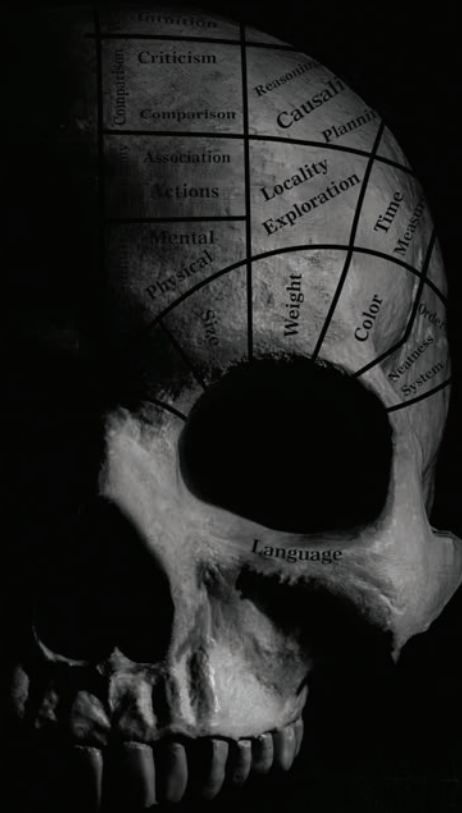


PETER LANG

# Edgar Allan Poe



AMATEUR PSYCHOLOGIST

BRETT ZIMMERMAN

*Edgar Allan Poe: Amateur Psychologist* is the “first and foremost” major source of information dedicated to the theme of Poe and psychopathology. Its introduction, conclusion, chapters, and appendices highlight and employ the best insights from earlier and current scholars, but this text goes beyond them in its analysis of Poe’s relation to mainstream psychology and its rival system, phrenology. His knowledge of this subject matter is far broader and deeper than Poe specialists have hitherto supposed; his method—contrary to the “Poe myth” according to which an alcoholic, drug-addicted, tormented artist wrote to exorcise his own pathologies—was to research mental illnesses for the sake of scientific precision and verisimilitude. We also come to appreciate the interrelatedness of the psychopathologies he illustrates and other “knowledge frames,” characteristic themes, featured in his tales, such as the occult, symbology, chromatography, the “cult of sensibility,” Neoplatonism, and Transcendentalist epistemology. While locating Poe firmly within the science and pseudoscience of his time, *Edgar Allan Poe: Amateur Psychologist* simultaneously looks back from the 1830s and 40s (when Poe’s literary career was at its height) to theories and possible sources of information from the late eighteenth century, as well as forward to the twentieth and twenty-first centuries to demonstrate how Poe’s theories of mind, and his depiction of psychological illnesses, occasionally anticipate modern insights and therapies. The book will be of interest not only to Poe scholars but also to students, teachers, and any intelligent reader interested in psychology, psychotherapy, and the history of ideas.

*“Edgar Allan Poe: Amateur Psychologist* provides fascinating insight into Poe’s knowledge of the incipient fields of psychology and psychotherapy, sparking his creation of unforgettable narrators. Charting Poe’s evolving responses to phrenology and examining his acquaintance with mid-nineteenth-century mainstream theories and treatments of derangement, from monomania to schizophrenia to phobias, Brett Zimmerman offers brilliant analyses of Poe’s most memorable tales. The text is a seminal work for assessing Poe’s reactions to ideas about mental illness circulating during his lifetime.”

—Dr. Lynne Shackelford, Professor of English, Furman University



**Brett Zimmerman** received his BA from the University of Toronto and his MA and PhD from York University. He is Associate Professor at York University in Toronto, Canada. He has published *Herman Melville: Stargazer* (1998) and *Edgar Allan Poe: Rhetoric and Style* (2005).

Edgar Allan Poe

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Brett Zimmerman

# Edgar Allan Poe

Amateur Psychologist



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For his devotion to Poe scholarship,  
for his praise of my own efforts in the field,  
and for his support of my career,  
this book is gratefully and warmly dedicated to  
BENJAMIN FRANKLIN FISHER  
(the IV)



The alarming increase of Insanity, as might naturally be expected, has incited many persons to an investigation of this disease. ...

*Crazy*, we have borrowed from the French *ecrasé*, crushed, broken: we still use the same meaning, and say that such a person is crack'd. Insane, deranged, or disarranged, melancholic, out of one's wits, lunatic, phrenetic, or as we have corrupted it, frantick, require no explanation. *Beside one's self* most probably originated from the belief of possession by a devil, or evil spirit.

