadest sense, including animals impersonating humans, alienate Verney further from others.

Verney can only return to writing after he becomes the last man and, importantly, his first forays into the written word are explicitly oriented towards some future public that he assumes will be interested in his narrative. Though Verney does not officially become the last man until the last few chapters, the nadir of humanity is witnessed by him almost immediately after he declares writing to be a futile endeavor. The plague renders ineffectual the exercise of representation, in both its literary and political senses. Though the plague is destined to destroy humanity, scenes like the following consistently upend our expectations, as Verney is forced to confront the fact that humanity already contains
its own destruction and that he is already doomed to be the last man. Verney is tasked with visiting “the various families assembled in our town” during the winter, when the disease has largely ebbed from human society. During one ride, he is particularly struck by the silence of the snow-covered landscape. After crossing the “bridge,” he passed into Eton. No youthful congregation of gallant-hearted boys thronged the portal of the college; sad silence pervaded the busy school-room and noisy playground. I extended my ride towards Salt Hill, on every side impeded by the snow. Were those the fertile fields I loved—[...] One sheet of white covered it, while bitter recollection told me that cold as the winter-clothed earth, were the hearts of the inhabitants. I met troops of horses, herds of cattle, flocks of sheep, wandering at will; here throwing down a hay-rick, and nestling from cold in its heart, which afforded them shelter and food—there having taken possession of a vacant cottage.523

What Verney observes—a blank landscape free of humans—clearly foreshadows the end of the novel; but its very emptiness is striking compared with the cluttered expanse of classical ruins in which Verney finds himself in the novel’s last few pages. Here, there is almost nothing that distinguishes the landscape as formerly inhabited by humans. In fact, the cottage and hay-rick have been overtaken by animals. Instead, Verney is confronted with “one sheet of white,” an amazingly potent symbol for the blank page of potential impersonality that needs writing to generate personhood. What Verney glimpses is literally the blank slate, the empty sheet of paper that he will eventually fill with his narrative.524 Furthermore, this arresting image of nothingness illustrates the vacancy that already resides within humanity, the foundational lack that fictitiously upholds human distinctions, as well as the ground-zero point at which a radical politics of the impersonal can flourish. Later in the novel, when Verney begins to realize that he is
truly the last man, he considers that “after I should have satisfied myself [...] that I left behind no human being in the towns through which I passed, I would write up in a conspicuous part of each, with white paint, in three languages, that ‘Verney, the last of the race of Englishmen, had taken up his abode in Rome.’” In both scenes, blankness signifies a impersonal space that needs to be filled in (with writing or other markers of a persona) in order to make it properly personal. The message of these moments is that a truly radical politics cannot be rooted in the “rights of man,” as Shelley’s forbears (including her husband) may have believed, but in an annihilation of those categories that signal personhood. Recall that Verney’s entire narrative is only a possible record of the future, since it is essentially a translation of another piece of writing, the ancient, Sybilline prophecy found in the frame story that begins the book. The very potentiality of the narrative itself leaves open the option for a completely novel form of politics, one that even Verney does not completely recognize, wrapped up as he is in his own fiction.

This impersonal politics is not prompted, however, by Verney’s embrace with the “negro half-clad,” in a moment that other critics have meticulously interpreted, but by his encounter with a bird on the same journey during which he witnesses the snow-covered fields. While observing the natural landscape in order to retain a lasting image of its beauty, Verney notices that “a robin red-breast dropt from the frosty branches of the trees, upon the congealed rivulet; its panting breast and half-closed eyes shewed that it was dying: a hawk appeared in the air; sudden fear seized the little creature; it exerted its last strength, throwing itself on its back, raising its talons in impotent defence against its enemy.” The robin’s imminent capture and death prompt Verney to take action. “I took it up,” he explains, “and placed it in my breast. I fed it with a few crumbs from a biscuit; by degrees it revived; its warm fluttering heart beat against me; I cannot tell why I detail this trifling incident.” To begin with, Verney clearly identifies the bird with the suffering
individuals who are dying from the plague; the bird evinces similar symptoms, a feverish “panting” and eyes that can barely stay open. When Alfred, Verney’s son, becomes ill with plague, the first markers of the disease show that “his heavy lids veiled his eyes” and “his breath became short,” an almost exact repetition of the bird’s condition prior to Verney’s rescue. Importantly, Verney’s passionate embrace of the robin signals his persistent association with animality. Only months later, Verney encounters another dying figure, whose embrace he rejects. Arriving home after one of his patrols, Verney seeks out his ill wife and child, but instead (at first) encounters the infamous “negro half clad” to whom I alluded earlier:

Hearing a groan, without reflection I threw open the door of the first room that presented itself. It was quite dark; as I stept within, a pernicious scent assailed my senses, producing sickening qualms, which made their way to my very heart, while I felt my leg clasped, and a groan repeated by the person that held me. I lowered my lamp, and saw a negro half clad, writhing under the agony of disease, while he held me with a convulsive grasp. [...] I strove to disengage myself, and fell on the sufferer; he wound his naked festering arms around me [...] I sprung up [and] threw the wretch from me. The reaching, clasping arms of the African echo the raised talons of the robin; in both cases the beings involved struggle against their approaching deaths by reaching out towards an other. The primary difference between these scenes lies in Verney’s reaction: while he is eager to embrace the suffering bird, he rejects the grasp of the “negro.”

Commentators rightly read this encounter as an example of racism and even as the source of Verney’s immunity to the plague; however, its ultimate importance to the novel can only be discerned once it is interpreted alongside the scene with the robin. Note, for instance, that prior to seeing the being who grips his leg, Verney calls him a
“person,” worthy of sympathy. After lowering his lamp in an effort to see the clinging figure, Verney refers to him as a “wretch,” a subhuman creature from whom he strives to untangle himself. Based on Verney’s previous experience with plague victims, although he fears the entrance of the negro’s “death laden” breath into his “vitals,” it is not the disease itself that presents a threat. Earlier in the novel, soon after the plague first arrives in England, Verney visits a dying man whose friends and family had left him behind in the countryside to die alone. “I was urged by compassion,” Verney proclaims, “to hasten for the hut, for the purpose of ascertaining his situation, and administering to his wants.”

Though the dying man’s neighbors urge him not to enter the infected area, Verney proceeds, urging them that even the “Earl himself, now Lord Protector, visits daily, not only those probably infected by this disease [...] even touching the sick [...] yet he was never in better health.” He discovers that the plague-stricken man is “no more,” and describes a “pernicious effluvia,” like that of the negro’s breath, arising from the corpse. Verney willingly touches the dead man, “rais[ing] his rigid limbs” and “mark[ing] the distortion of his face,” in order to compare the body to those he had glimpsed in “De Foe’s account, and the masterly delineations of the author of Arthur Mervyn.”

Forced to tarry with the gap between the depictions of plague victims in fiction and the real corpse that he holds in his arms, Verney remains compelled to retain a sort of intimacy with the corpse, despite the physiological remainders of hesitation that appear in and on his own body—his “congealed [...] blood” and “quiver[ing] flesh.” This early encounter with pestilence makes Verney’s rejection of the negro not so much about a fear of contagion, but an aversion towards a certain form of liminal humanity. Verney feels most comfortable embracing the dying bird, whose animality is akin to his own.

