

PSYCHOLOGY REVIVALS

**George Cheyne:  
The English Malady  
(1733)**

*Edited by*  
**Roy Porter**

ROUTLEDGE  


## *Psychology Revivals*

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### **George Cheyne: The English Malady (1733)**

In eighteenth-century Britain, the medical profession began to pay attention to the minor psychiatric disturbances of educated and polite society. Rather as neurosis became fashionable in fin-de-siècle Vienna, 'nerves' became a highly eligible illness in early Georgian London and Bath. What Freud was for Vienna, George Cheyne was for eighteenth-century fashionable ailments. Above all he was responsible for developing and popularizing the notion that abnormalities of mood and thought were due – not as traditionally thought to diabolical forces or the 'humours' – but to physiological defects of the nervous system. To explain how the nervous system collapsed, Cheyne spelt out a critique of modern, high-pressure urban society which in many ways prefigured Rousseau, and also Freud's *Civilisation and its Discontents*.

Though an important figure, Cheyne has been little studied. No scholarly reprint exists of his major thematic work, *The English Malady*. This edition, originally published in 1991 as part of the *Tavistock Classics in the History of Psychiatry* series, prefaced by a substantial introduction by Roy Porter, aims to contextualize the work in respect of eighteenth-century medicine, culture and society.

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George Cheyne:  
The English Malady  
(1733)

*Edited with an Introduction by*  
Roy Porter

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of all Kinds (1733)

by George Cheyne

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# PREFACE

Cheyne's *English Malady* was one of the best-known and most influential books of the Georgian age dealing with what we would now call psychiatric disorders. Drawing upon modern advances in anatomy and physiology, Cheyne saw what we would term 'functional disturbances' and 'neuroses' as the products of disorders in the nervous system, and thus may be seen as one of the originators of the neurological school of psychiatry. Believing such sickness was growing more frequent, he contended that it should be regarded as a 'disease of civilization', the product of the pressures and affluence of modern life, especially amongst the rich. Hence his approach may broadly be termed that of epidemiological psychiatry. By making 'neurosis' acceptable, even fashionable, Cheyne's book assumed considerable wider cultural significance during the Enlightenment. Cheyne was himself an eminent figure in the world of letters and science as well as medicine.

This reprint edition contains an original 16,000 word introduction, which examines Cheyne's life, his intellectual milieu, and his other medical and scientific writings, as well as offering a detailed analysis of the text of *The English Malady*. Cheyne's place in the development of British psychiatry is reassessed.

Roy Porter  
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# INTRODUCTION

Roy Porter

In 1733 George Cheyne published *The English Malady*;<sup>1</sup> it was an immediate success, going through six editions in as many years, and confirming his standing as perhaps the most popular English writer of practical medical works targeted at the 'general reader'. It was a reputation which lasted throughout the century. Thus, when in 1781 Lady Pembroke wanted to give some health advice to her son – it concerned that subject of evergreen interest to the English, the wearing of flannel – she laboriously transcribed a page from Cheyne's work, rounding off her letter with: 'So says Doctor Cheyne, from whose Book the above is copied (*so you see what a wise woman I am*).'<sup>2</sup> Thus the works of Cheyne, dead by then some forty years, were still being consulted, and his name was assumed to be perfectly familiar to the younger generation.

Yet *The English Malady* was not the most easily assimilated or the most popular of Cheyne's works – his writings on gout and his *Essay of Health and Long Life*<sup>3</sup> probably spoke more directly to their readers – nor was its reception unmixed. All of his writings, of course, had their opponents.<sup>4</sup> The very fact that he was a physician writing for a lay audience, instructing readers on health self-care – above all, urging them to adopt a temperate lifestyle – made fellow practitioners look askance at him: he seemed to be usurping the special role of clinical expertise. Thus when a contemporary clergyman, Robert Leake, fell sick, he took to reading Cheyne's works, and became an enthusiast for his 'low regimen' and 'milk and seed diet' teachings. In course of time, by following Cheynian dicta, he grew 'greatly emaciated'. In the end, 'his friends advised him to apply to Dr Mead', then perhaps the top-notch physician in the

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capital (and incidentally a colleague with whom Cheyne generally enjoyed cordial relations). Leake went 'directly to London to wait on the doctor', informing him 'that he had hitherto observed Cheyne's directions, as laid down in his printed book'. An honest but insouciant remark, which sparked deep professional jealousies:<sup>5</sup>

Mead, a proud man, and passionate, spoke with contempt of Cheyne and his regimen. 'Follow my prescriptions', said he, 'and I will get you up again.'

Leake, however, did not accept that being under Mead's directions automatically suspended his right to use his own independent medical judgement:<sup>6</sup>

Mr Leake asked the doctor, every now and then, whether it might not be proper for him to follow, at the same time, such and such prescription of Cheyne, which Mead took ill. When the well-meaning patient was got pretty well again, he asked the doctor what fees he desired or expected from him. 'Sir', said the physician, 'I have never yet, in the whole course of my practice, taken or demanded the least from any clergyman; but, since you have been pleased, contrary to what I have met with in any other gentleman of your profession, to prescribe to me, rather than follow my prescriptions, when you had committed the care of your recovery to my skill and trust, you must not take it amiss, nor will, I hope, think it unfair, if I demand ten guineas of you.'

But if doctors were somewhat dubious, all the signs are that sufferers who consulted Cheyne's books were deeply impressed by his advocacy of simple habits and the golden mean. Lord Hervey, probably afflicted with gallstones, waxed positively lyrical about his teachings. Having read the *Essay on Health and Long Life*, he became a convert, and put himself personally under the author. 'He advised me', Hervey wrote,<sup>7</sup>

to take the Bath waters for six weeks (as I had often done before) in order to cleanse and strengthen my stomach; during that time to eat no meat; and at the end of it to go into a total milk diet for two months. He ordered me to take a vomit of thirty grains of Indian root once a week, in which I obeyed

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him so punctually that I did it every Monday morning without intermission for six months together. He gave me no other medicine but an infusion of the bark (which I left off in a very little time) and a little rhubarb the day after every vomit.

Cheyne's safely and surely regime turned him from a sickly invalid into a pillar of health:<sup>8</sup>

From the time of my first putting myself into his hands, to this hour, I never had one formed fit of the colic; though for three years together, according to his prescription, I ate neither flesh, fish, nor eggs, but lived entirely upon herbs, root pulse, grains, fruits, legumes and all those sorts of foods, which, before I left off meat and wine, I could never eat of, though in the smallest degree, without feeling a pain at my stomach in half an hour after they were lodged there.

Samuel Richardson, the novelist, the deeply religious Countess of Huntingdon, and various members of the nobility became Cheyne's patients – and friends too. He turned into somewhat of a cult figure, thanks to his general commitment to self-care in health and his moral piety.

But *The English Malady* was no run-of-the-mill practical guide to healthy living, and it provoked rather more mixed feelings, above all because of its apparent tendency to glamorize the condition of being nervously ill.<sup>9</sup> By characterizing nervous debility as the archetypal malady of the elite, Cheyne seemed to imply that to be truly fashionable, it was necessary to display at least a little mental abnormality or emotional anxiety: distinction required a touch of *difference*.<sup>10</sup> Critics feared the dangers of indulging in such melancholy *à la mode*. Thus Samuel Johnson warned Boswell against the seductions of Cheyne's views: 'Do not let him teach you a foolish notion that melancholy is a proof of acuteness.'<sup>11</sup>

*The English Malady* is thus of special interest, as a somewhat exceptional work by an author whose lasting popularity stemmed from his skill at wrapping up the medical commonplaces of the day in a graphic prose spiced with epigram. In book after book, he expounded to the educated public time-honoured truths as to the causes of sickness, and handed down the tablets of healthy living.<sup>12</sup> He stressed that the balance between good and bad health depended

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on attention to lifestyle. Gluttony, indolence, hard drinking, late nights and late rising – all jeopardized the constitution.

Cheyne wanted to break the lazy habit of allowing oneself to fall sick and then summoning the doctor: ‘Fine folks’, he complained, ‘use their physician as they do their laundresses, send their linen to them for it only to be dirtied again.’<sup>13</sup> An ounce of prevention, however, was better than a pound of cure; for it was ‘most certain that ’tis easier to *preserve* Health, than to *recover* it; and to *prevent* Diseases, than to *cure* them’.<sup>14</sup> In particular, in his best-selling *Essay of Health and Long Life* (1724), he set special store by the ‘non-naturals’, the six departments of everyday living, in which attention to temperance would prove particularly efficacious:<sup>15</sup>

1. The Air we breathe in.
2. Our Meat and Drink.
3. Our Sleep and Watching.
4. Our Exercise and Rest.
5. Our Evacuations and their Obstructions.
6. The Passions of our Minds.

To maintain good health, it was necessary to pursue a prudent middle course in each of these. Over-indulgence at the table was especially pernicious. Cheyne relentlessly condemned the dangers of toothsome but indigestible dishes (those that were rich, salted, pickled, smoked, or highly-seasoned), and distilled liquors, inveighing against gourmandizing. ‘The great *Rule*’, he stressed, ‘of Eating and Drinking for *Health*, is to adjust the *Quality* and *Quantity* of our Food to our *digestive* Powers’, concluding that ‘Nothing conduces more to *Health* and *Long Life*, than *Abstinence* and *plain* Food, with due *Labour*.’<sup>16</sup> Although, as we have seen in the case of Lord Hervey, Cheyne occasionally advocated for the seriously sick quite radical dieting – even a wholly meat- and alcohol-free regime – his general notion of moderation was hardly mortifying. Deploring hard drinking, which he regarded as addictive, Cheyne advised his average reader not to sink more than a couple of pints of wine a day; two chicken legs and a wing were sufficient flesh for a meal. Cheyne was popular in part because he did not require the reader to make a martyr of himself.