The physiology of mind, I humbly conceive to be at present in its infancy. ...

—John Haslam, *Observations on Madness and Melancholy* (London 1809)

No other disease, probably, is increasing faster in our country than insanity, and from investigations recently made in several of the northern states, there is reason to fear that it already prevails here to a greater extent than in any other country.

—Amariah Brigham, *Observations on the Influence of Religion upon the Health and Physical Welfare of Mankind* (Boston 1835)

To determine exactly what mental impairment it is which is essential to insanity, metaphysicians and physiologists have long and anxiously labored with hardly the shadow of success.

—Isaac Ray, *Treatise on the Medical Jurisprudence of Insanity* (1838)



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According to the traditional African proverb, it takes a village to raise a child. It also takes a kind of village, comprised of dedicated and talented people, to produce a book. The author merely initiates the process, and I have been fortunate to enjoy the services and goodwill of my own village—not just the individuals mentioned above but also the scholars who agreed to endorse the book as it was being prepared for publication as well as the referees who provided encouragement and the motivation, when necessary, to up my game and improve upon earlier drafts of this project.

# INTRODUCTION

If in many of my productions terror has been the thesis, I maintain that terror is not of Germany, but of the soul—that I have deduced this terror only from its legitimate sources, and urged it only to its legitimate results. (1: 151)<sup>1</sup>

He was an adventurer into vaults and cellars and horrible underground passages of the human soul. (D. H. Lawrence, *Studies in Classic American Literature* 87–88)

One need not be a Chamber—to be Haunted—/ One need not be a House—/  
The Brain has Corridors—surpassing/ Material Place—. (Emily Dickinson, *Final Harvest* #670)

\* \* \*

Among Poe scholars, students, and general readers it is a truth universally acknowledged (to borrow a phrase from Jane Austen) that Poe portrays many characters desperately in need of psychotherapy and medication—or, according to early nineteenth-century therapeutic theory, opium, camphor, electricity, cold baths, warm baths, blood-letting, digitalis, mercury, purgatives, emetics, and a spin on the rotary couch. That he was knowledgeable about late

eighteenth-century and early nineteenth-century nosology (the classification of diseases) and treatments has been demonstrated admirably by several scholars on whose studies I build throughout the present work. I shall touch briefly upon their insightful essays and books here in the Introduction, which serves several functions. Part One discusses the central concept of this study, “insanity,” and defines the term as Poe and his contemporary psychologists would have. Part Two argues that Poe was an avid researcher when it came to the science of mind (and the pseudoscience of phrenology). I do not make a detailed case for that thesis in the Introduction because the book as a whole presents the argument. Part Three says something about the methodologies adopted for this book then discusses briefly those not adopted. Part Four is an overview of Poe’s utilization of phrenological and what I call “mainstream” theories of psychology and psychotherapy; it also comprises a justification for the organizational scheme I have settled on for *Edgar Allan Poe: Amateur Psychologist*. Part Five says something about the chapters that have already been published in journals and provides a justification for my decision to bring them together in book form. It also explains how I have lengthened and strengthened them for this project, and identifies the substantial amount of new material here.

\* \* \*

Before we proceed further, we should define our central term—or, rather, allow Poe’s coeval psychologists to define it for us. One of the earliest British scientists, John Haslam, who worked at the notorious Bethlem Hospital in London (“Bedlam”), is surprisingly unhelpful. In a book published in the year of Poe’s birth, Haslam seems to throw up his hands in despair when suggesting only a few pages into *Observations on Madness and Melancholy* that it is impossible to find “an infallible definition of madness” (5). He does suggest that insanity is currently divided into two forms, Mania and Melancholy, then discusses certain symptoms of madness: hallucinations and incoherent speech; this latter modern specialists call “cognitive slippage,” “word salad,” or “derailing.” Thus, he describes symptoms but refuses to define: “I have not abstained from giving a definition of madness without some reason,” he concludes (37).

