

4-30-2009

Review of: Candace Ward, *Desire and Disorder: Fevers, Fictions, and Feeling in English Georgian Culture*

Alan Bewell

Andrea Charise

Recommended Citation

Bewell, Alan and Charise, Andrea (2009) "Review of: Candace Ward, *Desire and Disorder: Fevers, Fictions, and Feeling in English Georgian Culture*," *Eighteenth-Century Fiction*: Vol. 21: Iss. 3, Article 12.
Available at: <http://digitalcommons.mcmaster.ca/ecf/vol21/iss3/12>

Copyright ©2011 by Eighteenth-Century Fiction, McMaster University. This Article is brought to you by DigitalCommons@McMaster. It has been accepted for inclusion in Eighteenth-Century Fiction by an authorized administrator of DigitalCommons@McMaster. For more information, please contact scom@mcmaster.ca.

Review of: Candace Ward, *Desire and Disorder: Fevers, Fictions, and Feeling in English Georgian Culture*

unconvincing straw-man throughout. But his readings, denigrating a verse used only to transcend itself in sublimity, and delighting in the beauty of *Don Juan's* "absolute condition" of syllables (237), breathe brilliant life into the poetry itself as well as its period. Here, and at the best moments of all the essays, the scholarly strength of historicism is brought to bear on new territories that, set in powerful historical frameworks, are thus deepened and invigorated—not just repossession of an already-known critical territory, but breaking new ground.

Ruth Abbott
University of Cambridge

Candace Ward. *Desire and Disorder: Fevers, Fictions, and Feeling in English Georgian Culture*. Lewisburg: Bucknell University Press, 2007. 297pp. US\$72.50. ISBN 978-0-8387-5648-5.

Everybody's got the fever
That is somethin' you all know
Fever isn't such a new thing
Fever started long ago ...

—Peggy Lee's cover of Little Willie John's "Fever," 1958/1956

The eighteenth-century literary understanding of fever is a great topic for a book, for few words in a doctor's vocabulary at this time occasioned more anxiety or more uncertainty. Fevers were everywhere, and though some were common, everyday complaints, many were disgustingly deadly. Distinguishing among them was also an ongoing problem. Apart from being classed together because of the high body temperature that they produced in patients, everything else about fevers—their causes, symptoms, modes of transmission, and treatment—was open to interpretation and dispute throughout the century. Little was known about most of these fevers—typhus (and typhoid, often confused with it), yellow fever, malaria, scarlet fever, rheumatic fever, diphtheria, smallpox, puerperal fever, cholera—but many had the nasty habit of quickly killing otherwise healthy people. Stories are legion of individuals coming down with a headache in the evening, only to be dead by the next morning. Giving birth to children had always been a dangerous business for women, but the epidemic rise of child-bed fever during the eighteenth century increased mortality. Colonial travel and trade brought Europeans into contact with tropical fevers of all kinds, and the descriptions of the speed with which fevers sent them to their graves provided a sobering confirmation of the dangers of

leaving home. Fevers also were quite capable of becoming epidemics, and often were described, to adopt a commonly used metaphor, as a wild-fire: mysteriously spreading from one person or place to another, burning itself out of existence by its sheer intensity, and leaving behind a path of destruction. The experience with fevers was thus often sadly a collective experience in which great numbers of people were affected or destroyed. Eighteenth-century doctors saw fever as one of their primary concerns, and early conceptions of social medicine appeared in response to the high frequency of fever outbreaks in hospitals, jails, ships, orphanages, and slums. Lacking any conception of disease pathogens or their vectors, however, doctors mainly worked in the dark, and some of their treatments (notably, the use of blood-letting to cool a fever), undoubtedly did more damage than good. Fevers also played a powerful role in the formation of ideas about race, class, and gender, for the effort to decide why one person got sick while another did not was often based upon cultural assumptions, rather than clinical knowledge.

This latter dimension of fever interests Candace Ward, whose *Desire and Disorder: Fevers, Fictions, and Feeling in English Georgian Culture* is not so much a “rich description” of how eighteenth-century doctors and writers represented the experience of a fever than an attempt to use fever as an exploratory lens to examine the ideological nexus of disease, gender, class, and race in the construction of British identities during the Georgian period. Partially written during her tenure as a Fulbright scholar at the University of the West Indies, her book seeks to position eighteenth-century textual representations of “fever” within the larger context of British sentimental literature and culture. Fever writings, by which she means both literary and medical texts that discuss fever, played, she contends, “a regulatory and constitutive function” as they helped to reinforce British racial, gender, and class ideologies in the face of the disorder created by the “fevered body” (20).

Ward’s work belongs to a significant body of recent scholarship that treats medical texts as cultural documents open to literary interpretation. Central to her book is the claim that medical texts shared a commitment to verisimilitude that was central to the definition of the novel. Outstanding in this regard is her argument in chapter 1 that physicians and sentimental readers were brought together by the analogy of reading the fevered female body. In their mutual scrutiny of the fevered body, its lapsing speech, and linguistic and typographic conventions (multiple em-dashes and ellipses, for example), Ward identifies the Georgian medical practitioner with the “discerning female heroine” and implied consumer of the sentimental novel. Her comparison of Richard Manningham’s *Symptoms, Nature, Causes, and Cure of the ... Nervous or Hysterical Fever* (1750) with Francis Sheridan’s *Memoirs of Sidney Bidulph*

makes a strong case for the shared sentimentalized language—and the corresponding anxieties of writing and authorship—of the “modest,” but nevertheless authoritative, medical reading of the fevered female body within the context of a “feminized” culture of sensibility (34).

Subsequent chapters, rather than developing this model further, shift towards using fever to understand class, gender, and racial ideologies as they operate in domestic and colonial contexts. A chapter on puerperal fever is front-loaded with an extensive historical background of British lying-in charities, which, informative though it is, overwhelms the eventual literary treatment of her section on Mary Wollstonecraft’s *Wrongs of Woman*. Ward’s handling of the multiple meanings of poor women’s “labour,” which catalyzed in efforts to promote the development of lying-in hospitals, is complex and will interest scholars working on the history of midwifery, charitable medical institutions, and childbirth. Unfortunately, the focus shifts away from puerperal fever to the classed and gendered conditions that occasioned it. Typhus, or “jail-fever” as it was sometimes called, leads into a discussion of class conflict and to an illuminating account of the manner in which changes in the architecture of Newgate Prison and the Old Bailey courthouse reflected anxieties about the spread of fever from prisoners to judges. In the analysis of William Godwin’s *Caleb Williams* that follows upon this discussion, however, class struggle continues in focus, but typhus largely gets lost in a discussion of Caleb Williams’s “revolutionary fever.” In the two chapters on the impact of colonial fevers upon European bodies and on the pathologization of creoles, and in the concluding chapter that deals with Charles Dickens’s *Bleak House* (1852–53), Ward seems to have found it difficult to locate eighteenth-century literary and/or medical texts that would contribute substantially to her arguments. Her insights into the ideological construction of disease are valuable, but one wishes that literary and medical texts played a much more important role in this study. As a material phenomenon, “fever” remains curiously unaddressed. Although Ward discusses a range of medical texts, this consideration of fever might have been supplemented by numerous documents, particularly by naval, urban, or colonial doctors on the gruesome, corporeal reality of fever, the fear it produced, and the ways in which disgust and inhumanity towards those unfortunate individuals who fell under fever’s sway were as much a part of the eighteenth-century response to fever as sentimentalist identification.

Alan Bewell, University of Toronto

Andrea Charise, University of Toronto