In short, moderation in everything was the key to health and long life. ‘If Men would but observe the *golden Mean* in all their *Passions*, *Appetites* and *Desires*’, he contended in the ‘Conclusion’ to his *Essay of Health*:<sup>17</sup>

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if in all their *Thoughts, Words and Actions*, they would but mind, I will not say the *End* of their *Being and Existence* here, the *End* to which their *Thoughts, Words, and Actions* naturally tend in their last *Resort*; And, *Lastly*, If in the *Gratifications* of their *Appetites, Passions and Desires*, they follow'd the uncorrupted *Dictates of Nature*, and neither spurred her on beyond her *Craving*, nor too violently restrained her in her *innocent Biass*; they would enjoy a greater Measure of *Health* than they do; have their *Sensations* more *delicate*, and their *Pleasures* more *exquisite*; live with less *Pain*, and die with less *Horror*.

Not least, he insisted – still rather plitudinously – upon the importance of regulating the mind and temper for the maintenance of well-being. ‘The *Passions* have a greater Influence on *Health*, than most People are aware of’, he explained, telling his readers to educate their emotions:<sup>18</sup>

2. All *violent* and *sudden* Passions, dispose to, or actually throw People into *acute* Diseases; and sometimes the *most violent* of them bring on *sudden* Death.
3. The *slow* and *lasting* Passions, bring on *chronical* Diseases; as we see in Grief, and languishing hopeless Love . . .
5. Men of lively Imaginations and great *Vivacity*, are more liable to the *sudden* and *violent* Passions, and their Effects.
6. Thoughtful People, and those of good Understanding, suffer most by the *slow* and *secretly consuming* Passions.
7. The *Indolent* and the Thoughtless suffer *least* from the Passions: The *Stupid* and Ideots *not at all*.
8. The *Diseases* brought on by the Passions, may be cured by *Medicine*, as well as those proceeding from other Causes, when once the Passions themselves cease, or are quieted. But the *preventing* or *calming* the Passions themselves, is the Business, not of Physick, but *Virtue* and *Religion*.

As we shall see, Cheyne’s final point – the mutual necessity of medical and spiritual succour – was not just a pious appendage but was integral to his system. The answer to personality disorders did not lie simply in pill-popping: personal medical history taught

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Cheyne that in the healing process devotion was no less effective than drugs.<sup>19</sup>

The core maxims Cheyne adumbrated in his books were the commonplaces not just of his own age but of two millennia of humanistic medicine since the Greeks, with their orientation towards regimen for the maintenance of a healthy constitution, and their taken-for-granted 'holism'. Equally, his public career was in most respects unremarkable. After a Scottish medical education, he had come to London in search of fame and fortune, eventually settling in that Mecca for the chronic sick, Bath. He never rose to the power, stature, or fortune of a Richard Mead or a Sir Hans Sloane; he never entered public life, held influential office, or headed the College of Physicians. Nor did he, in any tangible sense, make original discoveries in science or medicine, found a school, or cultivate disciples. Although enthusiastic early in his career in his advocacy of Newton, he cannot be listed amongst the top popularizers of Newtonian science. Cheyne's claim to enduring fame may therefore seem somewhat puzzling.

Not least, his place within the history of *psychiatric* thought and practice might *prima facie* appear problematic, given that most of his works dealt primarily with physical malaises such as gout. Even *The English Malady*, though engaging with the field of mental disorders, explicitly declined the challenge of discussing lunacy as such – on the slightly quixotic grounds that the book was intended as a practical advice manual, and to instruct the mad to behave reasonably was not in itself reasonable. Cheyne never, so far as is known, personally treated the insane or involved himself, privately or publicly, with their institutional care.

The purpose of the following pages will be to explore these paradoxes. It will highlight the distinctive quality of *The English Malady* within Cheyne's *œuvre* and address his claim to be a significant figure in the development of British psychiatry.

### Life

In view of his later trials and traumas in managing his bodily appetites, it is especially frustrating that the formative years of Cheyne's life are veiled in obscurity.<sup>20</sup> He was born, probably in

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1671, possibly in 1673, at Methlick in Aberdeenshire. Little is known of his parents, except that the Cheynes were an old family, Episcopalian in faith, and distantly related to Gilbert Burnet, the Whig Churchman and historian. George, whose half-brother became an Anglican clergyman, refers to his own upbringing as 'pious'. He received a classical education, and, probably being intended for the ministry, attended Marischal College, Aberdeen, in the late 1680s. He then appears to have served as tutor to John Ker, later Duke of Roxburgh, through whom he would have come into close contact with religious Pietists, before falling decisively under the influence of Dr Archibald Pitcairn. Pitcairn, who had taught at Leiden, where one of his pupils was Boerhaave, was amongst the most eminent medical theorists of the day, and the encounter turned the young Cheyne to a career in medicine.

Cheyne studied with Pitcairn – his 'great Master and generous Friend' – while the latter was professor of physic at Edinburgh University. The pupil soon cut his scholarly teeth, defending his mentor's iatro-mechanist theories against other Scottish physicians in his anonymously published and vituperative *New Theory of Fevers* (1702) – a work which Cheyne later excused as a 'raw and unexperienced performance'. The controversy grumbled on in further tetchy pamphlets. It is significant mainly for demonstrating Cheyne's wholehearted espousal of Pitcairn's iatro-mechanical understanding of the body as a system of pipes and pressurized fluids, whose workings were utterly to be explained through the mechanical philosophy. He called for the adumbration of a hydraulic equivalent of Newton's *Principia*, to apply not to the cosmos at large but to corporeal operations. Already he was developing his lifelong view of 'obstructions' as the great source of disease.

In 1701 Cheyne was made MD of King's College, Aberdeen. It was probably this advancement that enabled him to migrate to London, around 1702, aged about thirty, to launch his medical career. He obtained no licence from the Royal College of Physicians of London; technically he was, and remained, an interloper, no better than a quack. Soon after arrival in London he was elected a fellow of the Royal Society (1702).

Though he left no mark upon that Society's proceedings, Cheyne was connected over the next few years with some of the top

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mathematicians and natural philosophers in the metropolis, including David Gregory, Edmond Halley, and John Arbuthnot. Plunging into mathematical pursuits, his next publication was the *Fluxionum Methodus Inversa* (1703),<sup>21</sup> a defence of the Newtonian method of fluxions, which involved him in acrimonious exchanges with the distinguished Frenchman, Abraham de Moivre. In truth, Cheyne was a mediocre mathematician, his work riddled with mistakes. Altogether more substantial was his *Philosophical Principles of Natural Religion* (1705), which derived both the existence of the Deity, and His continual supervision of Creation, from Newtonian natural philosophy in ways already made familiar by a succession of Boyle lecturers.<sup>22</sup>

It was after three or four years in London that Cheyne's life underwent its first crisis. In order to establish himself as a physician, he had begun (as he tells us in his autobiography) to drink himself into practice. Abandoning the restrained and sober demeanour of his early years, he took to carousing with 'Bottle-Companions, the younger Gentry, and Free-Livers'.<sup>23</sup> It seems he spent much time in taverns and coffee-houses, hoping to become acquainted with potential patients, prescribing, doing business with apothecaries, and so forth – a manner of getting on in medicine familiar from the lives of eminent London physicians such as Richard Mead and Samuel Garth. He evidently established a popular reputation as a wit, *bon viveur*, and man-about-town:<sup>24</sup>

nothing being necessary for that Purpose, but to be able to *Eat* lustily, and swallow down much *Liquor*; and being naturally of a large *Size*, a cheerful *Temper*, and Tolerable lively *Imagination*, and having, in my country Retirement, laid in Store of *Ideas* and *Facts*, by these Qualifications I soon became caressed by them, and grew daily in *Bulk* and in Friendship with these gay Gentlemen and their Acquaintances.

By about 1705 or 1706, it seems, this high living amongst the smart set was seriously taking its toll upon his health; he became 'excessively fat, short-breath'd, Lethargic and Listless'.<sup>25</sup> Believing his very life to be threatened, he sobered up (whereupon his fairweather friends 'dropt off like *autumnal leaves*'),<sup>26</sup> quitting London, retiring to the countryside, and putting himself on an austere diet. His surplus flesh melted away 'like a Snow-ball in

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Summer'.<sup>27</sup> Around 1710, he set up house in Bath and Bristol, both to earn a medical living and also to seek a cure for himself: he was to settle permanently in Bath from 1720. During the 1710s and 1720s, his weight, health, and spirits underwent repeated and violent oscillations. Stringent dieting and self-physicking slimmed him down on occasions, but subsequent attempts to return to normal conviviality led once more to gross corpulence, to sickness, and to dread of physical dissolution. Around 1710, a particularly serious relapse led Cheyne to visit Dr Taylor of Croydon, a clergyman famous for his advocacy of an all-milk diet, to which he claimed to owe his conquest of epilepsy. Adherence to Taylor's diet restored Cheyne to being 'Lank, Fleet and Nimble'.<sup>28</sup>

Perhaps enjoying better health, Cheyne published in 1715 a reworked and extended version of his *Philosophical Principles of Religion*, styled 'Part ii': it was to be Cheyne's last foray into popular Newtonianism. Better times were not to last, however, for around 1720 he underwent a relapse, experiencing 'a Craving and insufferable Longing for more Solid and Toothsome Food, and for higher and stronger Liquors'.<sup>29</sup> He got into the habit of drinking three bottles of wine a day, and blew up to thirty-two stone. Eventually he needed a servant to walk behind him carrying a stool, so that he could rest every few paces. His legs came out in scorbutic ulcers; erysipelas and gout followed; and, as a final resort, he prescribed himself hefty quantities of opiates, though recognizing them to be a 'slow poison'.<sup>30</sup>

Desperation led him back in the summer of 1723 to his vegetarian diet, but no speedy recovery followed. Two years later, in 1725, he was consulting in London with some of his most trusted physician cronies, such as John Arbuthnot. Cheyne seems progressively to have restricted his diet still further, and, slowly but surely, health returned. He dated his 'perfect recovery' from 1732, and enjoyed good health thereafter, through the last, tranquil, decade of his days.