Nearly thirty years later, another London psychologist, William Charles Ellis, tried to do better in his *Treatise on the Nature, Symptoms, Causes, and Treatment of Insanity, with Practical Observations on Lunatic Asylums* (1838). He does admit that many contradictory opinions have existed on the subject, given the “total ignorance of the nature of the mind” (12). For a while, he

says, madness was considered purely a mental disease requiring only “moral” remedies (psychiatric assistance free of any medical regimen). He tells his readers, however, that lately the doctrine of insanity being a bodily disease “seems again to prevail” (13)—that is, a sign of a diseased brain (or some other part of the anatomy). A few pages later, he attempts to define insanity by defining its opposite:

independently of cases of idiocy, imbecility, eccentricity, and moral evil [criminality] ... man is sane, when, as we have stated above, the manifestations of his mind, his sentiments, passions, and general conduct, continue either to improve or to keep in accordance with the exhibitions of his previous powers and habits. (16)

David Brion Davis, in *Homicide in Fiction, 1798–1860: A Study in Social Values*, reinforces this definition with a quotation from Isaac Ray’s *Treatise on the Medical Jurisprudence of Insanity*.<sup>2</sup> The unstated assumption, it would seem, is that there exists a standard of normalcy for the conduct of “man”—or, at least, that every healthy individual displays a standard of normal behavior. These are problematic premises in themselves. Davis writes about the search, therefore, for “an ‘Ideal Standard Man,’ for some point of reference by which the law could measure guilt” (79). At any rate, Ellis concludes that “insanity” consists of an alteration of, a departure from, an individual’s normal patterns of thought and behavior: “insanity is a disease of the brain, causing, or at least co-existing with, an injurious alteration in the intellectual manifestations, or in the conduct, or in both” (30). Here we have a foundational distinction between the intellectual and the moral faculties, a distinction important to our understanding of “moral insanity.” Ellis then admits that there are many degrees of insanity not all of which present a public danger or require the victim to be incarcerated. He makes the (to some, surprising) assertion that a man exhibiting delusional thinking or suffering from hallucinations need not be considered a danger to himself or to society; *but* “if the diseased perceptions be of such a kind as to render him incapable of the management of his affairs, or to make his conduct injurious either to himself or to others, confinement ought immediately to be resorted to” (34).

If *any* departure from normal domestic, social, and vocational behavior and expectations meant “insanity,” we can guess how often people were diagnosed as “lunatics.” In other words, we see from Ellis’ discussion that early psychologists entertained broad notions of “insanity”—that is, they had a loose definition that included much more than hallucinations, psychotic delusions, and incomprehensible ravings, all of which symptoms probably constitute the

popular notion of “madness” in our own day. Many of the cases discussed in the literature of the late eighteenth and early nineteenth centuries illustrate numerous symptoms of what we might consider mental illness, such as anxiety or clinical depression, but they applied the term *insanity* (and its variants such as *lunacy*), as we have seen, to any deviations from normal mental health and functioning. A look at the supposed physiological and “moral” causes of insanity in the textbooks and the *American Journal of Insanity* would convince us of how often cases of situational or clinical depression, for example, led people to the asylums; in our time we would not label them as insane, though. In light of this information, we can perhaps better understand what Poe meant when he wrote about Virginia Poe’s illness to George W. Eveleth: “I became insane, with long intervals of horrible sanity” (Ostrom *et al* 641). Even sleepwalking (somnambulism) was considered a sign of lunacy by Ellis’ definition; inebriation was thought to signal temporary insanity.

Finally, the American psychologist James Cowles Prichard offers a more precise definition in *A Treatise on Insanity and Other Disorders Affecting the Mind* (1837):

We may, then, describe insanity as a chronic disease, manifested by deviations from the healthy and natural state of the mind, such deviations consisting either in a *moral perversion*, or a disorder of the feelings, affections, and habits of the individual, or in *intellectual derangement*, which last is sometimes partial, namely, in *monomania*, affecting the understanding only in particular trains of thought; or general, and accompanied with excitement, namely, in *mania*, or *raving madness*; or, lastly, confounding or destroying the connections or associations of ideas, and producing a state of *incoherence*. (17)

Prichard shares with Ellis the notion, probably standard among their colleagues on both sides of the Atlantic, that “insanity” consists of a deviation “from the healthy and natural state of the mind”—again, begging the question of what a healthy state of mind *is*. (The phrenologists, by the way, would agree with this definition, citing hypertrophied or atrophied cranial faculties as the explanation for the deviation from the individual’s normalcy.) And again, Prichard shares with Ellis the concept of madness subdividing into two forms: “moral” and intellectual. I shall say more about “moral insanity” in Chapter Five; what Prichard calls “intellectual derangement” is further divided into subtypes: *monomania* (to which we shall return very often in our discussion of Poe’s obsessed narrators), *mania* (“raving madness”), and *incoherence* (in which “the connections of associations of ideas” are confused or destroyed).