Verney’s increasing sympathy for and observation of animals as animals, but also animals taking over human spaces, point to the demise of human superiority. Even
prior to the appearance of the plague, Verney, looking on “the corse-strewn earth” after a
decisive battle between the Greeks and Turks, “felt ashamed of [his] species.” It is
here, walking amidst the presence of so many corpses, that Verney first glimpses his
future as the last man. His shame arises from the realization that humans catalyze their
own destruction through deliberate war, itself a completely human phenomenon. While
surveying the ruins of battle, he hears a “shriek” and finds Evadne, Lord Raymond’s
former mistress, lying “prostrate” upon the ground. She prophesies the “plague” that will
later annihilate the human race. She dies proclaiming Raymond’s own death, while
Verney, in an effort to save her humanity and, in effect, the human species as a whole,
“heaped over her all the flags and heavy accoutrements I could find, to guard her from
birds and beasts of prey until I could bestow on her a fitting grave." Evadne’s death
ushers in the initial epidemic, at that point only an isolated disturbance in
Constantinople. Her demise also signals an important turn in the novel: the plague and
its attendant destruction bring the human/animal gap into relief. Raymond decides to
conquer the ancient city, despite warnings about the pestilence and the apprehension of
his own animals. “His very horse,” Verney explains, “seemed to back from the fatal
entrance; his dog, his faithful dog, lay moaning and supplicating in his path.”
Raymond’s refusal to heed the foreboding of both Evadne’s prophecy (itself granted
when she was barely human) and his animals causes his own death. Verney flees to
rescue Raymond’s body from the wreckage: “I endeavored to penetrate the town. [...] Yet
none of the defaced human forms which I distinguished, could be Raymond.” In the
desolate “scene of ruin,” the markers that distinguish humans from animals breaks
down. Human forms have become “defaced,” stripped of the physiognomical visage of
their personhood. Verney tries again to locate Raymond and is forced to listen to what
another soldier identifies as “human cries” that are “more like the howling of a dog.” This
inability to differentiate the sound of humans and animals foreshadows Verney's discovery of Raymond's corpse, only a few moments later. "In the part of the town," he affirms, "where the fire had most raged the night before, and which now lay quenched, black and cold, the dying dog of Raymond crouched beside the mutilated form of its lord. [...] The poor animal recognized me, licked my hand, crept close to its lord and died. He had been evidently thrown from his horse by some falling ruin, which had crushed his head, and defaced his whole person." In this horrid scene of death, animal and human literally lie up against each other, with the animal, significantly, outliving the human. Their mutual death disables the heterogeneity of species that differentiated them in life. In the throes of death, Raymond and his dog are simply living things. The dog's recognition of Verney and subsequent gesture of affection are yet another instance in which a nonhuman, living entity reaches out to the protagonist. Prior to death, Raymond's person is notably defaced. If reconsidered in light of Hobbes's notion of personhood, Raymond's defacement must be read as a microcosmic example of the overall human defacement in the novel. Stripped of his persona, Raymond (and Verney by proxy) is reconciled to his animality, and to his existence as simply a living—though inevitably, dying—body. The circumstances of his death also point to this conclusion. He is knocked down by the falling remnant of a ruin, a human-made object. His very defacement, his loss of humanity, stems from the violent retaliation of a human artifact. Humans are doomed by their own machinations. Only after Raymond's death does the plague begin to make its way to England. It is no surprise then, that from this point onwards, animals begin to dominate humans in, at first, subtle ways, anticipating the large-scale decimation of the human race that will follow.

The plague offers a genuine break with the kinds of political continuity, secured by the aforementioned configurations of personhood, that humans have secured, despite
revolutions and variations, since antiquity. Shelley has explored political continuity and its relation to the human body elsewhere in her oeuvre. In “Roger Dodsworth: Reanimated Englishman,” written around the same time as *The Last Man* in 1826, though left unpublished until after Shelley’s death, Shelley fictionalizes the “Roger Dodsworth Hoax,” a newsworthy incident that momentarily captivated the popular imagination in the summer of 1826. According to contemporary accounts, an English physician, Dr. Hotham, discovered Dodsworth’s frozen body in the Alps and enlivened him via a series of warming techniques. Once re-animated, Dodsworth confessed to having been frozen in the Alps since 1660. Shelley exploits Dodsworth’s connections to the English Civil War and the Interregnum in what A.A. Markley calls “a comic version of the ‘last man’ motif” that Shelley employs in her eponymous novel. Also as in *The Last Man*, Shelley sets up Dodsworth’s story as one of “conjecture,” since many of the facts surrounding his life and disappearance are missing and, even more importantly, Dodsworth, himself, is nowhere to be found. As a result, “we must endeavor to make out what part he played in his former life” and Shelley imagines him acting in one of the most “magnificent drama[s]” in English history. “He was lost to the world,” she avers, “when Oliver Cromwell had arrived at the summit of his ambition, and in the eyes of all Europe the commonwealth of England appeared so established as to endure for ever.” Dodsworth awakens, thus believing that Cromwell is still Protector of England.

Despite the temporal lapse between Dodsworth’s icy burial and his reanimation, his political perspective remains translatable to his nineteenth-century animator. When Dodsworth asks Dr. Hotham for “news” of England,” a conversation ensues that draws its comic relief from the fact that the political climate appears to have changed little from the mid-seventeenth century to the early nineteenth century. “Pray, sir,” Dodsworth inquires of Hotham, “has any change for better or worse occurred in that poor distracted
country?’ Dr. Hotham suspects a Radical, and coldly replies: ‘Why, sir, it would be
difficult to say in what its distraction consists. People talk of starving manufacturers,
bankruptcies, and the fall of the Joint Stock Companies—excrecences these,
excrecences which will attach themselves to a state of full health. England, in fact was
never in a more prosperous condition.’” Dodsworth presumes that Hotham is a
“Republican” and asks if “our governors look with careless eyes upon the symptoms of
over-health?” The remainder of their rapport brims with other instances of political
assumption, enabled by the shared views of Dodsworth and Hotham. When Hotham
mentions the relationship between the ministry, what Dodsworth calls “governors,” and
the king, Dodsworth naturally assumes that Charles Stuart has regained the throne of
England. Hotham corrects Dodsworth, first taking his patient’s “pulse,” because he fears
delirium. “Such must have been Mr. Dodsworth’s first lesson in politics,” Shelley
asserts.540 Dodsworth’s and Hotham’s discussion clearly draws a solid link between
medicine and politics. To begin with, Hotham describes the ills that he imagines plaguing
England as “excrecences,” a medical term referring to warts or other diseased tumors
that protrude from the human body. However, in conservative, or even Burkean fashion
(Shelley admittedly paints the doctor as a “high Tory”), Hotham envisions these
protrusions originating from an external source and “attach[ing]” themselves to a body
politic in “full state of health,” rather than developing from an internal malignity. Because
Dodsworth pegs Hotham as a Republican, and thus, from his seventeenth-century
perspective, someone who supports the current Cronwellian regime, he remains
suspicious about England’s “over-health.” Finally, Hotham’s insistence on taking
Dodsworth’s pulse demonstrates that pathology underwrites politics. Dodsworth’s health,
or lack of health, determines his political position.
If Wollstonecraft believes that the human body functions as a thermometer of sorts for the political climate, then Shelley’s farcical take on the medico-politics of the 1790s shows how politics must truly be felt “along our pulses.” The novel magnifies the kind of pathological politics that “Roger Dodsworth” explores. The novel illustrates that when the health of the human body is seriously threatened, to the point of destruction, then the body politic inevitably dies along with the individual bodies that comprise it. The final chapters, when compared with the earlier illuminations of political process centered on the battle over the English Protectorate, offer a tentative “resolution to the larger problem of whether any politics at all can continue in the face of the plague” and the annihilation of the human race. I agree with Wang’s assertion that “in Verney’s farcical Italian quest-romance, Shelley manages to recover at least the form of a redemptive cosmopolitan politics despite her conclusion’s evacuation of all human content” and that Shelley performs a “careful construction of a politics of possibility” that overturns certain “vague notions about the palliative effects of social improvement” proffered by Godwin and Percy Shelley. However, I see this as less of a resuscitation of “Romantic prophecy and vision” than a reworking and, perhaps capitulation, of Enlightenment and Romantic political ideals about humanity. Furthermore, though Wang proposes that Shelley “provides the necessary material basis for her cosmopolitan inoculations through the invocation of a well-researched history of medicine,” a history he traces through her implicit and explicit use of Montagu, Jenner, and Defoe, Wang fails to uncover the ways in which Shelley probes the immunological practices that undergird modern political subjectivity. The Last Man does not simply rehearse the history of inoculation as a way to engage a kind of cosmopolitanism, but rather reveals the inoculations that provide the fundamental logic for human politics—a logic that Shelley slowly unravels in the novel. Only when the plague eradicates all members of the human
race, save for Verney himself, is an impersonal politics possible; not simply because personhood has been wiped out along with the human population, but due to a disruption in the process of immunity that stabilizes personhood. When it becomes futile to “play human,” a cessation occurs in “the immune mechanism that introduces the ‘I’ into the simultaneously inclusive and exclusive circle of the ‘we.’”546 In other words, it is only with the annihilation of an identifiably human “we” that a community can thrive, a notably impersonal one.