From the 1720s, Cheyne devoted his publishing activities exclusively to medical works; his earlier brash, polemical tone gave way to a mellower voice. His *Observations on Gout and on the Bath Waters*<sup>31</sup> – evidently based upon personal experience – came out in 1720; it proved a great success, running through seven editions in its first six years, and ten London editions by 1753, to say nothing of other impressions issued by the Dublin pirates. In it Cheyne

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expatiated upon the evils of luxury and the necessity of culinary moderation – the virtues of a vegetable diet in particular – themes he continued to reiterate throughout his career. Originally penned as advice to a particular patient, Richard Tennison, the work had a personal touch which ensured its popularity, despite the largely commonplace nature of its suggestions.

His later writings harp on similar themes. The most popular of them was the *Essay of Health and Long Life* (1724). It reached its ninth edition by 1754, and was additionally translated into French, Latin, Dutch, and German. Written, it seems, at a time when his own health was at its most precarious, it perhaps owed its success to the air of personal urgency it conveyed. Cheyne said relatively little about the cure of sickness (his readers would, of course, be wealthy enough to command their own physicians). But he offered detailed – though never tediously Polonian – instructions for the patterning of a healthy lifestyle, organized around the classic grid of the ‘non-naturals’. It was a work marked by good sense and tact. Sidestepping the rather extreme dietary recommendations (vegetarianism, a milk and seed diet, no alcohol) to which Cheyne had resorted in his own case, it contented itself with bringing home to readers the dangers of guzzling and toying, and denounced the other excesses of fashionable high life (late nights, sedentary occupations, excessive tight-lacing, etc.). Thereby the diseases of civilization could be avoided, and true refinement facilitated.

There followed *The English Malady* (1733), a sizeable success, *An Essay on Regimen* (1740)<sup>32</sup> – Cheyne thought this his finest work, though for some reason, it did not sell well – and, finally, in 1742 the *Natural Method of Cureing the Diseases of the Body, and the Disorders of the Mind Depending on the Body*.<sup>33</sup> Though the work of a seventy-year-old, this was as stylistically sprightly as ever; it ran to five editions and was translated into French. In it Cheyne boiled down the pith of healthy living into a few basic practical principles: (1) Proper evacuations, (2) Attenuating and deobstruent medicines, (3) Astringents and strengtheners of the solids, and (4) Proper and specific diet, with air and exercise. Never be anxious that you might be eating too little, he insisted; hunger pangs would always take care of that problem.

Cheyne passed his mature years cultivating a flourishing practice in Bath. His friends and acquaintances included Samuel Richardson,

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Alexander Pope, Samuel Johnson (who speaks of the 'learned, philosophical and pious, Dr Cheyne'), John Wesley, David Hume, and Selina, Countess of Huntingdon. His extensive correspondence with Richardson and the Countess, now published,<sup>34</sup> testifies to his profound faith – he was well read in mystical and pietist writers such as Boehme – no less than to his considerable psychological insight into the troubles of mortal man.<sup>35</sup>

His more extreme medical views were often ridiculed ('enthusiast' was the epithet bandied about). But Cheyne was popular: valued as a guileless, benevolent, good-natured fellow, somewhat in the Don Quixote mould. Pope commends his 'true simplicity of heart'.<sup>36</sup> He died at Bath on 13 April 1743. His wife survived him; his only son became a clergyman of the Church of England.

### The animal economy

*The English Malady* (1733) should not be seen as marking a radical break with Cheyne's other writings, but rather as concentrating upon a particular dimension. In it, Cheyne sets out a model of the workings of the human organism, in both its normal and pathological state; he explains how to preserve its smooth operations, as also how to restore a healthy equilibrium if lost. But he does so in context – as its title indicates – of what we may call a geo-sociology of health and sickness. This section will explore Cheyne's anatomical and physiological views; these will later be set in their wider socio-cultural and historical contexts.

A committed iatro-mechanist, Cheyne posited the body as a machine. He never, of course, sought to reduce the phenomenon of life itself to the mere mechanical interplay of material components – as a staunch Newtonian, Cheyne could not doubt that some kind of superadded principles also played their part, some superfine ether, he says, perhaps akin to light. Yet it was for him axiomatic that medicine must take as its province the physical workings of the assemblage of components – fibres, tissues, muscles, organs, etc. – comprising the body.<sup>37</sup>

In that respect, Cheyne was a thoroughgoing 'modern', who had decisively broken with the philosophy of the humours. Cheyne rarely even wrote of the humours, perhaps suspecting that they

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were nothing better than verbal flimflam: in a parallel way, he distrusted talk of those other mysterious entities, the 'animal spirits', which he dismissed as 'of the same Leaven with the *substantial Forms* of Aristotle and the *caelestial System* of Ptolemy'.<sup>38</sup> Pursuing such intangibles was just a will-o'-the-wisp: 'the dwelling so much upon them had led Physicians too much to neglect the mending the Juices, the opening Obstructions, and the strengthening the Solids' – all good practical, tangible, projects.<sup>39</sup>

Cheyne did not believe that the secret of individual health lay in the precise quality, mixture or equilibrium of the body's fluids; unlike classical physicians, he was less interested in the uniqueness of the individual organism (in other words, what was traditionally called 'temper', 'humour', or 'complexion'), than in the design and integration of the parts in general. Indeed, the fluids *per se* were not especially critical determinants of health. Rather, what was important about the fluids was that they should actually *flow*. And that desideratum hinged largely upon bodily hydraulics: on the one hand, the viscosity of the fluids themselves; and, on the other, the gauge of the channels through which they would be coursing, and the presence, magnitude and shape of accidental obstructions to their flow. The more free and regular the flow of fluids throughout the bodily system (and that meant, above all, a speedy and efficient progression from food intake, through digestion, to excretion of wastes), the healthier the body.

For Cheyne, in other words, it was the solids which were truly important: 'the Human Body is a Machin [*sic*] of an infinite Number and Variety of different Channels and Pipes, filled with various and different Liquors and Fluids'.<sup>40</sup> And it was the mechanical properties of the body solids which held the key to health, being, he contended, the 'only instrument of *Life* and *Animation*'.<sup>41</sup>

Cheyne thus devoted prime attention to the valves, veins, and pipes, conveying blood, air, aliment, chyle and other 'juices'. All such vessels required the widest possible bore and had to remain unclogged. Tubes, however, readily scaled up, or grew swollen, or partially blocked by accretions, nodules, swellings, inflammations, and other obstructions forming within them. The chief culprit was improper diet. Excessive food and drink intake would lead to the pipes simply becoming overlaid and flooded, thus rendering

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motion sluggish, and the fluids stagnant. But worse still was incorrect diet. Surplus acids and salts in food would accumulate in the stomach, and thence move into the blood, provoking chemical reactions and mechanical deposits in the vascular system, producing knots, contractions, calculi, and so forth.

At the same time, poor diet would render the fluids circulating round the bodily channels themselves viscous, thicker, or, as Cheyne's favourite graphic metaphor expressed it, more 'glewy' or 'sizy'. Coagulating blood, and sticky gastric juices or lymph clearly could not perform their function properly.

Third, in addition to the condition of the tubes and their fluids, the state of the nerves was vital. Animal functions depended upon the ready, free, and painless operation of the nerves in expanding and contracting, or growing tense or relaxed, so as to communicate sensation and activate motion.<sup>42</sup> The optimal condition was a firm fibre tone. Cheyne was no anatomist, experimentalist, or microscopist, and did not advance a detailed micro-physiology of the nervous fibres. He did not particularly envisage them as hollow pipes through which fluids coursed to conduct messages through the body; nor did he postulate them mainly as electrical conductors. Rather he frequently drew upon the model of the well-tuned musical string, which, when struck or plucked, would vibrate with a proper pitch and so convey the right signal. Indeed, he envisaged the intellect ensconced in the brain, the terminal point, of course, of all the nerves, rather 'like a *Musician* in a finely fram'd and well-tun'd Organ-Case', in which 'these Nerves are like *Keys*, which, being struck on or touch'd, convey the Sound and Harmony to this sentient Principle, or *Musician*.'<sup>43</sup> Another of Cheyne's favourite analogies for the economy of the nerves was the 'spring' in healthy human hair: the nerves were fine threads or filaments; when healthy, they possessed a proper degree of elasticity or 'bounce'; if out of condition, they grew brittle.

It was the office of the nerves to convey sensation and motion throughout the body, communicating between the extremities, the intermediary intestinal organs, and the brain. If the nerves lost their tensileness, tone, or spring, growing flaccid or 'weak', the result was a breakdown in body operation, accompanied by physical pain and consequent supersensitive mental distress (far from being anaesthetized, weak nerves were extremely painful). Clogged tubes, viscid

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fluids, and lax fibres would cumulatively create a languid, sluggish body, poor disposal of bodily wastes (manifest, for instance, in dropsy), and feelings of heaviness, lethargy and gloom.