Where do Poe's "insane" narrators fit into this scheme? Certainly Poe cannot portray protagonists suffering from "raving madness" or "incoherence" because then we would not be able to follow the narratives in terms of the grammar, syntax, and logic (see Chapter Five, note 9). Monomania certainly seems to be Poe's favorite sign of mental derangement, judging from the number of narrators suffering from morbid obsessions (see, for instance, "Berenice," "The Premature Burial," and "Ligeia"). Monomania, as we see from the discussion above, is a sign of intellectual derangement; but some argue for Poe's depiction of moral insanity in "The Tell-Tale Heart." We may have difficulty placing some of the symptoms exhibited by Poe's "lunatics" into the scheme Prichard has provided. The delusions of the inmates in "The System of Doctor Tarr and Professor Fether" would seem to fall under the category of intellectual derangement, as would the phobia of the tormented narrator in "The Premature Burial." Would we consider the "salvational melancholy" of the "Black Cat" narrator as a sign of intellectual derangement as well? What about the somnambulism of Egæus in "Berenice"? Perhaps we need not concern ourselves too much with pigeonholing into Prichard's nosological scheme the various mental illnesses of Poe's characters; perhaps it is enough to say that their behavior unquestionably departs from healthy normal functioning. (Poe's contemporaries would have instantly recognized the insanity of the narrator in "The Black Cat" when he admits,

my general temperament and character ... experienced a radical alteration for the worse. I grew, day by day, more moody, more irritable, more regardless of the feelings of others. ... My pets, of course, were made to feel the change in my disposition. I not only neglected, but ill-used them. (5: 144-45)

This man who had been so gentle with animals becomes a sociopath and misanthrope.) What is clear, and what *Edgar Allan Poe: Amateur Psychologist* demonstrates, is that the monomania, the hallucinations, the delusions, the phobias, the sleepwalking, the cataleptic trances, the lack of insight, the socio- or psychopathic behavior, the superstitiousness, the salvational despair—all (or almost all) of the mental, emotional, and behavioral symptoms of Poe's various narrators, homicidal or not, can be found in the literature available to Poe in the first half of the nineteenth century.

\* \* \*

Let us be more specific. Where did Poe obtain his knowledge of mental illness and the therapeutic handling of the insane? He may have learned a great deal

from his discussions with medical men, like his friend Joseph Evans Snodgrass, a Baltimore physician, or his own doctor, John Kearsley Mitchell, or Pliny Earle (a physician and psychiatrist who dealt with the insane at asylums in both Pennsylvania and Bloomingdale—see Ostrom *et al* 245–46, 818, in addition to Chapter Nine, note 9), but surely he gleaned information from literary sources as well. I. M. Walker is only one of several scholars—for example, Elizabeth C. Phillips, Allan Gardner Smith, Robert D. Jacobs—who insist that Poe was familiar with the works of the psychologists of his day:

With his passion for scientific fact and his interest in abnormal mental states, Poe would have been likely to turn to systems of contemporary psychology in the same way that modern writers have turned to Freud and Jung [and Lacan, the *Diagnostic and Statistical Manual of Mental Disorders*, and so many other contemporary sources]. Moreover, in Poe's day ... information regarding both mental and physical diseases was readily available to the intelligent layman, not only in the original works of the scientists, but also in popular journals and encyclopaedias. ("The 'Legitimate Sources' of Terror in 'The Fall of the House of Usher'" 588)

A specialized publication, the *American Journal of Insanity*, began appearing in July 1844. I draw upon this source, the first journal in English devoted to mental medicine, several times in the current project, and I mention and quote its founder, Amariah Brigham, often. As for books, Paige Matthey Bynum notes that "Between 1825 and 1838, the Philadelphia publishing house of Carey and Lea published almost twice as many medical books as those in any other category except fiction, and mental health was a staple concern in these works" ("'Observe How Healthily—How Calmly I Can Tell You the Whole Story': Moral Insanity and Edgar Allan Poe's 'The Tell-Tale Heart'" 150). In the bibliography to *The Analysis of Motives*, Smith lists many works on psychology that were extant in Poe's America.