The scene that most potently probes the problem of individuality that consistently reproduces the “immune mechanism,” is Verney’s encounter with his reflected image near the close of the novel. “I entered one of the palaces,” he writes,

and opened the door of a magnificent salon. I started—I looked again with renewed wonder. What wild-looking, unkempt, half-naked savage was before me? […] I perceived that it was I myself whom I beheld in a large mirror at the end of the hall. No wonder that the lover of princely Idris should fail to recognize himself in the miserable object there portrayed.547

Verney paints this striking moment of (mis)recognition as if he had no former knowledge of his savage state. However, several pages before, immediately after he formally declares himself to be “THE LAST MAN,” Verney describes how his “very aspect and garb told the tale of my despair. My hair was matted and wild—my limbs soiled with salt ooze; […]—my feet were bare […] For a moment I compared myself to that monarch of waste—Robinson Crusoe.”548 Here Verney narrates his immediate awareness of his physical degeneracy. This is not a scene of temporally distant reflection—he carefully notes, “for a moment”—rather, he saw himself as “unkempt” even at that time. So much so that he imagines himself as Robinson Crusoe, again appealing to literature, but also to the sovereign form of individuality that Crusoe embodies, in order to come to terms
with his reality. Verney’s arrival in Rome, a location indelibly marked by human artifice, triggers the latent animality that he has unsuccessfully repressed since his first encounter with Adrian at the beginning of the novel. Though he “bore human features, he “fed like a wild beast, which seize its food only when stung by intolerable hunger. I did not change my garb or seek the shelter of a roof, during all those days.” Verney’s outdoor scheme of living is so striking because of the previous references he makes in the narrative to animals taking over the dwellings of humans. The mirror scene, then, is not Verney’s first, last, or only “encounter [with] his degenerate humanity.” What that scene does accomplish, as Wang alludes to in his analysis of Verney’s “I myself,” is the detachment of the “I” from politics and the genuine emergence of impersonality. Verney’s deferred (mis)recognition of himself signals that he is no longer an “I” at all.

The morning after Verney’s disturbing encounter with his reflection, he sets off for Rome. En route, he stops to ruminate upon his surroundings, like the sun that “set on a world that contained me alone for its inhabitant.” Verney registers this solitary feeling sensually, as he becomes attuned to the activities of the animals that encircle him: “The twitter of the young birds going to rest among the trees, disturbed the evening air—the crickets chirped—the aziolo cooed at intervals. [...] A bat wheeled round—[...] A herd of cattle passed along in the dell below, untended.” He reflects that yes, this is the earth; there is no change—no ruin—no rent made in her verdurous expanse; she continues to wheel around and round, with alternate day and night, through the sky, though man is not her adorer or inhabitant. Why could I not forget myself like one of these animals, and no longer suffer the wild tumult of misery that I endure? Yet ah! what a deadly breach yawns between their state and mine.
But is this breach uncrossable? Only moments later Verney confirms that it is not. Apart from the fact that animals and humans are physiologically similar—"nerve, pulse, brain, joint, and flesh, of such am I composed, and ye are organized by the same laws"—Verney finds that they share affective qualities as well. This revelation occurs via the art of gesture. Verney perceives a “family of goats brow[sing] the herbage of the hill” and “gather[s] a handful of grass,” which he proceeds to hold out to them as a gesture of bounty and offering. Verney’s outstretched hand can be interpreted as a mark of kindness since, as Micheal William Sharp’s 1820 “Essay on Gestures” makes clear, “gestures […] reveal emotions.” Sharp specifically identifies a stretching “forth of the right hand spread open” as a marker of bounty. Verney assumes that the goats will understand the affective meaning of his gesture, but he fails to consider that the body language that he employs is part of a human system of representation, based largely on abstract signs. The goats ultimately misunderstand Verney’s gesture and refuse to accept his gift. Instead, “the male stepped forward, fixing his eyes on me: I drew near still holding out my lure, while he, depressing his head, rushed at me with his horns.” In retaliation, Verney “yielded to [his own] rage” and “snatched up a huge fragment of rock” to launch at the goats, but purposefully “hurled it wide of the mark.” Though he fails to strike the goats, they run from him while “by the violence of bodily exertion” Verney seeks an escape from his miserable self. Rage, which Charles Bell designates as “the most marked expression” of animals is shared by both Verney and the goat. In fact, the scene is characterized by an oscillation between animal and human gestures. Verney’s initial “hand out” is a seemingly human attempt at friendship; the goat naturally misinterprets Verney’s aims and acts to protect his kin. Verney reacts predatorially: he charges back at the goat by throwing the rock. This cruel act of revenge echoes Verney’s animalistic movements at the beginning of the novel, when, after being released from
prison for stealing, he claims that “my only happy hours were those during which I devised schemes of revenge.” “Having devised a plan to provide excellent and plenteous fare for my comrades,” Verney then accomplishes his goal in part because “the sharp frost and heavy snows tamed the animals,” leaving more food for Verney and his band of vagrants. Here, Verney’s barbarism is even more pronounced than that of the animals with which he aligns himself. Verney grossly exploits the habits of the “tamed animals” who conventionally gather only as much food as needed for subsistence when, by contrast, he procures “more game than we could eat.” Verney’s blatant excess makes him more animal than the animals of his abode. After his confrontation with the goat, Verney decides “not to live among the wild scenes of nature” and instead seeks out the most excessively human place that he can find. His choice of Rome as his imminent abode certainly qualifies as a prominent marker of human enterprise, but is also significant for its associations with personhood, as Esposito theorizes it. As I explored earlier in the chapter, prior to the modern period, Roman law designated the persona as a separate being from biological forms of life (animal, human, or the ambiguous category of slave). It is striking that, at exactly the moment when Verney has made one of his final gestures towards impersonality, he desires to move to the place in which personhood’s legality was cemented. Verney’s misunderstanding with the goats prompts the last movement of his metamorphosis from an animal playing the role of a person to an impersonal being whose existence cuts across those categories. Though Verney does not completely recognize the stakes of his own transformation, the reader, and the translator responsible for deciphering the prophecy of the last man, is clearly keyed into the political potentiality of Verney’s personal failure.

He vows to push on towards Rome, “the crown of man’s achievements.” Verney inwardly chastises the goats, as well as the other animals that have since occupied
human spaces, proclaiming that “among [Rome’s] storied streets, hallowed ruins, and stupendous remains of human exertion, I shall not, as here [in the country], find everything forgetful of man; trampling his memory, defacing his works.” He chooses Rome not only for its material remnants of a glorious human civilization, but for its “storied” past, its literary residue. Rome represents, for both Verney and Shelley, a pinnacle of human achievement in literature, a written testament that perseveres through time.