This all-round feeling of being unwell, of want of spirits, could worsen into that elastic class of disorders known as chronic disease. (Cheyne complains in passing that while medicine has paid due attention to acute disease – to fevers and the like – chronic distempers remain neglected.) Such conditions may at first appear in quite mild forms – general, non-specific feelings of malaise, popularly known by such terms as the vapours. ‘*The Human Machin*’, he announces, is well when it has ‘strong Spirits and firm Fibres’, but sickens when attended by ‘Weakness of Nerves, Vapours, Melancholy’.<sup>44</sup> Dry fibres contribute to ill-health, of course, producing inflammatory diseases, but moist, sticky and flabby nerves – the products of excesses at table – equally debilitate the constitution. Such weak and relaxed nerves lead to diarrhoeas, phlegm, spitting, rheums, dropsy, diabetes, scrofula, and so forth. But many other ailments besides could be ascribed to weak nerves. ‘Those who Stutter, Stammer, have great Difficulty of Utterance, speak very low, lose their Voice without catching Cold, grow dumb, Deaf or Blind, without an Accident or an Acute Distemper’<sup>45</sup> – all such people are suffering from weak Nerves, Cheyne assures us, and, pointing towards one of the key themes of his work, ‘have a great Degree of Sensibility; are quick Thinkers, feel Pleasure or Pain the most readily, and are of the most lively Imagination’.<sup>46</sup>

Sharp, viscid juices and weak nerves can also bring more serious consequences: gout, rheumatism, and convulsions are all the products of severer blockages and stoppages. In such cases, the intestinal organs tend to be particularly affected, and the root of the problem lies in the gut:<sup>47</sup>

I never saw any Person labour under severe, obstinate, and strong *Nervous* Complaints, but I always found at last, the *Stomach, Guts, Liver, Spleen Mesentery* or some of the great and necessary Organs, or *Glands* of the lower Belly were obstructed, knotted, schirrous, or spoil’d.

Swellings of this kind often presented themselves in the form of scorbutical or scrofular conditions;<sup>48</sup> thus Cheyne saw glandular

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distempers as fundamentally nervous; he also suspected that in hysteria and hypochondriacal cases, the liver was usually enlarged.

Numerous other rather serious ailments – nervous fevers, cholicks, gouts, asthmas, rheumatism etc.<sup>49</sup> – were also due to a relaxed state of the fibres. The worse the obstruction, the more serious the resulting disorder, rising to palsy, paralytic disorders,<sup>50</sup> and ultimately apoplexy and epilepsy.<sup>51</sup>

When people find themselves low-spirited, lethargic, fatigued, dulled, in physical pain and wracked by despair, Cheyne notes, recollecting, one imagines, his own case, they often resort to artificial stimulants. They try spicy and piquant dishes, to rouse their appetites and give relish to their tastes, and, above all, fly to the bottle, expecting that its ‘spirit’ will invigorate them. But nothing could be worse. For such measures merely exacerbate the original condition. Rich, acid food and distilled liquors further clog and corrode the tubes, producing fresh irritation in the fibres, renewed inflammation, and fiercer pain.

An effective curative regimen is possible, however, but this must proceed from systematic body management. As Cheyne never tires of pointing out, people are what they eat, and chronic malaises typically flow from reckless consuming passions. Rich foods are always harmful because they abound in mineral salts, which, being angular, hard, sharp, corrosive, or caustic, irritate and block the passages.<sup>52</sup> (Drawing attention to the chemical writings of Newton, Keill, Freind, Stephen Hales, and Bryan Robinson, Cheyne compares the effects of rich cooking on the stomach to the operations of bituminous and sulphurous discharges underground in detonating volcanic activity.)<sup>53</sup> And if individual dishes are harmful, ingrained dietary bad habits are even worse, turning in due course into compulsions and addictions, thereby becoming ‘the chief efficient Cause’ of further sickness. Potent draughts should be consumed under exceptional circumstances only:<sup>54</sup>

Strong Liquors were never designed for common Use: They were formerly kept (here in *England*) as other Medicines are, in *Apothecaries Shops* and prescribed by *Physicians*, as they do *Diascordium* and *Venice Treacle*; to refresh the *Weary*, to strengthen the *Weak*, to give *Courage* to the *Faint-hearted* and raise the *Low-spirited*. And it were as just and reasonable,

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to see Men (and, if they go on, it is not impossible I may hear of it, since *Laudanum* is already taken into *Feasts and Entertainments*) sit down to a Dish of *Venice Treacle*, or Sir *Walter Raleigh's Confection*, with a Bottle of *Hysteric Cordial*, as to a Dish of *Crawfish Soop*, and *Ox Cheek*, or *Venison Pasty*, with a Bottle of *Hermitage*, or *Tockay*, or, which some prefer to either of them, a Bowl of PUNCH.

In all such nervous disorders, judicious use of medicines together with sensible diet should point the way to remedy. It was firstly important to thin the fluids. Quaffing water and diluent beverages, such as barley water, would be beneficial, as would taking vigorous exercise (riding was best). All forms of evacuation were called for, to rid the body of surplus bile, slime, faeces, etc., and break up thick, tough phlegm and catarrhs. Emetics and phlebotomy would both help (Cheyne was a great advocate of vomits).

But Cheyne the iatro-mechanist was also a staunch believer in the 'more free and general (but cautious) Use of the Preparations of *Mercury* and *Antimony*' as potent purgatives.<sup>55</sup> Being literally so heavy – yet also so easily broken up into tiny globules – mercury would force its way into tiny vessels, capillary tubes and crevices, expelling unwanted matter. Cheyne regretted that mercury had fallen under a cloud, associated in the public mind with the nostrums of the quacks (those 'unskilful, unprincipled wretches').<sup>56</sup> An ethical physician, of course, would administer such remedies only as part of a controlled therapeutic programme.

Also useful for performing this purgative office were sarsafra, sarsaparilla, aloes, wormwood, broom, calomel, and guaiac. Such medicines would further contribute to the second indispensable process: removing and dissolving obstructions, breaking up saline concretions, and destroying sharpness and acrimony. For this, the best medicines were ones designed to destroy salts – above all, volatiles and foetids such as assafoetida (excellent for promoting perspiration), guaicum, hartshorn, ammonia, Bath water, saffron, soap, garlic, and horseradish. In his earlier work on gout, Cheyne had already sung the praises of these drugs.

The third requisite was to 'restore tone and elastick force' to the nerves. The best way 'to crisp and wind up' the fibres was through the use of bitters, aromatics, chalybeats, wormwood, cinnamon,

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and (one of Cheyne's favourites) 'bark' (quinine) as a strengthener in nervous cases.<sup>57</sup> Cheyne also had considerable faith in the bracing effects of Bath waters.<sup>58</sup>

In conjunction with physic, it was essential to pursue a sensible diet. Certain general rules applied. Vegetable foods were easier to digest than animal, and, amongst vegetables, grains were preferable to greens. Mild and sweet edibles were better than foods which were sharp, salt or sour. As to the allegation that he had ever sought to impose a meat-free, milk and seeds diet upon everybody, Cheyne emphatically denied it: 'I never once had such a dream.'<sup>59</sup> The all-milk diet was needed only for those suffering from '*a settled Hectick (from Ulcers) an Elephantiasis and Leprosy, a humorous Asthma, a chronical Diabetes, an incurable Scrophula and a deep Scurvy*', to say nothing of '*higher and unconquerable hysterick and hypochondriack Disorders*',<sup>60</sup> and severe nervous choleric, melancholy fits, and consumption. For most people, however, a diet entirely without meat would prove too weakening.

Two features stand out in Cheyne's discussion of the causes and cures of nervous disorders. First, he characterized them as essentially corporeal in aetiology and nature: '*the Disease is as much a bodily Distemper ... as the Small-pox or a Fever.*' Combating anyone inclined to dismiss all such nervous conditions as mere phantoms of the mind, Cheyne thus adumbrated a comprehensive and internally consistent physiology of veins and vessels, fibres and food, which rooted nervous disorders squarely in the body.

Second, certain types of people, he insisted, were worse afflicted by nervous conditions than others.<sup>61</sup> 'The common Division of Mankind into *Quick Thinkers, Slow Thinkers and No Thinkers*', he remarked, 'is not without Foundation in Nature and true Philosophy.' Thus, 'Persons of slender and weak Nerves are generally of the first Class: the Activity, Mobility and Delicacy of their intellectual Organs make them so.' By contrast,<sup>62</sup>

*the Truth is, it [i.e., affliction with nervous disorders] seldom, and I think never happens or can happen, to any but those of the liveliest and quickest natural Parts, whose Faculties are the brightest and most spiritual, and whose Genius is most keen and penetrating, and primarily where there is the most delicate Sensation and Pain.*

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When did you last see a country clodpole suffering from the vapours? The implications of these remarks will be explored in the following section.

### The English malady as a disease of civilization

The key to Cheyne's patho-physiology – the claim that excess was the mother of disease – was, of course, as old if not as the hills at least as the Greeks. Cheyne's individual touch lay in integrating this proverbial platitude within a model of the animal economy which spoke of the mechanisms of tubes, nerves, and springs rather than of the humours (choler, bile and phlegm). He was thus central to that tendency in Georgian Britain to characterize a variety of chronic, non-specific, functional, and, perhaps, psycho-somatic disorders – conditions such as the '*Vapours, Spleen, Flatus, Nervous, Hysterical, and Hypochondriacal Distempers*' – as 'nervous', a tendency begun by Thomas Willis's '*neurologie*'<sup>63</sup> and systematized by the later Edinburgh school of Whytt, Gregory, and the Monros.<sup>64</sup>

Cheyne, however, went further and, with a bold flight of fancy, gave his own particular label to that nest of lifestyle-related distempers which he laid bare: 'The English Malady'.<sup>65</sup> It was not unprecedented, of course, to denominate diseases as the property of particular nations. Britons had long been accustomed to styling syphilis the 'French disease',<sup>66</sup> just as the French dubbed it the Spanish disease, and Spaniards called it the Neapolitan. But, as this example suggests, disease labelling of this kind typically descended into xenophobic mud-slinging. What was daring about Cheyne's master-stroke was the element of *self-labelling* (though, of course, as a Scot, he may have been amusing himself at the expense of Sassenachs), and the consequent implication that, unlike the French pox, the 'English Malady' was not a disorder of which sufferers need unequivocally be ashamed.