In our time, the Da Capo Press has a series on "The Historical Foundations of Forensic Psychiatry and Psychology," which provides modern reprints of classic texts including Forbes Winslow's *The Plea of Insanity in Criminal Cases*, which entered the market in 1843. The Arno Press has made available several more of these classics including Bernard De Mandeville's *Treatise of the Hypochondriack and Hysterick Passions* (1711), Thomas Arnold's *Observations on the Nature, Kinds, Causes, and Prevention of Insanity* (1806), William Perfect's *Annals of Insanity* (1808), George Man Burrows' *Commentaries on the Causes, Forms, Symptoms and Treatment, Moral and Medical, of Insanity* (1828), Alexander Morrison's *Physiognomy of Mental Diseases* (1843), John

Thurnam's *Observations and Essays on the Statistics of Insanity* (1845), and Ellis' *Treatise*. Also of special concern to students of Poe's "System of Doctor Tarr and Professor Fether" (1845) are studies of asylums such as W. A. F. Browne's *What Asylums Were, Are, and Ought to Be* (1837) and Robert Gardiner Hill's *Total Abolition of Personal Restraint in the Treatment of the Insane* (1839). Translations from the French of texts by such noted practitioners as Jean-Étienne Dominique Esquirol were available as well; we can cite an 1845 translation of his *Mental Maladies. A Treatise on Insanity*, for example (published by Philadelphia's Lea and Blanchard); still, Poe's comprehension of French would have rendered him easily capable of reading any text in the original French: Esquirol's three-volume *Des Maladies Mentales* (1838) or Philippe Pinel's *Traité Médico-Philosophique Sur L'Aliénation Mentale* (1801, 1809), for example. In addition to these texts in English and French, Norman Dain lists dozens more, books and journals, in the bibliography to *Concepts of Insanity in the United States, 1789–1865*.

Can we believe Walker's suggestion that Poe would have consulted the many sources available—that he *did his homework* in order to acquire an amateur expertise in the theories and treatments of mental illness and to create psychological verisimilitude in his characters? We can believe it if we can credit Poe's own testimony as to his *modus operandi*. Consider a remark he makes in a letter (2 July 1844) to James Russell Lowell: "I scribble all day, and *read all night*" (Ostrom *et al* 256; my italics). Even better is a statement he makes in a letter (26 June 1849) to George Eveleth:

The essay you enclose, on the igneous liquidity of the Earth, embodies some truth, and evinces much sagacity—but no doubt ere this you have perceived that you have been groping in the dark as regards the general subject. *Before theorizing ourselves on such topics, it is always wisest to make ourselves acquainted with the actually ascertained facts & established doctrines.* (Ostrom *et al* 813; my italics)

This point is clearly made in the context of scientific studies and, although Poe's remark concerning his own work is made with regard to *Eureka*, we have no reason to suppose the methodology to which he refers is not equally applicable to tales so clinically precise as "The Tell-Tale Heart," "The Premature Burial," "Berenice," and, in a phrenological medium, "The Fall of the House of Usher" and "Ligeia." Phillips quotes Poe making a similar remark in the context of his review of a book on another scientific subject: "Those who wish to examine all sides of the question would do well to dip into some medical authority before forming an opinion on such topics" (108).

*Edgar Allan Poe: Amateur Psychologist* is only a source study in a general sense, however; nowhere do I boldly recommend this or that text as beyond doubt the work from which Poe derived his understanding of, say, somnambulism, monomania, schizophrenia, phobias, phrenology, the high place phenomenon, or the “moral treatment” of the insane. In the introduction to *The Analysis of Motives*, Smith sounds a similar sensible note regarding his own method, reminding readers that “Significant concepts of mind may be in common circulation before they are embodied in a text, and this is especially true in nineteenth-century America where so few of the theories originated at home” (iv). While not claiming status as an exact-source study, though, this project demonstrates just how profound and impressive Poe’s knowledge was when it came to mental illness and the therapeutic treatments in vogue—deeper and more remarkable than most Poe experts realize, I suspect. Furthermore, this demonstration is made here within the context of other “knowledge frames” available to Poe—not just the knowledge frames, such as the cult of sensibility (a holdover from the late eighteenth century), but also his characteristic themes and literary or philosophical concerns, such as Transcendentalist epistemology.<sup>3</sup>

\* \* \*

For the sake of explaining the methodologies I have and have not adopted for this study, I place the cross- or interdisciplinary approaches to Poe involving psychology, psychotherapy, and psychoanalysis into several categories. What we can call Category 1A consists of historicist readings of his prose that locate Poe within his *Zeitgeist* by demonstrating how he drew upon coeval scientific theories in order to create psychological verisimilitude in his characters. Notable contributors to this category include John E. Reilly, David E. E. Sloane, Allan Gardner Smith, Paige Matthey Bynum, John Cleman, and Susan Scheckel. “The System of Doctor Tarr and Professor Fether” is unusual because there Poe is exhibiting insanity but not in a first-person narrator, he is doing so within a satirical rather than a Gothic context, and he is concerned primarily with the *treatment* of the insane. One of the earliest and best articles on Poe’s relation to the “moral treatment” of the mentally deranged is William Whipple’s “Poe’s Two-edged Satiric Tale.” I rely upon all of these scholars whenever it is helpful to do so.