Verney, obsessed as he is with posterity—with a life beyond life—naturally identifies with the Roman ruins amidst which he settles. His early glimpses of the city draw out his primary struggle with his self-development. He writes that he “found himself on Monte Cavallo. [...] The statues on each side [of the obelisk], the works, as they are inscribed, of Phidias and Praxiteles, stood in undiminished grandeur, representing Castor and Pollux, who with majestic power tamed the rearing animal at their side. [...] Now they were viewed by the last of the species they were sculptured to represent and deify.” While Verney believes that he is observing his humanity being reflected back at him, unlike the scene with the mirror, this reflection is an artificial one. Verney sees himself as the last remaining successor to the mythical twins who, as a benchmark of their humanity, “tamed [the] animal” that stands beside them. However, Verney’s reversion to “species” discourse is a telling reminder that, without human intercourse, Verney is simply another tame animal. Rather than communicate with other animals—humans or otherwise—Verney “familiarly converse[s] with the wonder of the world,” the “relics of ancient time” that litter the city. Indeed, his consistent failures at “reaching out” to others culminates in a harrowing scene of non-communication. One such ruin, the temple of the Jupiter Stator, becomes a particular target for Verney’s affection: “I embraced the vast columns of he temple [...] which survive in the open space that was the Forum, and leaning my burning cheek against its cold durability, I tried to lose sense
of present misery and present desertion.” Wang astutely reads this moment as “an embarrassing travesty of the negro’s inoculating embrace” from earlier in the novel and as “an ironic lament for the several missed opportunities” for alterity. Both the embrace of the negro and Verney’s grip on the ruins seek a source of throbbing vitality with which the suffering victim can commune. However, Wang does not identify the one embrace that breaks the rubric of missed opportunities, Verney’s rescue of the dying robin. The lasting instance of Verney’s compassion affirms that neither humans nor things can rightly claim Verney as their kin. Importantly though, even Verney’s allegiance to animals is troubled by the goat’s rejection of his goodwill. Read together, these moments signal Verney’s categorical blankness, his total inability to fit into the sphere of humans, animals, or things. What saves Verney from non-existence and acts as the “medicine” for his “many and vital wounds” is, once more, “the storied precincts of Rome,” that is, a product of the literary imagination, or what Verney himself calls the “romance” of Italy.

Verney believes that, in Rome, he can “domesticate” himself like the “sheep [that] were grazing untended on the Palatine” or the “buffalo [that] stalked down the Sacred Way that led to the Capitol.” He does so by appealing to the habits and gestures of humanity that he had employed for the last “sixteen years.” “Since that age,” he confesses, “it is true, I had lived luxuriously, or at least surrounded by all the conveniences civilization afforded. But before that time, I had been ‘as uncouth a savage, as the wolf-bred founder of old Rome’—and now, in Rome itself, robber and shepherd propensities, similar to those of its founder, were of advantage to its sole inhabitant.” Here, Verney quotes his own narrative, since earlier in the novel, he describes his pastoral existence in the exact same terms. This strange recognition of Verney’s fictional provenance makes his reversion to “robber and shepherd propensities”
less abrupt. Verney’s fictive persona as civilized human, sustained by habits of “sixteen years’’ standing, only ever masked the savagery that lay dormant within him. The end of the novel rehearses the fluctuations between animality and humanity with which Verney struggles throughout the entire text. He goes to galleries and attempts to read—both thoroughly human activities—but does so as a sort of burglar, breaking into and stealing from places that might have previously had limited accessibility. For instance, he ventures into the “libraries of Rome” and removes a “volume” to read outside. By reading, he writes, “I endeavored to conceal me from myself, and immerse myself in the subject traced on the pages before me.”570 Verney maintains his dissimulating role even with no other audience to witness his humanity. Nonetheless, he recognizes the very concealments that his human gestures enact. Reading and writing, literature in all its forms, prompt Verney’s persistent impersonations, as we have seen throughout the novel, but also, at this crucial point, unmask or deface his studied humanity. This struggle inevitably registers itself on and in Verney’s body:

    Ah! while I streak this paper with the tale of what my so named occupations were—while I shape the skeleton of my days—my hand trembles—my heart pants, and my brain refuses to lend expression, or phrase, or idea, by which to image forth the veil of unutterable woe that clothed those bare realities [...] May I record my many ravings—the wild curses I hurled at torturing nature—and how I have passed days shut out from light and food—from all except the burning hell alive in my own bosom?

These bodily palpitations are physiological reminders of the conflict between animality and humanity with which Verney has been engaged from the beginning. He has become something to which his “brain refuses to lend expression,” neither fully animal nor human. He comes to terms with his own excessive animality by writing: “I will write and
leave in this most ancient city [...] a record of these things. I will leave a monument of the
existence of Verney, the Last Man."571

In the closing pages of *The Last Man*, Verney, echoing Dr. Hotham’s medical
language in “Roger Dodsworth,” asserts that “my person, with its human powers and
features, seem to me a monstrous excrescence of nature. How express in human
language a woe human beings until this hour never knew! How give intelligible
expression to a pang none but I could ever understand!”572 By calling himself a
“monstrous excrescence,” Verney identifies himself as an excess or aberrant outgrowth
of nature, a left over of sorts. He quite literally is a monster, an inhuman entity whose
role as a human has failed. Yet, his failure as a human has guaranteed his survival.
Verney’s life is spared, because of the very excrescence of animality that he could never
contain. Verney’s remaining companion at the very end of the novel is, perhaps most
fittingly, a “dog, a shaggy fellow,” whose “delight was excessive” when he first glimpsed
Verney.573 Both creatures—Verney and the dog—are characterized by their
excessiveness, their inability to be incorporated into the vast graveyard that humanity
has become. Immunity through inoculation has foundered in the novel, but this is the
point of its radical critique of human politics. A political community can only exist once
the immunological process that bolsters humanity, embodied in each individual human,
is conclusively aborted. In the end, Verney, the “last man,” is the progenitor of an, as yet,
inexpressible form of politics.
Notes


2 Tim Fulford and Debbie Lee write that “Jenner’s ‘victory’ over smallpox was an apotheosis of the pastoral life which Bloomfield declared himself uniquely fitted to celebrate” as a self-declared “cow-boy” (“The Jenneration of Disease: Vaccination, Romanticism, and Revolution,” *Studies in Romanticism*, vo. 39 [Spring 2000], 153, 149).


4 Ibid., 6.


6 *Loyalty Necessary to Self-Preservation; or, an Antidote against the Baneful Influence of Republican Doctrines*. 1798.


9 Ibid., 243.


11 Ibid.

12 Ibid., 170.

13 Ibid.

14 Andrea A. Rusnock explores the confluence between biopower, population, and statistics via her analysis of bills of mortality and other statistical tables in *Vital Accounts: Quantifying Health and Population in Eighteenth-Century England and France*. She argues that “the modern concept of population and its measurement were mutually constitutive” (4). The problem of population, or over-population, is specifically rooted in the 1790s, with the initial publication of Thomas Malthus’s *Essay on the Principle of Population* in 1798. Malthus argues that, though “the causes of most of our diseases appear to us to be so mysterious, and probably are really so various,...it will not perhaps be too much to say, that among these causes we ought certainly to rank crowded houses and insufficient or unwholesome food, which are the natural consequences of an increase of population faster than the accommodations of a country with respect to habitations and food will allow.”


16 Foucault, *Birth*, 176.

17 Ibid.

18 Ibid., 177.
Foucault, *Society*, 246.


21 Ibid., 46.

22 Ibid., 56.

23 Ibid., 57.

24 Ibid., 58.


26 Ibid., 80.

27 Ibid.

28 Ibid., 124.


30 Foucault, *History*, 143.


33 Ibid., 96.


Edmund Burke, *Letter to a Noble Lord*, ed. Albert H. Smyth, (Boston: Athenaeum P, 1898), 32; Burke's fear of French contagion surfaces in many political pamphlets of the 1790s. His metaphors were, literally, infectious: Writers explicitly refer to “the jacobin Influenza,” the “French disease,” and “the inflammation [of...] the vitals” which will accompany the “intended revolution [in England]” and to which “a speedy and effectual remedy must be applied” in order to thwart “death or amputation” (*Loyalty Necessary to Self-Preservation*, [London: Bromley, 1798]; *Free Communing, or a Last Attempt to Cure the Lunatics Now Laboring Under that Dreadful Malady, Commonly Called the French Disease*, [Edinburgh: J. Fairburn, 1793]; William Atkinson, *A Concise Sketch of the Intended Revolution, in England*, [London, 1794], 196).

Hobbes adopts a number of bodily and/or medical concepts in order to describe the proper functioning of the British body politic. In fact, as Katherine Attie argues, “Hobbes resuscitated the body trope with newfound vigor, relevance, and sense of purpose,” refashioning this already prevalent seventeenth-century metaphor “as a crucial means of envisioning and ensuring the peace, prosperity, and perpetuity of organized communities” (“Re-membering the Body Politic: Hobbes and the Construction of Civic Immortality,” *ELH*, 75, no. 3 [Fall 2008]: 498-9).


