Review of Vasia Lekka’s, The Neurological Emergence of Epilepsy: The National Hospital for the Paralysed and Epileptic (1870–1895)

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https://doi.org/10.12681/historein.9666

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To cite this article:

Vasia Lekka

The Neurological Emergence of Epilepsy: The National Hospital for the Paralysed and Epileptic (1870–1895)


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In May 1860 in London, the National Hospital for the Paralysed and Epileptic, the world’s first neurological hospital, opened its gates for the first time. It was during this time that neurology first emerged and established itself as a distinct field within medical science. The emergence of epilepsy as a strictly neurological disorder in the second half of the nineteenth century is the main subject of Vasia Lekka’s book, a new monograph in the Boston Studies in the Philosophy and History of Science series. More precisely, as the author puts it in the introductory chapter, the book “aims at examining the historical conditions in which the construction of a scientific, neurological discourse on epilepsy was systematically attempted and essentially accomplished” (6).

Lekka’s historical analysis rests primarily on a detailed examination of the medical files of the 1,653 patients of John Hughlings Jackson (1835–1911) who were hospitalised in the National Hospital during a period of 25 years (1870–95). The analysis of this archival material offers us a rare glimpse into the clinical practice of “the father of British neurology”, and the gradual development of the new discipline. But moreover, this book aspires to be, in Roy Porter’s tradition, a patient-oriented history, that is, a history of nineteenth-century epileptic patients themselves. If Porter is the main influence regarding the general orientation of the book, the writings of Michel Foucault provide the main conceptual tools for the construction of Lekka’s historical narrative. Fundamental here are Foucault’s account of the link between knowledge and power relations within society, as well as his stress on the role of scientific medicine in people’s lives (his notion of “biopower”). We cannot discuss here in any detail the many aspects of Lekka’s extremely rich historical narrative. In what follows, I will concentrate on the main part of the book (chapters three to five) and present the central features of Lekka’s analysis, as well as some important results and conclusions.

After a short introductory chapter outlining her main aims and general methodology, Lekka starts by characterising the historical context within which the main historical narrative will be placed. Thus, the aim of the second chapter is to describe the general social, political and economic conditions in nineteenth-century Victorian society, focusing particularly on the development of scientific medicine. This chapter also contains an illuminating short history of epilepsy, from Hippocrates to the second half of the 1800s, when the first specialised institutions for patients with neurological disorders first appeared.

Chapters three to five constitute the core of the book. The first contains a detailed chronological presentation of Jackson’s medical files. A main aim here is to examine the neurological and...
other categories Jackson used to classify his patients and describe their general condition, as well as how these categories developed over time. To this effect, the 25-year period is divided into four subperiods, and the data from different subperiods is compared in order to detect any potential trends. There is a clear trend during this 25-year period that is established by this method: the medical categories used in the files, as well as the variety and detail in the descriptions and neurological categories, gradually expand. For example, the descriptions of the patients' epileptic seizures during their stay at the hospital (that were written by their nurses and attendants) become gradually more detailed, and during the last years of the period examined, constitute a main part of all medical files and acquire a "more scientific and standardised structure, form and content" (65). There is a similar trend concerning the diagnosis of epilepsy, that itself becomes more accurate during this period. Thus, "epilepsy" and "epileptic fits" are gradually replaced by "Jacksonian epilepsy", "idiopathic epilepsy", "Status Epilepticus", "epilepsy and melancholy", etc. Similarly, the cause of the first epileptic seizure begins to be emphasised. In short, we are witnessing a process of an increasing "medicalisation and neurologisation of epilepsy" (49) as well as of other neurological diseases. But there is another story that Jackson's medical files tell, one that the author is greatly interested in reconstructing and interpreting: it is the story of the epileptic patients' own voice. And, although the files are not very helpful – as the references to patients' behaviour during their stay at the hospital, as well as to their thoughts concerning their disease, are scant – there are several characteristic cases where we can get a glimpse of the thoughts and emotions of nineteenth-century epileptics.

A more detailed characterisation of epileptic patients and their social context is attempted in chapter four; the main aim here is the use of the medical files of the National Hospital for the construction of a "sociology of epilepsy and epileptics in late Victorian England" (72). To this effect, Lekka examines Jackson's medical files in relation to his patients' gender, age, marital status, occupation, address as well as in relation to "any references to the thoughts and feelings of both patients, and doctors and nurses" (72). The results of this examination are then compared with the medical files from two other British private mental asylums from the same period: the Manor House Asylum and the Holloway Sanatorium Hospital for the Insane. Some very interesting conclusions emerge from this comparative analysis. Most importantly, Lekka establishes the great difference between two kinds of institutions in Victorian Britain, that is, between a private institution that functions as a mental asylum, and between a public/charitable institution that functions as a neurological hospital. In the latter case, we have a "standardised and strictly scientific" (106) procedure of recording and treating the patients, a relatively short period of hospitalisation, a focus on nonchronic cases of epilepsy, a relative disregard of the human dimension of the disease, and the patients' transformation "into neurological 'cases'" (107). The neurological hospital is precisely the locus of the consolidation of neurology as a distinct scientific field and of epilepsy as a distinctively neurological disorder. In the case of the two asylums, on the other hand, we have a focus on chronic and incurable disorders, a "looser pattern of recording" (107), and, at the same time, extremely detailed descriptions on epileptic patients' daily life, thoughts and behaviour. The target group of the two kinds of institution also differs greatly. In the case of the National Hospital, Lekka notes the equal numbers in male and female epileptic patients, the great majority of young and single epileptics as well as the high numbers of patients that belong to the lower social
classes (at least 66.3% of Jackson’s patients). In contrast, asylum patients were, in the main, male, wealthy and older.