Category 1B features readings of his prose that attempt to locate Poe within his *Zeitgeist* by demonstrating how he drew upon the particular field

of phrenology in order to create psychological verisimilitude in his characters or to analyse the personalities of his fellow literati or their fictional characters. Some excellent studies in this category have been published by Edward Hungerford, Madeleine B. Stern, Donald B. Stauffer, and Eric Grayson. Book-length studies include material on Poe and the pseudoscience as well, such as *Edgar Allan Poe*, by Kevin J. Hayes (93–95, 152–53). Smith's *The Analysis of Motives* has several pages on phrenology (55–57, 159–61); to some extent he draws upon the discussion of phrenology and older faculty psychologies in Jacobs' *Poe: Journalist & Critic*. I draw upon these insightful articles and books whenever I can.

Category 2 is comprised of readings of Poe's tales that employ twentieth- and twenty-first-century insights into the human mind, such as are found in the *Diagnostic and Statistical Manual of Mental Disorders* (the DSM) and other contemporary texts, to illustrate how the apparently prescient Poe anticipates, through some of his unstable protagonists, modern findings in psychology and psychotherapy.<sup>4</sup> As indicated by its title, one instance of this methodology, an excellent exemplification of it, is found in "The Black Cat,' and Current Forensic Psychology" by Vicki Hester and Emily Segir, which I discuss in the first part of Chapter Six. A superb and more recent example is Lynne Piper Shackelford's "'Infected by Superstitions': *Folie à Deux* in 'The Fall of the House of Usher,'" in which she draws upon psychological literature from the nineteenth to the twenty-first century to demonstrate that the narrator exhibits the same delusions as an insane Roderick Usher, a "shared psychotic disorder" (110). Another example of this approach *here* is found in Chapter Eight on "The Imp of the Perverse" and what current researchers have called the "high place phenomenon," as well as in Chapter Seven, which diagnosis the long-suffering narrator according to findings in the latest editions of the DSM and other modern studies in the field. It may be, though, that the psychotherapeutic method of flooding (for example) can be found in some of Poe's sources and/or was "in the air"—the "intellectual ambiance to which he was, in part, responsive," to quote a splendid clause from Jacobs (33). In addition to magazines, newspapers, journals, the professional discourse of his scientific acquaintances, and numerous books on conventional psychology, phrenology, and the therapeutic treatments practiced in asylums (many of which sources are cited and quoted in this study), Poe also had at his disposal such classic late eighteenth-century texts as Benjamin Rush's *Medical Inquiries and Observations* (1789–93), Erasmus Darwin's *Zoonomia, or, the Laws of Organic Life* (1796), and the *Encyclopaedia; or, a Dictionary of Arts, Sciences,*

and *Miscellaneous Literature* (1798). As yet, however, I have discovered nothing in the literature that anticipates the controversial flooding technique of Thomas Stampfl, invented in 1967 (but see Chapter Seven, note 5). For the time, then, I must consider Poe as prescient, almost prophetic—Marek Paryz employs the wonderful phrase “anticipatory insight” (“The Ridiculed Reason” 98)—in his demonstration of how the taphephobic narrator of “The Premature Burial” emerges from his traumatic ordeal in a new and invigorated state of mental and physical health. Elsewhere in *Edgar Allan Poe: Amateur Psychologist*, I am able to combine the methodologies of Categories 1 and 2 in citing possible coeval sources that may have inspired Poe but also in relating his characters to findings in late twentieth- and twenty-first-century studies.