Burke writes in *A Philosophical Inquiry into Our Ideas of the Sublime and Beautiful* (1757) that we do not possess an “immunity from” “real or fictitious distresses,” though real ones, he contends always secure our most assertive attention ([Oxford: Oxford UP: 2008], 44). Burke uses the term *immunity* to indicate a kind of protection against something, in this case the experience of distress. A recent theoretical exploration of immunity as a simultaneously biomedical and political concept by Roberto Esposito, positions a “paradigm of immunization” as the structural condition for a specifically modern form of “self-preservation” (Espositio, *Bios: Biopolitics and Philosophy* [Minneapolis: U of Minnesota P, 2008], 51; 55). Ed Cohen, in *A Body Worth Defending*, pursues Esposito's theoretical claims historically by tracing the transposition of immunity from a purely political or juridicial concept to a biomedical, and subsequently, biopolitical one (Cohen, *A Body Worth Defending: Immunity, Biopolitics, and the Apotheosis of the Modern Body* [Durham, NC: Duke UP, 2009]). Both texts rely upon, but also critique, Foucault’s conception of “biopolitics,” a phenomenon which he claims emerges in the later eighteenth century. Unlike disciplinary power, which aims to condition individual bodies, “biopower” concerns itself with populations and the health of the body politic as a collective (Michel Foucault, *Society Must be Defended* [New York: Picador, 2003], 241-3). Richard Barney forges a solid connection between Burke’s “immunological model” and these recent theoretical considerations in his essay, “Burke, Biomedicine, and Biobelligerence” (*The Eighteenth Century: Theory and Interpretation*, vol. 54, no. 2 [Summer 2013], 231-43). He argues that “Burke’s efforts [...] to cordon off internal threat [...] follow the logic that [...] Esposito has identified as political immunization” (236-7).


Barney, “Burke, Biomedicine, and Biobelligerence,” p. 236. Furniss makes a passing remark of similar import in *Edmund Burke's Aesthetic Ideology*.


James Robert Allard, *Romanticism, Medicine, and the Poet's Body*, (Burlington, VT: Ashgate, 2007), 64.
46 Ibid., 64.


50 Lindemann, Medicine, 180.

51 Porter, In Sickness, 29.


53 Ibid., 148, 121, 15.

54 Ginnie Smith, “Prescribing the Rules of Health: Self-Help and Advice in the Late Eighteenth Century,” in Porter, Patients. “Vernacular medical works were an expanding market in the eighteenth century,” Smith notes, such that “by 1770 few sections of the population would have been untouched by some notion of regimen” (251; 254). Yet, the 1770s witnessed “a strong revival of the [medical] advice book market,” which was “strongly sustained...up to c. 1810” (263).


57 Ibid., 128.


59 Wollstonecraft, Rights of Woman, 207.

60 George Cheyne, An Essay on Regimen, (London: C. Rivington, 1740), x.

61 William Buchan, Domestic Medicine, 95.

62 Wollstonecraft, Mary, 5.

63 Buchan, Domestic Medicine, 96.


65 Lindemann, Medicine, 53.


68 Anne McWhir, “Mary Shelley’s Anti-Contagionism: *The Last Man* as ‘Fatal Narrative,’” *Mosaic*, vol. 35, no. 2 (June 2002), 27.


70 George C. Grinnell, “Thomas Beddoes and the Physiology of Romantic Medicine,” *Studies in Romanticism*, vol. 45 (Summer 2006), 223.

71 Thomas Beddoes, *The History of Isaac Jenkins* (Bristol: Bulgin and Rosser, 1793), iii.

72 Ibid., v-vi.


75 Ibid., xvi-ii.

76 Ibid., xix-xx.

77 Ibid., xiv.

78 Ibid., xv.


80 Allard, *Romanticism*, 64.


82 Burke, *Reflections*, 89.

83 Ibid., 31.


86 Furniss, *Edmund Burke*, 123.


89 Ibid., 10.

90 Ibid.
91 Burke, *Reflections*, 172.
92 Ibid., 30.
94 Ibid., 24.
95 Ibid., 10. See Hobbes, 263.
96 Ibid., 13.
97 Ibid., 14.
98 Oxford English Dictionary,
100 Ibid., 25.
103 Wollstonecraft to George Blood, London, 3 March 1788, 148. Todd’s editorial note to this passage cites Cullen’s authority on melancholy during the period.
105 Wollstonecraft to Everina Wollstonecraft, Paris, 20 September 1794, 262. Todd explains in note 613 that inoculation was most likely not available to Wollstonecraft while in Paris.
106 Wollstonecraft, *Rights of Men*, 42.
108 Ibid., 197.
109 Ibid., 207.
110 Ibid., 142.
111 Ibid., 253.
112 Ibid., 68.
113 Ibid., 75.
114 Ibid., 76, 124.
115 Ibid., 111, 131.
116 Ibid., 242, 243.
117 Ibid., 253.

Wollstonecraft, Rights of Woman, 98-9.

Ibid., 266. Anne Mellor sees Wollstonecraft’s emphasis on “the health and welfare of the family politic” as part of her model of an “ideal state [...] grounded on the ethic of care” (Mellor, Romanticism and Gender [New York: Routledge, 1992], 66; 68). Furthermore, “Wollstonecraft both implicitly and explicitly promoted the trope of the egalitarian family as the basis of good government” (69).

Stott, “Health and Virtue,” 140.

Ibid.

Wollstonecraft, Rights of Woman, 215.

Ibid., 218.

Ibid., 219.

Ibid.

Ibid., 216.


Wollstonecraft, Rights of Woman, 218.

Jeanette Herle-Fanning, “Figuring the Reproductive Woman: The Construction of Professional Identity in Eighteenth-Century Midwifery Texts,” in Body Talk: Rhetoric, Technology, Reproduction, ed. Mary M. Lay, et al. (Madison: U of Wisconsin P, 2000), 26. Eve Keller traces this debate to the late-seventeenth century, but argues that “the majority of midwives even in the 1730s were women, and midwifery books written by both men and women were addressed to women [...] rather than men” (Keller, Generating Bodies and Gendered Selves: The Rhetoric of Reproduction in Early Modern England [Seattle: U of Washington P, 2006], 161). It is clear then that the debate over the professionalization of midwifery had still not been completely resolved by the 1790s, when Wollstonecraft is writing A Vindication of the Rights of Woman. Keller highlights the fact that many midwifery texts from the eighteenth century are just as eager to point out the errors of male practitioners as they are to assert a masculine medical authority position that tries to depose and replace the experiential knowledge of “untrained” female midwives (160-1).


Wollstonecraft, Rights of Woman, 217.
136 Ibid., 251.
137 Ibid., 249.
139 Wollstonecraft, *Rights of Woman*, 249, 250.
141 Ibid., 255.
142 Ibid., 256.
143 Ibid., 257.
145 Ibid., 50-1.
149 Wollstonecraft and Beddoes are not alone in their fears over novel contagion and its pathological effects. Anna Letitia Barbauld and her father, the physician John Aikin, argue that “scenes of distress should not be too long continued” in a novel because “constant suffering deadens the heart to tender impressions” (Barbauld and Aikin, “An Enquiry into those Kinds of Distress which Excite Agreeable Sensations,” in *Novel Definitions*, ed. Cheryl Nixon [Petersborough, ONT: Broadview P, 2005], 159). Aside from causing melancholy and other psycho-somatic conditions, Ann Wingrove contends that novel-reading may also lead to premature death. Her section, “On Reading Novels,” in *Letters, Moral and Entertaining* (1795), tells the story of a “Maria,” who is “now no more” because she refused to marry anyone who did not resemble Richardson’s Sir Charles Grandison (271). Instead of thriving in the matrimony, Maria is forced to live a life of penury until she dies “in obscurity and discontent” (in *Novel Definitions*, 272).
151 Ibid., 46, 45.
152 Ibid., 47-8.
Ann Jessie Van Sant, *Eighteenth-Century Sensibility and the Novel: The Senses in Social Context* (Cambridge: Cambridge UP, 1993), xi. Other critics on sensibility note the importance of the body and physicality to the sentimental novel’s success as an effective bridge to fellow-feeling. Paul Goring argues that “the body served as an important (and problematic) textual space for the symbolic inscription of politeness and for the working out of what it means to be ‘polite.’ [...] ‘Sentimental bodies’—held for a time, a significant cultural authority as components within the developing signatory system of politeness” (*The Rhetoric of Sensibility* [Cambridge: Cambridge UP, 2005], 6). Goring’s point is especially important in light of Wollstonecraft’s novels because she intentionally uses the sentimental body to subvert the normative system of politeness that sensibility had traditionally upheld.