Lekka makes the most of the archival material she examines. As she notes, sometimes the material is fragmentary in certain respects. Nonetheless, she succeeds in painting a vivid picture of the National Hospital and in positioning nineteenth-century epileptic patients within the wider social and cultural historical context. So, the hospital emerges as a pioneering and reputable institution receiving patients from remote places in Britain. The hospital’s epileptic patients, as mostly young people of the working classes, belonged to the part of Britain’s population that, especially in the second half of the nineteenth century, were “being transformed into the main providers of workforce and, consequently, profit and power to their bourgeois employers” (79). As the files indicate, most epileptic patients in the hospital had the support of their families and environment, and some of them successfully attended school, had regular employment and a “normal” social life – although they faced many obstacles, as is evident from several specific cases presented in the book.

Chapter five is what Lekka calls the “epistemological” part of her historical analysis. The aim here is the examination of the “neurologicalisation” of epilepsy in the second half of the nineteenth century. This trend is part of the more general process of a strictly scientific treatment of physical and mental disorders that takes place during this period. The main consequence of this process is, as Lekka emphasises, the transformation of the human brain into the primary object of neurological knowledge and investigation. The point of departure for this epistemological analysis is again Jackson’s archive. So, it is established that only about 1.4% of epileptic patients were ill for less than 30 days before being admitted to the hospital, and that 80.3% remained there for six months or less (in many cases independently of the outcome of the treatment), as most of them were labourers that could not afford to leave their jobs for longer periods. But, perhaps more importantly, Lekka’s analysis shows the consolidation of epilepsy as the “object of knowledge par excellence” (131) of the developing neurology, the emerging emphasis on a fast and efficient treatment of epilepsy, and the gradual divergence between neurology and psychiatry.

Jackson was a key figure in this process. One of the most fascinating parts of this chapter is Lekka’s discussion of his theoretical writings on neurology. Jackson advocated what he called “the doctrine of Concomitance” (148), according to which mental and nervous states are entirely distinct, occur in parallel and are causally independent of each other. So, according to him, the study of neurological problems could proceed independently of psychological considerations. Moreover, he developed a hierarchical model of the nervous system that was based on an evolutionary view of life. Lekka stresses the function of this model as a strategy of legitimation of the emerging neurology, arguing that it “did actually reflect the power that the upper classes of Victorian society wanted avidly to exert over the ‘unruly’, ‘insubordinate’ and ‘dangerous’ lower social classes, by whom they were feeling threatened; in other words, it reflected the much needed hierarchical conception and view of the English society” (151).

Moreover, Lekka notes the influence of Herbert Spencer and his social Darwinism on Jackson’s thought, and the close relation between Spencer’s views and the theory of national degeneration: Spencer introduced the term “dissolution”, which he saw as the rever-
sal of evolution, and which Jackson used to interpret neurological diseases (147). The theory of degeneration is a main element in the historical narrative of the book, as it "was prevailing in the dominant mid-nineteenth-century epistemological, as well as political, social and cultural discourse" (154). In the context of this theory, as well as the eugenics movement later in the century, "mental deficiency emerged as a distinct medical, as well as social and political problem, marking the huge interest in both the human brain and the concept of the population" (156). Epileptics, together with mentally defective criminals, alcoholics and others, were considered "a potential threat to the national prosperity and progress" and were "being rendered into an object of medical knowledge and, consequently, into the target of severe state intervention" (156).

This general perspective of the theory of degeneration and its grounding in the specific sociopolitical conditions of Victorian England is, for Lekka, crucially important in order to understand the emerging distinctions in the context of the new neurology "between the ‘healthy’ and the ‘sick’ body, between the ‘physiological’ and the ‘pathological’ brain, between the ‘normal’ and the ‘abnormal’ individual", and for analysing the "produced scientific discourse on epileptic patients" during the second half of the nineteenth century that "highlighted both the socially inadmissible and unallowable character of their behaviour, and the dangerousness of their sick body for the present and, especially, the future of the social body" (158). The book ends with a short history of epilepsy in the twentieth century: on the one hand, we have some major breakthroughs in diagnosis and treatment; on the other hand, the continuation and intensification of some of the nineteenth-century processes identified earlier, most importantly the "sweeping medicalisation" of modern society (188).

Apart from the detailed analysis of archival sources, which undoubtedly constitutes one of the major strengths of the monograph, Lekka utilises an impressive amount of other primary sources, such as important monographs on epilepsy from the period under examination, as well as relevant articles from scientific journals and newspapers of the era. Two important examples are Sir Edward Henry Sieveking’s treatise On Epilepsy and Epileptic Seizures: Their Causes, Pathology, and Treatment, published in 1861, and the Gulstonian Lectures on Epilepsy given by Sir William Richard Gowers (an eminent physician at the National Hospital) at the Royal College of Physicians in London in 1880. In many places throughout the book, Lekka compares the results of her examination of the archival material with Gowers’ and Sieveking’s observations (which were based on their extensive experience with epileptic patients in the National Hospital and elsewhere). In addition, the extensive use of secondary works on the social history of medicine in the nineteenth century, on the social and political history of nineteenth-century Britain, as well as on the history of medicine in general, we have here a particularly rich and well-researched historical monograph, a comprehensive narrative of the social history of epilepsy in the nineteenth century and its transformation into a neurological disorder. At the same time, this is a work that opens up a new window on the emergence of neurology in the second half of the nineteenth century, as well as a great example of how to do history of medicine from below.