To speak of a disorder – or rather a syndrome – as English, was to imply that it stemmed not from purely natural factors – from atmospheric 'infections', seeds of disease, or whatever – but from the distinctive historical, social and cultural configurations of the English way of life. Abandoning the 'simplicity of uncorrupted *Nature*', England (so Cheyne saw it) was fast becoming one of

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the richest, most highly civilized, quickest developing nations in Europe. But success in socio-economic achievement – opulence, sophistication, intellectual *éclat*, a glittering, competitive *beau monde* – sapped the nation's health. High living in High Society took its toll in lowness of spirits, indeed, in the gamut of nervous disorders.<sup>67</sup>

In a further sense, such maladies could not be 'natural'. Disease was the mother of 'Misery, Pain and Torture'; but such suffering could not have been part of God's original design.<sup>68</sup> Hence 'none but Men themselves' could have brought about this plethora of nervous disorders.<sup>69</sup> How then had the empire of disease arisen? Cheyne tackled the paradox of why the progress of civilization also proved the progress of sickness, by offering a bird's-eye history of the human race as (in health terms at least) a decline and fall from rude strength to sickliness.<sup>70</sup> 'When Mankind was simple, plain, honest, and frugal, there were few or no diseases', he insisted, for '*Temperance, Exercise, Hunting, Labour, and Industry* kept the Juicies sweet, and the Solids brac'd.'<sup>71</sup> This was, of course, a commonplace endlessly reiterated by moralists decrying 'corruption' from Hesiod and Plutarch through to Enlightenment celebrants of the noble savage – most famously, Rousseau, a generation after Cheyne. No originality was claimed by Cheyne for his insight:<sup>72</sup>

whoever is acquainted with the *History* of the *Origin of Nations*, and the Manner in which they liv'd, preserv'd themselves in Health, and got rid of their Diseases, while they liv'd in their Simplicity, and had not yet grown luxurious, rich and wanton, or had frequent Commerce with other Nations, and communicated with them in their *Luxury* and *Arts*, will be pretty well satisfy'd of this Truth.

Classical Antiquity itself enshrined the paradox of civilization. On the one hand, the Greeks and Romans deserved praise for having cultivated gymnastics and other healthy exercises to keep the blood and juices flowing. Yet they had needed to do this, precisely because their own urban way of living, their life of the mind, was so much more effete than that of their hardy predecessors. And here, Cheyne cleverly stood upon its head the customary praise of the Egyptians and Greeks as the fathers of medicine. Their precursors

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had not been more ignorant, but rather less corrupt. Primitive people had been so healthy as to have had no need of medicine. The Greeks had been driven to invent medicine precisely because they were the first to have brought diseases down upon themselves. Civilization was the cradle of disease:<sup>73</sup>

The *Egyptians*, as they seem to have been the first who cultivated the Arts of Ingenuity and Politeness, so they seem likewise to have been the first who brought *Physick* to any tolerable Degree of Perfection. The ancient *Greeks*, while they lived in their Simplicity and Virtue were Healthy, Strong and Valiant: But afterwards, in Proportion as they advanced in Learning, and the Knowledge of the Sciences, and distinguished themselves from other Nations by their Politeness and Refinement they sunk into *Effeminacy*, *Luxury*, and *Diseases*, and began to study *Physick*, to remedy those Evils which their Luxury and Laziness had brought upon them.

Thereafter further enrichments of material life down the centuries had merely created further health risks. The expansion of Europe through the opening up of the Old and New Worlds, Cheyne argued, had endangered a maritime nation such as Britain, intent upon plundering the globe for ever more exotic trophies for the table – sauces, exotic spices, French cuisine, eastern pickles.<sup>74</sup> The result was an overripe civilization. According to Cheyne, things had changed:<sup>75</sup>

Since our Wealth has increas'd, and our Navigation has been extended, we have ransack'd all the Parts of the *Globe* to bring together its whole Stock of Materials for *Riot*, *Luxury*, and to provoke *Excess*. . . . Invention is rack'd, to furnish the Materials of our Food the most Delicate and Savoury possible.

The consequences were obvious.

Thus Cheyne explicated the 'English malady' in terms of a historical sociology which showed how civilization begat satiety, which in turn begat sickness. On the grid leading from rudeness to refinement, rudeness meant rude health, refinement meant delicacy. But Cheyne also invoked a further grid, that of the social hierarchy. Rustics and manual workers – his 'No thinkers' – were, in respect of health, the contemporary equivalents of primitive savages. Their

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natural endowment and their occupations were jointly responsible for making them physically-fit empty-heads. 'Fools, weak or stupid Persons, heavy and dull Souls, are seldom much troubled with Vapours or Lowness of Spirits.'<sup>76</sup> Such people enjoyed rude health, escaping the supersensibility which left others prey to a plethora of pains.

By contrast, those at the apex of the social pyramid had commonly sacrificed physique and fitness to the calls of business, pleasure, ease or fashion. Blessed, or cursed, with acute feelings and hyper-active minds, their tremulous consciousnesses were ready prey to sickness. Such highly-strung people had trapped themselves within a vicious circle. For 'Anxiety and Concern'<sup>77</sup> over business and health led them to seek diversion in dissipation – 'Assemblies, Musick Meetings, Plays, Cards, and Dice',<sup>78</sup> – which served only to heighten their health problems. In short, the irony (or cosmic justice) was that those enjoying the greatest social success were also marked out to suffer. 'Nervous disorders', stated Cheyne bluntly, 'are the Diseases of the Wealthy, the Voluptuous and the Lazy' – and were like to prove lethal in the absence of rectifying temperance and abstinence.<sup>79</sup> Indeed, 'of late Years', nervous diseases were multiplying as a result of 'Luxury and Laziness'.<sup>80</sup>

Cheyne's contention that there was an English disease – a disease of civilization – was not wholly new, but it formed a crisp reformulation of an idea already in the air. In the *Spectator*, Addison and Steele had been making considerable play of the notoriety the nation had acquired on the Continent for its spleen, vapours, lowness of spirits, and, indeed, its propensity for suicide. Alluding to the 'daily Encrease of wanton and uncommon Self-murderers',<sup>81</sup> Cheyne admitted 'the Frequency of Self-murders here, in England especially, beyond any other Country':<sup>82</sup>

For few have *Grace* and *Resignation* enough, to suffer patiently the lasting Pains of a *chronical* Distemper, or the yet more *torturing* and *crucifying Anguish* of a perpetual *Dispiritedness*; though I have observed generally, That all *Self-murderers* are *distracted* and distemper'd in their *intellectual* Faculties.

Such an image of the mad or melancholy English, which seems to go back at least as far as *Hamlet*, was frequently embroidered through

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the Enlightenment (the English could not handle their much-vaunted liberty, argued foreign commentators, with more than a pinch of *Schadenfreude*). Cheyne acknowledged this diagnostic undercurrent.<sup>83</sup>

The Title *I have chosen for this Treatise, is a Reproach universally thrown on this Island by Foreigners, and all our Neighbours on the Continent, by whom nervous Distempers, Spleen, Vapours, and Lowness of Spirits, are in Derision, called the ENGLISH MALADY. And I wish there were not so good grounds for this Reflection.*

But Cheyne's tone – and here he surely tried to strike a chord with the mood of his audience – was more complex than that, wherein lies the originality of his formulation. For, while deprecating the disorder, he was evidently also buttering up the nation which produced it:<sup>84</sup>

*The Moisture of our Air, the Variableness of our Weather, (from our Situation amidst the Ocean) the Rankness and Fertility of our Soil, the Richness and Heaviness of our Food, the Wealth and Abundance of the Inhabitants (from their universal Trade) the Inactivity and Sedentary Occupations of the better Sort (amongst whom this Evil mostly rages) and the Humour of living in great, populous and consequently unhealthy Towns, have brought forth a Class and Set of Distempers, with atrocious and frightful Symptoms, scarce known to our Ancestors, and never rising to such fatal Heights, nor afflicting such Numbers in any other known Nation. These nervous Disorders being computed to make almost one third of the Complaints of the People of Condition in England.*

Obviously, thus ran Cheyne's drift, all such disease symptoms should also be read as symptomatic of something else: an economic and social success story of which the English could justly be proud. Unlike many 'civic humanists', Cheyne never sought to use the critique of over-sophistication implicit in his formulation of the 'English malady' as a stalking-horse for social or political reform.