Ibid.


Wollstonecraft, *Mary*, 5.

Ibid.

Wollstonecraft, *Mary*, 5.

Ibid., 6.

Ibid., 7.

Wollstonecraft, *Rights of Woman*, 249.

My use of the term “gothic” to describe the following passage does not simply refer to the “bleeding corpse” or the “torturing” nightmare of its appearance, although these imaginative markers do point to some of the conventions that feature in gothic texts. Rather, I view “gothic,” much like Michael Gamer in *Romanticism and the Gothic* as a “shifting aesthetic” that “collaps[es] disciplinarity and social categories,” but also draws attention to its own disjunctures. I would argue that both of Wollstonecraft’s novels are formally gothic in this sense and that they include (again, in a quasi-immunitarian fashion) those “generic delimiters” of the gothic mode that, Gamer asserts, “became terms of abuse” (i.e., corpses, architectural ruins, over-stimulated heroines, etc.) (Gamer, *Romanticism and the Gothic*, [Cambridge: Cambridge UP, 2005]), 4.


Ibid., 12.

Ibid., 16.

Ibid.

Ibid.

175 Ibid., 10.

176 Ibid., 158, 189.

177 Wollstonecraft, *Mary*, 11.


179 Andrew W. McCann, *Cultural Politics in the 1790s: Literature, Radicalism, and the Public Sphere*, (New York: St. Martin’s P, 1999), 175.


181 Ibid., 33.

182 Markman Ellis traces the dual history, as well as the politics, of benevolence and sentimentality in *The Politics of Sensibility*. He claims that, as far back as the late seventeenth century, theologians linked ‘benevolence to feeling and virtue,’ a connection that the sentimental novel internalized. “The sentimental novel,” he writes, “though entertainment, was a recognized agent for the dissemination of argument and advice” ([Cambridge: Cambridge UP, 1996], 14, 16).

183 Ibid., 18.

184 Ibid.


186 Mary Wollstonecraft, *Maria*, 61.

187 Janice Peritz calls *Maria* “a generic hybrid, a fiction with multiple storytellers,” and “a text that turned out to be provocatively innovative, if not avant-garde” (“‘Necessarily Various’: Body Politics and Discursive Ethics in Wollstonecraft’s *The Wrongs of Woman*,” *European Romantic Review*, vol. 21, no. 2 [April 2010], 252).

188 Ibid., 62.


190 McCann, *Cultural Politics*, 167.

191 Wollstonecraft, *Maria*, 63.

192 Ibid., 64.


196 Ibid., 114, 108.
197 William Smellie, *The Philosophy of Natural History*, (Edinburgh, 1790), 134.
198 Wollstonecraft, *Maria*, 132.
199 Ibid., 123.
200 Ibid., 75.
201 Ibid., 145.
202 Ibid., 134.
203 Ibid., 141.
204 Ibid., 65.
208 Wollstonecraft, *Maria*, 68.
209 Ibid.
210 Ibid., 73.
211 Ibid.
214 Ibid., 78. Wollstonecraft further invokes the positive power of the imagination in a passage that uncannily prefigures Book VI of Wordsworth’s *Prelude*: “Imagination! who can paint thy power; or reflect the evanescent tints of hope fostered by thee?” (79).
217 Ibid., 245.
218 Ibid., 234.
According to Michael Stolberg, “‘popular’ works on prevention [...] came to rank among the bestselling literary genres” ("Medical Popularization and the Patient in the Eighteenth Century,” in Cultural Approaches to the History of Medicine, ed. Willem de Blecourt and Cornelia Usborne, [New York: Palgrave, 2004], 90).


Wilson’s research reveals that most supporters and detractors could be separated neatly into distinct political factions, with Whigs in favor of inoculation and Tories standing against it.


"Indeed," writes Anthony Jarrells in Britain’s Bloodless Revolutions, “the literature we think of as ‘Romantic’—Wordsworth, Coleridge, Byron—adopted and rendered more literary certain very novelistic conventions” such that “the institutionalization of certain kinds of writing as literary often helped to neutralize the dangerous aspects of print even while employing them to heighten the effects of literature on its readers” (Anthony Jarrells, Britain’s Bloodless Revolutions: 1688 and the Romantic Reform of Literature, [New York: Palgrave, 2005], 16-17).

Barrell, Imagining, 8.

Ibid., 15.


Ibid., 157; 159.

Jarrells, Britain’s Bloodless Revolutions: 1688 and the Romantic Reform of Literature, 90.


Smith, Theory, 158.
Smith’s “elaboration of the role of the imagination in sympathy,” Packham explains, “replays and reworks [the] story of mind and body to offer sympathy as a mode of moral animation which might both be independent from the body, and wreak at times uncanny effects on it” (*Vitalism*, 60).


As a result, Wallen argues, “Wordsworth’s poetry should not only appeal to those who are already healthy [...]. Reading his poems about the feelings of those who inhabit the countryside will show the diseased citizen how to shape him or herself ethically into a healthy person” (*City*, 24).

Wordsworth, “Preface,” 598.

Ibid.

Ibid., 602.

Ibid.


Ibid.

Ibid., 599.

Ibid., 598.

Ibid., 599.

Ibid., 599.

Wallen, *City*, 15.

263 Ibid., 602.
264 Ibid., 603, 602; Smith, Theory, 158.
266 Wordsworth, “Preface,” 598.
268 Ibid., 600.
269 Wordsworth, “Tintern Abbey,” 132, line 29, and 133, line 54.
271 Ibid., 609.
272 Ibid., 611-2.
273 Jackson, Science, 136. Allard asserts that there is an “apparent disconnect between the poet-narrator’s morbid desire to hear the soldier’s story [in “The Discharged Soldier”] and his ostensibly protective impulse to keep the ‘weakness and indifference’ of the ‘ghastly figure’ out of the public ways.” Though only briefly hinted at in Allard’s article, the poet-narrator’s ambivalence aptly illustrates the soldier’s role as a literally infected agent whose return from the tropics signals a kind of invasion into the seemingly pristine rural landscape of the poem and as the figure whose very invasion engenders the fellow-feelings that enable a community of sympathetic beings to exist both within and outside of the poem (Allard, “Communicable Dis-Ease: Wordsworth’s Discharged Soldier,” Lumen 27 [2009], 30).
275 Ibid., line 67.
276 Jackson stresses the recuperative, healing power of Wordsworthian poetics, but the preface indicates that both its existence and the poetic project it authorizes are meant to prevent excess rather than remedy it.
278 Haygarth, John. On the Imagination, as a Cause and Cure of Disorders of the Body: Exemplified by Fictitious Tractors and Epidemical Convulsions, (Bath: R. Crutwell, 1800), 2. Historically, “tractors” were metal rods, invented by Elisha Perkins, that, when rubbed on the skin, supposedly extracted pain from the bodies of patients with rheumatism and other disorders which caused muscles to tense or convulse. Haygarth wishes to claim that the healing quality of these instruments has nothing to do with the tools themselves; rather, patients who imagine the pain receding, those who, in effect, have faith in the healing process, find their symptoms abating.
279 Ibid., 16.
280 Ibid., 13.
281 Ibid., 28.

282 Sha, “Physiology,” 201.


286 Ibid., 21.

287 Ibid., 10-20.

288 Ibid., 14.

289 Ibid., 20.

290 Esposito writes that “the rhetorically decisive step that has generated the most widely held stereotypes in defining the immune system is the transposition of the defense function into aggressively military terms. The immune mechanism takes on the character of an out-and-out war: the stakes are the control and ultimately the survival of the body in the face of foreign invaders who seek first to occupy it and then destroy it” (Immunitas, Trans. by Zakiya Hanafi [Cambridge: Polity, 2011], 154).