Category 3 consists of readings that attempt to psychoanalyze Poe himself. Readers of Poe’s works, and even his acquaintances, have been psychoanalyzing Poe since the mid-nineteenth century, as demonstrated by Philip Young’s “The Earlier Psychologists and Poe,” published in 1951, during the heyday of Freudian psychoanalysis in literature. However, Young does not attempt to demonstrate Poe’s relation to the nascent science of psychology in his time and place, as I am doing here; rather, he documents nineteenth- and early twentieth-century attempts to explain what was “wrong” with Poe as suggested by his known behavior and “bizarre” *oeuvre*. Most of these attempts are not by psychologists but by acquaintances of Poe or by later commentators, some of them scientists, some of them literary scholars. A few certainly were psychologists, such as Henry Maudsley, who published “Edgar Allan Poe” in an October 1860 number of the *American Journal of Insanity*. But I am not doing a character study or psychobiography here, so Young’s sensible and engaging essay does very little to inform *Edgar Allan Poe: Amateur Psychologist*. Young himself stops short with Freud: “It is our interest here to look over a selection of explanations of the earlier kind, leaving the psychoanalytic ventures for another day” (443).

It is hardly necessary to note the awareness on the part of scholars that the Freudian approach to literature, to Poe in particular, has generated a good deal of controversy. On the website for the Edgar Allan Poe Society of Baltimore, prefacing a good list of early articles psychoanalyzing Poe, we find these remarks under the heading “Poe and the Psychoanalysts”:

The temptation to seek through Poe’s works for signs of his personality and mental processes is apparently irresistible. Certainly a large number of Poe scholars and devotees have failed to resist it. Many, indeed, clearly reveled in it to a degree which encourages one to question the sanity of these self-same researchers. For some time

discredited (along with many of Freud's theories), the French school of literary criticism reawakened the approach, which still reigns strongly among a handful of scholars. It seems curious that these same scholars, who would be unlikely to confuse William Shakespeare for Richard III (*Richard III*) or Charles Dickens for Fagin (*Oliver Twist*), foolishly insist on mistaking Poe for Roderick Usher ("The Fall of the House of Usher") or any number of his anonymous narrators. Given the opportunity, Poe would perhaps say of his psychoanalysts what his character C. Auguste Dupin said in "The Murders in the Rue Morgue" of the French detective Vidocq: "He impaired his vision by holding the object too close. He might see, perhaps, one or two points with unusual clearness, but in so doing he, necessarily, lost sight of the matter as a whole."

While she was preceded by other literary psychoanalysts—for example, Lorine Pruette ("A Psycho-Analytical Study of Edgar Allan Poe" [1920]) and John W. Robertson (*Edgar A. Poe: A Psychopathic Study* [1923])—the most famous Freudian study was penned, of course, by Marie Bonaparte (1933), a student and close friend of Freud: in 1949 it was translated as *The Life and Works of Edgar Allan Poe: A Psycho-Analytic Interpretation*.

Scott Peeples considers her study "one of the great achievements of Poe scholarship" and praises her as "a close reader of the first order" (*Afterlife* 38), but not everyone has been so positive—as shown, for instance, by Roger Forclaz's "Psychoanalysis and Edgar Allan Poe: A Critique of the Bonaparte Thesis." Others have objected, including Floyd Stovall, who seems to have been thoroughly frustrated with the psychoanalytical dabbling of his fellow literary critics:

Some of [Poe's] poems and tales are difficult, but they can be understood without the help of twentieth century psychology or any greater learning than what can be found in the literature and the reference works to which he had access. I believe the critic should look within the poem or tale for its meaning, and that he should not, in any case, suspect the betrayal of the author's unconscious self until he has understood all that his conscious self has contributed. To affirm that a work of imagination is only a report of the unconscious is to degrade the creative artist to the level of an amanuensis. ("The Conscious Art of Edgar Allan Poe" 174)

Readers who are interested in a history of and commentary on twentieth-century psychoanalysis of Poe should consult Scott Peeples' lively, stimulating, and informative essay "A Dream Within a Dream: Poe and Psychoanalysis," which comprises the second chapter of *The Afterlife of Edgar Allan Poe*.

Growing out of and related to Category 3, but broader in scope, is Category 4 and includes not just Freudian but also Jungian, Lacanian, and other psychoanalytical approaches to literature. A modern Freudian study is Clive