He frequently, of course, played the medical moralist, noting how these disorders 'happen only to the *Rich*, the *Lazy*, the *Luxurious*, and the *Unactive*', whereas the 'Frugal, Industrious and

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the Temperate, the Laborious, and the Active' are disease-free; hence 'these monstrous and extreme *Tortures*, are entirely the Growth of our own Madness and Folly, and the Product of our own wretched Inventions.'<sup>85</sup> Yet he was no political primitivist, no railing reformer, no Jacobite, no Rousseauvian *avant la lettre*. Indeed, he leapt to defend himself against critics who, he said, had contended that '*I was turn'd mere Enthusiast, and ... advis'd People to turn Monks, to run into Deserts, and to live on Roots, Herbs and wild Fruits; in fine, that I was at Bottom a mere Leveller, and for destroying Order, Ranks and Property.*'<sup>86</sup> Far from it. Cheyne asserted that he did not see the progress of civilization as an evil, but only its abuses. Indeed, he held up for emulation the lifestyle of the '*middling Rank*', whose activities and diet were best suited to the climate and conditions of England.<sup>87</sup> Nor did he accept that diseases of civilization were *inevitable*: sensible regime would prevent or diminish them. Thus Cheyne hoped to civilize aristocratic consumption habits, to become the Chesterfield of the table. The poor would be healthy through work; the rich would work at being healthy.<sup>88</sup>

This points to a further important twist to Cheyne's tale. For he was not the originator of the idea of a uniquely English malady. Such had been a fairly common notion in the years after the Restoration. Above all, Gideon Harvey, that fascinating, cavilling, unconventional late Stuart practitioner who straddles orthodox and quack medicine, had spoken almost in those very terms. But what he had identified as the 'English' malady was consumption, and what he labelled the 'London' disease was scurvy.<sup>89</sup>

Both of these for Harvey were disorders of wasting and progressive weakness.<sup>90</sup> Harvey's term 'scurvy' certainly included what we know as the classic mariners' disease, a malady marked by weakness, swollen gums, loosened teeth, stinking breath, inability to swallow, a tendency to bleed, skin disorders, including purple blotches, and so forth. But he also intended something wider: a *pot pourri* of symptoms involving general malaise, weight loss, wasting flesh, poor skin tone, the non-healing of ulcers and abrasions, and a general 'rotteness' of health – all of which were deemed symptomatic of a 'scurbutic constitution'.<sup>91</sup>

Many doctors towards the close of the seventeenth century were impressed – or rather appalled – by the prevalence of such a

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congeries of symptoms. Indeed, 'scurvy' was the disease which quack doctors were perhaps most avidly claiming to cure.<sup>92</sup> Classic scurvy was, very probably, highly visible in London, by then, after all, the world's greatest seafaring port. It is further likely that cases of venereal disease, partially treated with mercury, were showing up as scorbutical – just as consumption (tuberculosis) and other 'scrofulous' conditions were almost certainly growing more common amongst the metropolitan poor, showing symptoms would have been associated with scurvy. Cheyne himself acknowledged the prevalence of such glandular conditions, noting 'that no deep and eminent Degree of nervous Disorders happens to young Persons, but from a manifest or latent scrophulous or scorbutick Taint'.<sup>93</sup>

What kind of symbolic representations would have been conjured up if 'consumption', 'scurvy' or 'scrofula' had become embossed upon the nation's imagination as the 'English malady'?<sup>94</sup> They could hardly have been flattering. For these were diseases widely associated with poverty and the riff-raff, with dirt, bad air, and with wretched standards of life; they seemed to hint at venereal disorders; and they denoted nothing intriguing, nothing radiating a *frisson*.

Cheyne's coup, by contrast, lay in reorienting the notion of an English malady to a sociology of success, abundance, and (over)-consumption; to a physiological site – the nerves – which, being internal and hidden from the eye, sidestepped the physically disgusting features and the shameful implications of scorbutic, glandular or venereal disease; and to clusters of symptoms – the state of the spirits – which were intrinsically fascinating to the sufferers themselves. *The English Malady*, in Cheyne's astute formulation, became a socially acceptable disorder – even (remember Johnson's warning to Boswell) one that was socially *eligible*. A possible parallel might be the up-market status of neurosis ever since Freud.

## Mental disorder

Cheyne never suggested that diseases which were nervous were therefore trivial. Quite the opposite:<sup>95</sup>

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of all the Miseries that afflict Human Life, and relate principally to the Body, in this Valley of Tears, I think, *Nervous Disorders*, in their extrem and last Degrees, are the most deplorable, and, beyond all comparison, the worst.

Nervous complaints were not just distempers, but 'Miseries'. Sufferers would be crucified by 'a constant, internal Anxiety', undergoing the experiences of 'sinking, suffocating, and strangling'. Indeed, such disorders were the least bearable of all, for regular physical maladies could at least be endured by dint of resolution, but once one's equanimity had given way, what resources were left for coping with pain? 'The Spirit of a Man can bear his Infirmities, but a wounded Spirit who can bear?' said a Prophet', so runs the opening sentence of his first chapter.<sup>96</sup> 'Fellow-Sufferers' should take heed, Cheyne admonished, wise through the 'Experience I have so dearly bought'.<sup>97</sup>

Cheyne thus demarcated a body of diseases of civilization as particularly excruciating. But did he actually think of those distempers comprising the English malady as *mental* diseases?

He certainly had no doubts about isolating the mental and intellectual facets of modern life which characteristically triggered such nervous conditions.<sup>98</sup>

Now since this present Age has made Efforts to go beyond former Times, in all the Arts of *Ingenuity, Invention, Study, Learning*, and all the contemplative and sedentary Professions (I speak only here of our own Nation, our own Times, and of the better Sort, whose chief Employments and Studies these are) the Organs of these Faculties being thereby worn and spoil'd, must affect and deaden the whole *System*, and lay a Foundation for the Diseases of Lowness and Weakness.

Intellectual stress and emotional fatigue thus weakened the nerves – not least because the nerves, stomach, and brain were so intimately braided.<sup>99</sup> Cheyne rang the changes on the old idea – recently restated by Dryden – of genius being akin to madness, by noting that '*Great Wits* are generally great *Epicures*, at least, Men of *Taste*'.<sup>100</sup> If intellectual invention hinged upon gastronomic stimulus, no wonder the nerves became damaged, or even deranged.

Moreover, being chronic and systemic, nervous disorders

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necessarily gave rise to enduring agonies which were 'dispiriting and painful'. Physical and mental malaise thereby proved mutually reinforcing. Nervous obstructions would cause pain, which the heated imagination would in turn amplify and further somatize, producing such new symptoms as constrictions of the throat, palpitations, choking, flatus, etc.; these would then provide fresh grist for the anxious mind. The experiences of ceaseless pain meant that, for many, 'Life becomes an useless Burthen'.<sup>101</sup>

Cheyne was sensitive to what we might call psychological symptoms, analysing them at length. In many of the case-histories forming the final section of his book, he drew attention to the traumas of patients suffering from misery, depression, *taedium vitae*, aversion to activity, feelings of horror, trepidation, and so forth, as well as detailing such physical disorders as convulsions, paralysis, etc.<sup>102</sup> One woman experienced a 'hysterick lowness'; another had 'frequent hysterick fits';<sup>103</sup> others suffered from 'fix'd Melancholy, Terror and Dread';<sup>104</sup> a further was 'weary of life'.<sup>105</sup> One wretched patient presented such a florid oscillation of moods and behaviour that 'ignorant people thought it witchcraft and enchantment'.<sup>106</sup>

Yet he was emphatic that the root of all these conditions lay, ontologically, within the body itself. As is perhaps indicated by the sub-title of his late work, the *Natural Method of Cureing the Diseases of the Body, and the Disorders of the Mind Depending on the Body*, Cheyne was not disposed to the view that psychological diseases independently existed in their own right; agonies of mind were expressions, rather, of more basic physical sickness. There was no disturbance of consciousness without a prior somatic disorder. To be precise, a continuum of such unusual and uncontrolled behavioural manifestations existed, ranging from everyday 'Yawning and Stretching up to a mortal Fit of an Apoplexy', all of which were due to 'a Relaxation and the Want of a sufficient Force and Elasticity in the Solids in general and the Nerves in particular'.<sup>107</sup>

Thus the 'Proteus-like distemper'<sup>108</sup> covered in Chapter Eight, 'Of the Spleen, Vapours, Lowness of Spirits, Hysterical or Hypochondriacal Disorders'<sup>109</sup> showed itself symptomatically in a state of mind (lowness and heaviness of spirits) as well as in corporeal abnormalities (wind, gripings, pain in the stomach, bloatedness, cold sweats, headaches, yawning, stretching lethargy, watching,

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etc.). But ultimately it arose from weaknesses of the nerves, and 'glewy juices', and was best remedied by somatic means – lively circulation, free perspiration, and regular secretions.<sup>110</sup> Likewise, the 'vapours' were a syndrome stemming from sharp, viscid, acid juices.<sup>111</sup>

The more serious manifestations of nervous disorders – those involving erratic fits, paroxysms, and convulsions, and sometimes accompanied by incoherence of speech and raving – were mainly consequential upon excessive acrimony and irritation in the body; they often followed special physical strains, such as the onset of puberty, or puerperal fever. As such, they needed more active medication, including generous dosing with opiates.<sup>112</sup>

Still more deranging were disorders such as 'deep and fixed *Melancholy, wandering and delusory Images on the Brain, and Instability and Unsettledness*', commonly attended with horror, despair, vertigo, giddiness, joy, leaping, dancing, hypochondriacal and hysterical fits, fainting, etc.<sup>113</sup> All were typically provoked by serious obstructions in the vessels, and could readily lead to paralysis, apoplexy, epilepsy, or even lunacy proper. Cheyne notes, however, that it would be inappropriate for him to devote space to lunacy as such, for:<sup>114</sup>

designing this principally for common intelligent Readers, and those who suffer under *Nervous Distempers*, tho' not regularly bred to the Practice of *Physick*: and people under those mentioned Distempers being incapable of Reading ... and these Disorders being the Province of particular *Physicians*, or those appointed by the Publick for that Purpose, I shall here put a *Period* to this Part of the Treatise.

Nevertheless, in cases of lunacy, 'the Methods here laid down' for handling diseases such as epilepsy 'are sufficient, and the most effectual for these Distempers'. Above all, he recommended an ultra-spare diet, usually milk alone. Cheyne gives no indication of believing that the spectrum of conditions, ranging from the vapours to lunacy proper, were psychogenic, or that it was the job of medicine to devise something akin to what would later be called 'moral therapy' (psychological management or mental medicine) to treat them.<sup>115</sup>

In short, the 'English malady' was not a primary affliction of the

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understanding, feelings or soul. This should not surprise us. For one thing, within the iatro-mechanistic tradition which he extolled, it was paradigmatic that medical events were to be sufficiently explained in terms of body mechanisms. Mental symptoms were, of course, real, but they were essentially responses to somatic occurrences (rather as the sound of ringing was real, but was the consequence of a bell being struck by a clapper). For Cheyne this was simple common sense:<sup>116</sup> 'the Works of *Imagination* and *Memory*, of *Study*, *Thinking*, and *Reflecting* ... must necessarily require bodily Organs.' Hence, he suggests, you can no more require men to be cheery who have infirm bodies than expect them to 'fly without Wings, or walk without Legs'.<sup>117</sup> Nicholas Robinson, a physician who was Cheyne's contemporary and no less ardent a Newtonian, put it in a nutshell: 'Every Change of the Mind, therefore, indicates a Change in the bodily Organs.'<sup>118</sup> In his grammatical medical materialism, Cheyne was a child of his time.