297 Ibid., 45.

298 Ibid.

299 Ibid., 42.

300 Ibid., 47.

301 William Butter,


303 Ibid., “Book Second,” Prelude, 70, line 78.

305 Ibid., 50, lines 437-41.

306 Ibid., 60, lines 610, 591.

307 Ibid., lines 622-4, 62, lines 630-40.


311 Ibid., 88, lines 432 and 423-4.

312 Ibid., “Book Eighth,” 276, lines 166-77.

313 My conceptions of “affect” and “virtual” are influenced by Brian Massumi’s elaboration of these modalities in his essay, “The Autonomy of Affect.” He distinguishes sharply between emotion and affect: “an emotion is a subjective content, [...] the conventional, consensual point of insertion of intensity into [...] narrativizable action-reaction circuits, into function and meaning. It is intensity owned and rerecognized.” “Affect,” on the other hand, is “unqualified” intensity, “not ownable or recognizable,” and is “irreducibly bodily and autonomic.” In other words, once cognized and expressed, affects that are initially immediate, transform into emotions that are mediated by the various binaries upon which consensual human society depends (i.e., public/private). ‘Something that happens too quickly to have happened, actually, is virtual,” which he describes further as “the pressing crowd of incipiencies and tendencies [...], a realm of potential [...] where futurity combines, unmediated, with pastness, where outsides are infolded, and sadness is happy” (*Cultural Critique*, no. 31 [August 1995], 83-109).


317 Ibid., “Book Sixth,” 206, lines 398-408.

318 Ibid., 224, lines 694-7.

319 Ibid., 300, line 627.

320 Ibid., lines 659-64.


324 Ibid., 314, lines 48-9.

325 Ibid., 316-8, lines 100-7.

326 Ibid., 320, lines 147-61.
As Alberti notes, "first on the list of 'detectable signs' the physician should look out for was the 'figure, physiognomy, and the facies propria,' or external appearance of the patient" (Matters of the Heart, 69).


Ibid., 360-2, lines 48, 55-6, and 66.

Ibid., lines 67-9.

Ibid., 366-8, lines 167-8, and 170-5.

Ibid., line 238, 372, lines 249-51, 374, line 305, 376, line 327, and 378, lines 370-1.


Several recent and classic monographs have treated the subject of Romantic vitality. See Hermione de Almeida, Romantic Medicine and John Keats, (Oxford: Oxford UP, 1991), Denise Gigante, Life: Organic Form and Romanticism, (New Haven: Yale UP, 2009), and Sharon Rustion, Shelley and Vitality, (New York: Palgrave, 2005). Gigante, in particular, argues that Keats's "dying-into-life" is partially influenced by several lines of Wordsworth's "Tintern Abbey": “the breath of this corporeal frame,/ And even the motion of the human blood/ Almost suspended, we are laid to sleep/ In body, and become a living soul" (240).


Ibid., 227.

Ibid., 301.

Find citation in Harvey.

Burke, Reflections, 33-4.

Wordsworth, "Book Tenth," Prelude, 392, lines 609-12.


Esposito, Bios, 50.

Ibid.


Ibid., 448, lines 240-1.


Ibid., 469-70, lines 185-97.
Ibid., 476, line 329. Esposito defines individuality “literally” as “to make indivisible, united in oneself, by the same line that divides one from everyone else” (Bios, 61).


355 Ibid., 199.


357 Ibid.

358 Ibid., 244.


360 Ibid., 3.

361 Esposito, Bios, 65-6.

362 James Parkinson, Medical Admonitions Addressed to Families, Respecting the Practice of Domestic Medicine and the Preservation of Health (London: C. Dilly, 1799), iii.

363 In Vital Signs: Medical Realism in Nineteenth-Century Fiction, Lawrence Rothfield offers a succinct distinction between medical fiction in the eighteenth century and the medical realism of the nineteenth: “Just as a general distinction is often made between the representational practices of realism in eighteenth-century versus nineteenth-century novels, so one can profitably distinguish between the literary status of illness in these two kinds of realistic fiction. [...] In their [early realists’] fiction, illness tends to appear as either a fundamental ontological predicament of a punctual signal of innate moral inadequacy. In neither case do novelists adopt what might be called a consistent medical view of their characters—that is, a view in which illness would be articulated along with, and as a means of illuminating, the developing life of an embodied self” ([Princeton, NJ: Princeton UP, 1992], 4). Austen’s fiction generally lies somewhere in between these two distinctions; however, Sanditon’s narration is more closely related to the “medical view of character” that Rothfield aligns with nineteenth-century realism.

364 Ibid.

365 Irvine Loudon, Medical Care and the General Practitioner: 1750-1850, (Oxford: Clarendon, 1986), 129. This period also witnessed the Apothecary Act of 1815, the Vaccination Act of 1840, and the Public Health Act of 1848.


367 For an analysis of realism in Austen’s novels, see Harry Shaw, Narrating Reality: Austen, Scott, Eliot (Ithaca: Cornell UP, 1999), especially chapter four.


Ibid., 296.


Ibid., 72.

Ibid., 177-8.


Ibid., 70.


Johnson, *Jane Austen*, 70-1.


Ibid., 297.

Ibid., 301.


Ibid., 298.


Buchan, *Domestic Medicine*, 386.


Ibid.


Ibid.

Ibid., 298-9.

Ibid., 299


Wiltshire, “Sickness and Silliness,” 100.


Frawley, *Invalidism*, 50.


Ibid., 312.

As Wiltshire claims, “the three Parkers [...] continually re-inforce, and therefore make real, the bodily symptoms from which the others suffer. In other words, the Parker family circle is a smaller, more intense domain of the whole culture that Sanditon has been designed to capitalize on. Ill-health, quite simply, is social currency” (“Sickness and Silliness,” 98-9).


Ibid, 303.

Ibid., 311.

Ibid., 314-5.

Ibid., 334.

Ibid.

Kennedy, *Revising the Clinic*, 4.


Kennedy, *Revising the Clinic*, 7.


Ibid., 316.

Ibid., 317.
418 Ibid., 320.
419 Ibid., 321.
420 Ibid., 323.
421 Ibid.
422 Ibid., 327.
423 Foucault, Birth of the Clinic, 136.
424 Ibid., 34.
425 Kennedy, Revising the Clinic, 319.
426 Ibid., 314.
427 Ibid., 325.
428 Ibid., 342.
431 Loudon, Medical Care, 212.
432 Ibid., 210.
433 Ibid., 315.
434 Gloria Gross explores Mr. Wodehouse’s invalidism in her essay “Flights of Illness: Some Characters in Jane Austen.” Importantly, she points out, Mr. Wodehouse “is strangely not only the kept but also the keeper,” A man whose chronic condition allows him to issue “a never-ending round of ministrations at Hartfield,” many directed at Emma. In this way, “his weakness is converted to ascendancy” (191).
435 For example, Homer describes the goddess Hera as “ox-eyed” at several points in the Iliad. See The Iliad of Homer, trans. Richmond Lattimore (Chicago: U of Chicago P, 2011), Book I, lines 50, 551, 568.
436 William Rowley, Cow-Pox Inoculation No Security Against Smallpox Infection, to which is added the Modes of Treating the Beastly New Diseases Produced from Cow-Pox (London: 1805), viii.
439 Benjamin Moseley, A Treatise on the Lues Bovilia (London: Nichols and Son, 1805), xii and xv.

Ibid.

Ibid., 83.

Ibid.

Ibid., 89.

Ibid., 150.

Ibid., 151.

Bewell, Romanticism and Colonial Disease, 312.


Ibid., 273.


Wang, “We Must Live Elsewhere,” 240.

Wang, “We Must Live Elsewhere,” 243.

Ibid., 245.


Ibid.

Ibid., 14.

Ibid., 15.

Ibid., 16.

Ibid., 14.

Ibid., 22.