Bloom's *Reading Poe, Reading Freud: The Romantic Imagination in Crisis*. Poe scholars are well familiar with *The Purloined Poe: Lacan, Derrida, and Psychoanalytic Readings*, edited by John P. Muller and William J. Richardson. A more general study is Jean-Michel Rabaté's *Cambridge Introduction to Literature and Psychoanalysis*; Poe scholars may be particularly interested in Chapter 5, "The literary phallus, from Poe to Gide." Another project, broad in scope, is *Literature and Psychoanalysis, The Question of Reading: Otherwise*, edited by Shoshana Felman; Poe specialists may be drawn there to Barbara Johnson's "The Frame of Reference: Poe, Lacan, Derrida," which also appears in *The Purloined Poe*. Shawn Rosenheim responds, in part, to Johnson in his essay "Detective Fiction, Psychoanalysis, and the Analytic Sublime," in Harold Bloom's *Edgar Allan Poe's "The Tell-Tale Heart" and Other Stories*. His essay appears in an earlier collection, *The American Face of Edgar Allan Poe*, which he edited with Stephen Rachman. Writing from the point of view of pedagogy, Diane Long Hoeveler contributed "Teaching 'The Purloined Letter' and Lacan's Seminar: Introducing Students to Psychoanalysis through Poe" to *Approaches to Teaching Poe's Prose and Poetry*, edited by Jeffrey Weinstock and Tony Magistrale. In the same school of thought is "Lacan, Poe and Narrative Repression," by Robert Con Davis. As for Jungian depth psychology, readers can consult, for instance, Valentine C. Hubbs's "The Struggle of the Wills in Poe's 'William Wilson'" and Stephen K. Hoffman's "Sailing into the Self: Jung, Poe, and 'MS. Found in a Bottle'."

With the critical methodologies represented by what I call Category 3 and Category 4, the current study has nothing to do. Let us be clear about that at the outset lest this particular apple be damned for not being an orange; lest this project be criticized for failing to be what it was never meant to be. *Edgar Allan Poe: Amateur Psychologist* adopts primarily an historicist methodology in placing Poe firmly within his *Zeitgeist* through an analysis of his relation to coeval theories of psychology, both mainstream and phrenological, as well as to the psychotherapeutic techniques beginning to be practiced in the asylums in America and Europe. Additionally, I practice a history-of-ideas approach by demonstrating the continuity between the therapeutic practices and psychological theories of his day and those of ours. As for the first, the "moral treatment," also known as the "soothing system," laid the foundation for the compassionate treatment of the mentally ill in our day; and readers of *Edgar Allan Poe: Amateur Psychologist* may be startled to learn that the same constellations of psychological infirmities considered in modern textbooks and categorized so patiently in *The Diagnostic and Statistical Manual of*

*Mental Disorders* were, for the most part, also known to Poe and his contemporaries. They typically employed different terms but they were encountering and describing people with many of the same mental illnesses covered in the *DSM*. Because he was so profoundly versed in mainstream and phrenological theory and the therapies both systems recommended, and because his characters display and dramatize such a wide variety of symptoms and eccentricities, I use Poe as a focal point to connect 200 years of psychological theory and psychotherapeutic practice. His tales both reflect the nosological grappling and the therapeutic stumbling and triumphs of his contemporaries and look forward to the nosological grappling, therapeutic stumbling and triumphs of late twentieth- and early twenty-first-century specialists. Those readers of Poe who have some knowledge of current psychological theory will experience a *shock of recognition* as they begin to fathom through this approach to some of Poe's most famous tales the continuity in the field—as when, for example, my students recognize in our discussion of “The Imp of the Perverse” (the passage beginning, “We stand upon the brink of a precipice”) that Poe is anticipating what researchers have recently dubbed the “high place phenomenon.” As for the psychoanalysis of Poe, to those scholars immersed in Jung, Freud, Lacan, and other theoreticians, I simply bow deferentially—and get out of their way.

\* \* \*

Three of the five categories, therefore, are subsumed into the present study, which focuses on the phrenological and what I call mainstream psychological systems. I think it worthwhile to distinguish between phrenology and mainstream or “conventional” theories because even in Poe's time phrenology was ridiculed by many “mental philosophers,” as early psychologists and nosologists were sometimes called. Indeed, in his 1836 review of L. Miles' *Phrenology, and the Moral Influence of Phrenology*, Poe begins on the defensive: “Phrenology is no longer to be laughed at” (8: 252). However, a few years later he seems to have become disenchanted by it; as Bynum suggests, “by the 1840s, his views were closer to the views of established medicine” (149 n2). Stauffer refers to Arthur Hobson Quinn's assumption that Poe “had simply lost interest in phrenology” but seems to find this assumption unsatisfactory (“Poe as Phrenologist: The Example of Monsieur Dupin” 113). While I shall save a deeper definition and exploration of this pseudoscience for later chapters, let us for now consider the initial publication dates of Poe's important prose works (fiction and nonfiction) in which phrenology figures, and those