If science required that disease needed to be mapped onto the body in order to be intelligible, Cheyne's religious faith reaffirmed this point, from its own distinct, but complementary, perspective. In the Newtonian fashion, Cheyne adopted a dualistic ontology of matter and spirit, which elevated the immortal soul as an immaterial entity soaring free of the body. By consequence, Cheyne would doubtless have felt scandalized by the suggestion that, in the event of bouts of spleen, hysteria, or melancholy, the peculiar fits and fancies of the mind signalled a sickness of the divine soul: far safer to blame such troubles upon coagulated fluids.

Of course, it was precisely from that kind of terrifying possibility – the pathology of the soul, so destructive of a Christian's prospects of life eternal – that Anglican thinkers of Cheyne's generation were seeking to find intellectually cogent escape routes. Early Stuart thinkers such as Robert Burton and Richard Napier believed that mental derangement was commonly an infection of the soul – indeed, a manifestation of diabolical possession.<sup>119</sup> But, after the Restoration, members of the enlightened elite, in whose lineage Cheyne would doubtless have set himself, no longer wished to have any truck with such views, which they condemned as theologically benighted (Satan did not possess such captivating powers), and, perhaps worse, as 'enthusiastic' in their socio-political tendency (we

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have already seen Cheyne decrying 'levelling').<sup>120</sup> Thus medicine and piety jointly steered Cheyne away from the idea that disturbances of thought and emotions could be autonomous. It is noteworthy that he nowhere takes up Locke's hypothesis that mental disorder may be seen essentially as a fault of the understanding itself, due to the (mis)association of ideas. Philosophically, Cheyne was a Platonist, not a Lockean. Wounded spirits were for doctors to treat or clergymen to console; he did not in the slightest anticipate the emergence of the psychiatrist.<sup>121</sup>

Cheyne was thus not disposed to think of primary mental disorder. Moreover, his *obiter dicta* imply that his patients, or their families, would have been equally resistant to diagnoses in such terms, because lunacy and insanity carried such appalling stigmas. It taxed diplomacy, he stresses, to find the right softening phrases when handling conditions of that type:<sup>122</sup>

*nervous Distempers especially, are under some Kind of Disgrace and Imputation, in the Opinion of the Vulgar and Unlearned; they pass among the Multitude, for a lower Degree of Lunacy, and the first Step towards a distemper'd Brain; and the best Construction is Whim, Ill-Humour, Peevishness or Particularity; and in the Sex, Daintiness, Fantasticalness, or Coquetry.*

The tensions which such diagnostic ambivalences created challenged bedside tact to the limits:<sup>123</sup>

Often when I have been consulted in a Case, before I was acquainted with the Character and Temper of the Patient, and found it to be what is commonly call'd Nervous, I have been in the utmost Difficulty, when desir'd to define or name the Distemper, for fear of affronting them or fixing a Reproach on a Family or person.

Cheyne himself was in no doubt that such a nervous condition 'is as much a bodily Distemper (as I have demonstrated) as the Smallpox or a Fever'.<sup>124</sup> Hence nervous diseases with mental manifestations required the same sorts of physic as other disorders. Amongst his favourite remedies were gentle vomits,<sup>125</sup> to purge phlegm and open obstructions; horseradish, ipecacuanha, rhubarb, and other purgatives; and the general attempt to rouse perspiration and

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circulation. Though mania itself needed lowering treatments, it was good strategy in those nervous disorders attended with deadness or numbness, spasms and cramps, to attempt to stimulate with astringent medicines.

Cheyne's approach to mental anguish and disordered emotions thus appears, at first sight, rather paradoxical. Precisely because he would not countenance the notion that such disturbances of the self as lowness of spirits, the horrors, and agitation were authentic diseases of the mind – they were rather caused by defective nerves – those very disorders could ironically assume a certain legitimacy, even an aura. It might be considered a badge of distinction to be seen to be suffering from the English malady, because it was, by definition, exclusively a top people's disease, and moreover was mercifully free of disgusting visual and distasteful cultural associations: the sufferer was not diabolically damned, nor was he likely to turn dangerous; nor was the English malady contagious. In all those senses, it proved a tailor-made 'fashionable disease', just what the doctor ordered.<sup>126</sup>

It might be tempting to suppose that the 'English malady' was merely Cheyne's otiose new name for classical 'melancholy',<sup>127</sup> a condition which, ever since Antiquity, had always been an alluring and fashionable, and associated with literary creativity and artistic genius. But more was involved than a mere semantic shift: Cheyne worked a reconceptualization as well. For the classic melancholic had traditionally been an outsider, a marginal man, a loner: a figure like Milton's *il penseroso* moody, malcontent, self-destructive, perhaps dangerous to society.<sup>128</sup> Cheyne, by contrast, transformed the troubled soul into one whose cross lay in being too gregarious, too ready to assimilate himself into the ever-demanding sociability of an age of politeness and civility. The Georgian hysteric or vaporish lady *à la Cheyne* did not forfeit social popularity. Nervous disorders thereby offered a particularly attractive version of the sick role, flinging the doors wide open to the grand century of hypochondria.<sup>129</sup>

### Cheyne's 'case'<sup>130</sup>

It is unnecessary here to retrace Cheyne's life, pointing out every bout and turn upon which he records his own nervous symptoms;

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there is no need to labour the obvious: that he, perhaps like Freud, saw himself as a *locus classicus* of the disorder he depicted, as also of the efficacy of the cures he touted. He often presents himself as a 'Valetudinarian' writing for his 'fellow-suffering Valetudinarians'.<sup>131</sup> Lester King has accused Cheyne of being a dogmatic exponent of rationalist medical theorizing, and neglecting experience; but Cheyne might have riposted by pointing to the fact that his book contains lengthy case histories of eighteen patients, to say nothing of a forty-five page medical autobiography. 'I have consulted', he boasted, 'nothing but my own Experience and Observation on my own crazy Carcase, and the Infirmities of others I have treated.'<sup>132</sup>

In looking back on his life (*'la maladie, c'est moi'*, he might have said), Cheyne does not present himself as a tormented soul, in the manner of such typical Puritan spiritual autobiographers as Bunyan and Baxter.<sup>133</sup> But he is candid about the horrors, traumas, and torments he had undergone, while in the throes of physical dissolution and, as he thought, facing imminent death. Even in its early stages, he often suffered 'Giddiness, Lowness, Anxiety, Terror', he tells us; he would later be seized 'with a vertiginous Paroxysm, so extremely frightful and terrible, as to approach near to a Fit of the Apoplexy, and I was forced in it to lay hold on the Posts of my Bed, for fear of tumbling out'. Finally 'I went about like a Malefactor condemn'd'. Later still, his 'complaints, common to Hyppish people, made Life a Burden to myself, and a Pain to my friends.' For long his lot was 'perpetual Sickness, *Reaching, Lowness, Watchfulness, Eructation, and Melancholy*'.<sup>134</sup>

Many previous writers upon melancholy – Burton and Timothie Rogers leap to mind – <sup>135</sup> had themselves been sufferers. Such authors appear to have thought that analyzing and communicating their tribulations would themselves prove therapeutic. Cheyne gives no indication of subscribing to this kind of 'writing cure'. Rather, religious meditations afforded him fortitude, and medicines strengthened his body (for instance, taking 'aloetick pills which always gave me great present Relief, in my Stomach, and consequently in my spirits').<sup>136</sup> Perhaps because of his temperament, perhaps because of the *moeurs* of his circle, perhaps because of his identity as authority-figure, he was not expansively introspective. Though his legitimation of the English malady may, ironically, have encouraged the self-indulgent confessional egoism of James Boswell and his

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ilk,<sup>137</sup> Cheyne himself deplored such vanity. 'I am heartily ashamed, and humbly beg Pardon of my polite and delicate readers (if any should deign to look into this low Tattle, contrary to my Intention)', he confessed, excusing his autobiographical excursus:<sup>138</sup>

I know how indecent and shocking Egotism is, and for an Author to make himself the Subject of his Words or Works, especially in so tedious and circumstantiated a *Detail*: But so various and contradictory have been the reports of, and the sneers on my *Regimen, Case and Sentiments*, that I thought thus much was due the Truth, and necessary for my own Vindication; and perhaps it may not be quite useless to some *low desponding valetudinary, over-grown Person*, whose Case may have some Resemblance to mine.

He assures us that he has '*pursu'd in my own Case the same Rules I have given to others, and have at present, I thank God, inward Peace, Health and Freedom of Spirits*'.<sup>139</sup>

### Legacy

Cheyne's life was a long, arduous, but ultimately successful struggle against obesity-related illness. He suspected his tendency to fatness was inherited: we may speculate upon deeper psychological causes.<sup>140</sup> His writings, however, treat his syndrome as a type case of those nervous disorders that he identified as symptomatic of the success society – indeed, the *excess* society. In other words, *The English Malady's* originality lay in setting intemperance within a socio-historico-cultural overview, somatizing a familiar socio-moral critique of luxury within an iatro-mechanics of nervous disorders, in such a way as to normalize depressive disorders: sufferers, Cheyne insisted, deserved sympathy not scathing satire. Many latter-day Cheynes, such as Sayer Walker and William Rowley, continued to pump out the same message, deploring the degeneracy of modern times, while attempting to support individual victims of the disorders of supersensibility.<sup>141</sup> As Dr Thomas Beddoes suggested at the close of the eighteenth century, with growing affluence, consumerism and the birth of the

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Romantic spirit, nervous disorders were growing far worse.<sup>142</sup> Eventually Thomas Trotter could note that:<sup>143</sup>

at the beginning of the nineteenth century, we do not hesitate to affirm that *nervous disorders* ... may be justly reckoned two thirds of the whole, with which civilized society is afflicted.