Several accounts of inoculation in the eighteenth and nineteenth century describe how the process works, by “giving the Smallpox [in small amounts] to persons in health” (Isaac Massey, A Short and Plain Account of Inoculation [London: W. Meadows, 1722], 1). Most famously, Lady Mary Wortley Montague, in a 1717 letter, explains how, in the East, an “old woman comes with a nut-shell full of the matter of the best sort of smallpox, and asks what vein you please to have opened. She immediately rips open that you offer to her, with a large needle (which gives you no more pain than a common scratch) and puts into the vein as much matter as can lie upon the head of her needle , and after that, binds up the little wound with a hollow bit of shell, and in this manner opens four or five veins” (Letter XXXI to Mrs. S.C. [Sarah Chiswell], Adrianopole, 1 April 1717, The Norton Anthology of English Literature: The Major Authors, ed. Greenblatt, et al. [New York: W.W. Norton, 2013], 1272).
Ibid., 14.
Ibid., 10.


Ibid.

Ibid., 218.

Ibid., 219.

Ibid., 220.

Ibid., 226.

Ibid., 223.

Ibid.


Ibid., 37.

Ibid., 13.

Ibid., 198-99.

Ibid., 201.

Ibid., 193.

“For the subject,” Esposito writes, “being inside the world means to be somehow outside oneself, to be part of something that at the same time includes and transcends oneself” (Roberto Esposito, *Third Person: Politics of Life and Philosophy of the Impersonal*, trans. Zakiya Hanafi [Cambridge: Polity, 2012], 31).

Ibid., 61.

Ibid.

Ibid., 20.

Esposito, *Third Person*, 14. In his most recent work, Esposito theorizes the “impersonal” as a political mode, the shape of which is constantly mutable, and thus able to cut across the animal-person divide. He writes that “the impersonal lies outside the horizon of the person, but not in a place that is unrelated to it: the impersonal is situated, rather, at the confines of the personal; on the lines of resistance, to be exact, which cut across its territory, thus preventing, or at least opposing, the functioning of its exclusionary dispositif. The impersonal is a shifting border.”
Esposito uses Giles Deleuze’s concept of “becoming-animal” to flesh out his own notion of the impersonal. “In a theological, philosophical, and political tradition,” he explains, “that has always defined the human through opposition to the animal—to that part of the human, or that area of humanity, that was bestialized as a prophylactic measure—the vindication of our animality as our most intimate nature breaks with a fundamental interdiction that has always ruled over us. Becoming-animal, for Deleuze, does not signify sinking into the darkest pit of the human being [...] On the contrary, it is our most tangible reality, so long as what I mean by real is the process of mutation that our nature has always undergone. What we are talking about is not humankind’s alter, or the alter in humankind, but rather humankind brought back to its natural alteration. The animal—in the human, of the human—means above all multiplicity, plurality, assemblage with what surrounds us and with what dwells inside us” (Third Person, 150). The idea of “becoming-animal” features in several of Deleuze’s texts, most notably A Thousand Plateaus (trans. Brian Massumi [Minneapolis: U of Minnesota P, 1987]) and “The Body, the Meat, and the Spirit: Becoming Animal” in Francis Bacon: The Logic of Sensation (trans. Daniel Smith [Minneapolis: U of Minnesota P, 2005], 20-7). For a careful reading of this concept and how it functions in Deleuze’s thought, see Gerald Bruns, “Becoming-Animal (Some Simple Ways),” in New Literary History, vol. 38, no. 4 (Autumn 2007), 703-20.

Shelley, The Last Man, 20.

Ibid., 120.

Hobbes, Leviathan, 218.

Shelley, The Last Man, 120.

Ibid. Verney’s sentiments toward mankind echo Victor Frankenstein’s initial feelings towards his creation. When he contemplates the possibility that he “could bestow animation upon lifeless matter,” Frankenstein reflects that “no father could claim the gratitude of his child so completely as I could deserve their’s [his imminent creations]” (Mary Shelley, Frankenstein, 1818, ed. D.L. Macdonald and Kathleen Scherf [Peterborough, ONT: Broadview, 2005], 82).


Hobbes, Leviathan, 228.

Ibid., 247.

Shelley, The Last Man, 220.

Ibid.

William Shakespeare, Macbeth, 4.3.164-73, quoted in Shelley, The Last Man, 220-1.

Shelley, The Last Man, 221.

Ibid.


Ibid., 477.


Ibid., 241.

Shelley, *The Last Man*, 310.

Ibid., 284.


Julie Carlson, “ 155.

Vincent Petronella writes that “*The Last Man* is consciously dramatic throughout. Theater metaphors abound as do allusions to various Shakespeare plays and characters” (“Mary Shelley, Shakespeare, and the Romantic Theater,” in *Jane Austen and Mary Shelley, and their Sisters*, ed. Laura Dabundo [Lanham, MD: U P of America, 2000], 129).

Ibid.

Ibid., 154.

Anne McWhir, “Mary Shelley’s Anti-Contagionism: *The Last Man* as ‘Fatal Narrative,’” *Mosaic*, vol. 35, no. 2 (June 2002),


Ibid., 82.

Leigh Hunt,


Ibid., 288.

Ibid., 242.

This image also recalls Locke’s notion of tabula rasa. “Let us suppose,” he writes in *An Essay Concerning Human Understanding*, “the mind to be, as we say, white paper, void of all characters, without and ideas” (1689, Ed. Kenneth P Winkler [Indianapolis: Hackett, 1996], 33).

Potentiality is a persistent theme in Percy Shelley’s works. As Sharon Ruston notes, “one of Shelley’s favorite images” is “that of the seed containing the plant, or of the acorn containing the oak [....] Shelley’s interest in the acorn or seed is that is carries revolutionary potential, although this potential may or may not be realized” (Shelley and Vitality [New York: Palgrave, 2005], 7).

Ibid., 243.

Ibid., 264.

Ibid., 265.


Ibid., 202.

Ibid., 203.

Ibid., 141.

Ibid., 143.

Ibid., 156.

Ibid., 162.


Ibid., 46-7.


I am influenced on this point by Saree Makdisi's innovative reading of William Blake's "antinomian stance" towards the categories of humanness, life, and politics that he offers in *William Blake and the Impossible History of the 1790s*. He situates Blake not along side of those who support a certain prescribed notion of human rights—people like Wollstonecraft and Paine, who he terms the "liberal-radical hegemony"—but rather as a uniquely radical figure. "That Blake's work articulates such an antinomian stance suggests that we can see in it a joyous form of freedom—which," he writes, "I believe needs to be considered seriously as a political formulation—utterly incompatible with the doctrine of individual rights." Furthermore, Makdisi contends that "Blake's interest in the antinomian tradition going back to at least the seventeenth century offered him a set of concepts with which to contest the cultural and political primacy of the individual, which allowed him to produce a conception of freedom that went far beyond the narrow scope of liberty sanctioned by the hegemonic radical position, in which political equality was sharply distinguished from socioeconomic egalitarianism" ([Chicago: U of Chicago P, 2003], 8, 11).

Ibid.

Esposito, 102.


Ibid., 349.

Ibid., 349.

Wang, "We Must Live Elsewhere," 245.

Shelley, *The Last Man*, 357.

Ibid.

Ibid.


Shelley, *The Last Man*, 358.

Ibid.


Ibid.

Ibid., 358.

Ibid.
As Emily Sunstein writes in *Mary Shelley: Romance and Reality*, “to drive along Roman roads, to see landscapes, sites, monuments where political and literary history had been made, while reading Livy or Virgil in ‘that language which once awoke the pauses of this Roman air with words to fire,’ to pass vineyards and large-eyed oxen out of Homer, [...] these were almost religious experiences to [Mary] even more than to Shelley with his predilection for Greece” ([Boston: Little, Brown, 1989], 152).

564 Shelley, *The Last Man*, 357.

565 Ibid., 360.

566 Wang, “We Must Live Elsewhere,” 245-6.


568 Ibid., 361.

569 Ibid., 362.

570 Ibid., 363.

571 Ibid., 364.

572 Ibid., 365.

573 Ibid.