Why this deterioration? One crucial change had occurred since Cheyne's day. Disease, like fashion, had descended down the social order: 'we shall find, that nervous ailments are no longer confined to the better ranks in life, but rapidly extending to the poorer classes.'<sup>144</sup>

In particular, it was noted, such disorders had become the bane of women. In this respect, Cheyne's writings are fascinating but ambivalent. He did not see nervous disorders as rigidly gender-specific: as his case-studies show, men suffered no less than women. Yet nervous disorders were indeed associated with the fair sex, in that they were diseases of *effeminacy* – though of effeminate men as well as of women. Healthy nerves and muscles had masculine attributes: they were strong, hard, resilient; the weak nerves which were such danger sources were, by contrast, soft, languid, passive, or, in other words, feminine. As polite culture increasingly fabricated the image of the fashionable lady as frail, yielding and delicate, it is no wonder that nervous disorders such as the vapours and hysteria became increasingly their prerogative.<sup>145</sup>

Cheyne's formulations offered a bold way of reconceptualizing what we might call functional disorders. For one thing, despite his own religious leanings, his understanding of such conditions was utterly secular. In contrast to most seventeenth-century authors, for Cheyne, mental maladies were not due to praeternatural forces, emanating from Above or Below. Being natural, they were open to scientific investigation: we must avoid resolving 'every thing immediately into *Miracle, Witchcraft, Enchantment, or Omnipotence*', Cheyne insisted,<sup>146</sup> explaining in his Preface, '*I hope I have explain'd the Nature and Causes of Nervous Distempers (which have hitherto been reckon'd Witchcraft, Enchantment, Sorcery, and Possession, and have been the constant Resource of Ignorance.*'<sup>147</sup> For another, Cheyne steered clear of purely individual psychopathology, and instead posed and probed broader questions of

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civilization and its discontents. By insisting that the key to the troubled spirit lay in sociopathology, Cheyne established the agenda for what would eventually become psychiatric epidemiology.<sup>148</sup>

### Notes

1. G. Cheyne, *The English Malady: or, A Treatise of Nervous Diseases of all Kinds. With the Author's Own Case* (London: G. Strahan, 1733).
2. Quoted in Roy Porter and Dorothy Porter, *In Sickness and in Health. The British Experience, 1650–1850* (London: Fourth Estate, 1988), p. 38.
3. G. Cheyne, *An Essay of Health and Long Life* (London: George Strahan, 1724).
4. Cheyne was, for example, attacked in print by Edward Strother in *An Essay on Sickness and Health in which Dr Cheyne's Mistaken Opinions in his late Essay are ... taken Notice of* (London, 1725).
5. *Professional Anecdotes or Ana of Medical Literature*, 3 vols (London: Knight and Lacey, 1825), I, pp. 153–5.
6. *ibid.*
7. Quoted in D. A. Ponsonby, *Call a Dog Hervey* (London: Hutchinson, 1949), p. 48.
8. *ibid.*
9. On this see C. A. Moore, 'The English Malady', in *Backgrounds of English Literature 1700–1760* (Minneapolis: University of Minnesota Press, 1953), pp. 179–235; O. Doughty, 'The English Malady of the Eighteenth Century', *The Review of English Studies* 2 (1926): 257–69; J. F. Sena, 'The English Malady: The Idea of Melancholy from 1700 to 1760' (Princeton University PhD Thesis, 1967). For general contemporary praise of Cheyne, see the poem printed in the *Gentleman's Magazine* 3 (1733): 205.
10. P. Bourdieu, *Distinction. A Social Critique of the Judgement of Taste* (Cambridge, Mass.: Harvard University Press, 1984).
11. R. W. Chapman (ed.), *The Letters of Samuel Johnson*, 3 vols (Oxford: Clarendon Press, 1984), II, p. 245; cf. M. Bailey (ed.), *Boswell's Column* (London: William Kimber, 1951).
12. For such advice in general see Roy Porter and Dorothy Porter, *In Sickness and in Health. The British Experience, 1650–1850* (London: Fourth Estate, 1988), ch. ii.
13. Cheyne, *Essay of Health and Long Life*, p. 182; and for context see Dorothy Porter and Roy Porter, *Patient's Progress. Doctors and*

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*Doctoring in Eighteenth-Century England* (Cambridge: Polity Press, 1989), p. 133.

14. Cheyne, *Essay of Health and Long Life*, p. 182.
15. *ibid.*, p. 2.
16. *ibid.*
17. *ibid.*
18. *ibid.*
19. Compare Johanna Geyer-Kordesch, 'Cultural Habits of Illness: The Enlightened and the Pious in Eighteenth-Century Germany', in Roy Porter (ed.), *Patients and Practitioners* (Cambridge: Cambridge University Press, 1985), pp. 177–204.
20. The following account of Cheyne's life derives chiefly from: W. A. Greenhill, *Life of George Cheyne, M.D., with Extracts from his Works and Correspondence* (Oxford: 1846); T. McCrae, 'George Cheyne, an old London and Bath Physician (1671–1743)', *Johns Hopkins Hospital Bulletin* 15 (1904): 84–94; W. R. Riddell, 'Dr George Cheyne and the "English Malady"', *Annals of Medical History* 4 (1922): 404–310; R. S. Siddall, 'George Cheyne MD, Eighteenth Century Clinician and Medical Author', *Annals of Medical History* 4 (1942): 95–109; H. R. Viets, 'George Cheyne, 1673–1743' (Fielding H. Garrison Lecture), *Bulletin of the History of Medicine* 23 (1949): 435–452.
21. G. Cheyne, *Fluxionum Methodus Inversa; sive Quantitatum Fluentium Leges Generaliores. Ad Celeberrimum Virum, Archibaldum Pitcairnum, Medicum Edinburgensem* (Londoni: J. Matthews, R. Smith, 1703); R. Schofield, *Mechanism and Materialism: British Natural Philosophy in an Age of Reason* (Princeton, 1970), p. 59.
22. G. Bowles, 'Physical, Human and Divine Attraction in the Life and Thought of George Cheyne', *Annals of Science*, XXXXI (1974): 473–488; H. Metzger, *Attraction Universelle et Religion Naturelle chez quelques Commentateurs Anglais de Newton* (Paris, 1938), pp. 139–153; A. Guerrini, 'Isaac Newton, George Cheyne, and the "Principia Medicinæ"', in Andrew Wear and Roger French (eds), *The Medical Revolution of the Seventeenth Century* (Cambridge: Cambridge University Press, 1989). Dr Guerrini is currently writing a life of Cheyne.
23. For this and the following quotations see 'The Case of the Author' in G. Cheyne, *The English Malady*, pp. 325–70.
24. *ibid.*, p. 326.
25. *ibid.*, p. 326.
26. *ibid.*, p. 328.
27. *ibid.*, p. 330.
28. *ibid.*, p. 335.

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29. *ibid.*, p. 342.
30. *ibid.*, p. 347.
31. G. Cheyne, *Observations Concerning the Nature and Due Method of Treating the Gout ... together with an Account of the Nature and Qualities of the Bath Waters* (London: G. Strahan, 1720).
32. G. Cheyne, *An Essay on Regimen. Together with Five Discourses, Medical, Moral, and Philosophical: Serving to Illustrate the Principles and Theory of Philosophical Medicine, and Point Out some of its Moral Consequences* (London: E. Rivington, 1740).
33. G. Cheyne, *The Natural Method of Curing the Diseases of the Body, and the Disorders of the Mind depending on the Body* (London: Geo. Strahan, J. & P. Knapton, 1742).
34. C. F. Mullett (ed.), *The Letters of Dr George Cheyne to the Countess of Huntingdon* (San Marino, 1940); C. F. Mullett (ed.), *The Letters of Doctor George Cheyne to Samuel Richardson (1733–1743)* (Columbia: University of Missouri, 1943).
35. Far the best analysis of Cheyne's religious faith is G. S. Rousseau, 'Mysticism and Millennialism: "Immortal Dr Cheyne"', in R. H. Popkin (ed.), *Millenarianism and Messianism in English Literature and Thought 1650–1800* (Leiden, E. J. Brill, 1988), pp. 81–126. Rousseau argues that Cheyne was a chiliast; the evidence for this is not, however, clear-cut, though see Cheyne's discussion in his *Essay on Regimen*, p. 119f. It is worth stressing that *The English Malady* is, perhaps, Cheyne's most secular book. Other works, for instance the *Natural Method of Cureing*, give much greater prominence to the vision of man as trapped in a mundane prison of clay.
36. George Sherburn (ed.), *The Correspondence of Alexander Pope*, 5 vols (Oxford: Oxford University Press, 1956), IV, p. 208.
37. Lester S. King, 'George Cheyne: Mirror of Eighteenth-Century Medicine', *Bulletin of the History of Medicine*, 48 (1974): 517–539.
38. Cheyne, *English Malady*, p. 85.
39. *ibid.*, p. 89.
40. *ibid.*, p. 4.
41. *ibid.*, p. 98.
42. *ibid.*, p. 101.
43. *ibid.*, p. 5.
44. *ibid.*, p. 1.
45. *ibid.*, p. 104.
46. *ibid.*, p. 105.
47. *ibid.*, p. 184.
48. *ibid.*, p. 184.
49. *ibid.*, p. 226.