Consumptive Disease: Beauty to Die For

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After waking from a fevered sweat to a single drop of blood on his bedsheets, a 25-year-old poet confided to his friend that he had received his death warrant. Renowned as one of England’s greatest poets, John Keats didn’t find consumption to be a surprise at all; he accepted it. He had, after all, encountered it all his life. At 14, Keats cared for his mother as she died of the disease. A few years following, his brother fell victim to and died of the same affliction. At the age of 23, Keats had experienced his own symptoms of consumption. While Keats never explicitly wrote about the disease, in his final months he feverishly wrote some of his greatest poems, many of which served as an implicit metaphor for the afflictions of consumption. John Keats died within months of spitting his first drop of blood, and the greatest year of his poetic endeavors were considered a direct result of his consumption.

In hindsight, the era of consumption had been riddled with haunting undertones. Referred to modernly as tuberculosis, the illness began to endemically sweep Europe and the United States as early as the 18th century. However, in the 19th and 20th centuries, the ravages of the widespread disease coincided with the culmination of the Romantic era, and it was at this time that the illness had earned its name: consumption. Attitudes were changing to suit a society with dispositions towards beauty, art, and poetry. Granted, this societal shift influenced perceptions of consumption itself. Afflictions, as far as prior or concurrent diseases went, were often denoted by quick, troubling, and hideous fates. Consumption had killed more than cholera and smallpox.
combined (Talairach 1), but within societal ideations consumption was a slow and poetic killer. Among 19th- and 20th-century Western culture, particularly women, consumption inspired a morbid imperative to appear unhealthy; it had become the prettiest way to die. This was due to the literature, medical beliefs, and shifting beauty ideals of the Romantic era.

Tuberculosis is an infection due to *Mycobacterium tuberculosis*, an illness which can occur in almost any organ, but one that primarily affects the lung. Mentions of chronic lung disease (most likely tuberculosis), date back to 2nd millennium BCE in legal texts written in cuneiform by Hammurabi. Hippocrates, around 400 BCE, described a disease – which he refers to as ‘phthisis’ – as a persistent fever, cough, and weakness in the lungs. Phthisis had been the most common name referral to tuberculosis prior to the popularity of the term ‘consumption’ during the early 19th century. Consumption was perhaps a fitting term due to consumptive nature of the disease in all aspects of one’s life. Those who fell victim were subject to a lifetime devoted to restoring their health. Acting as a rather capricious disease, consumption could lead to death within months of the first signs of infection; this would commonly be referred to by the medical community as ‘galloping consumption’ or more modernly, ‘milliary tuberculosis.’ However, consumption could last for an onset of years or decades defined by recurrent recovery and relapse until the patient died, likely due to asphyxiation.

Examining what occurs in the body, and foremost the lungs, the process can be described as a cavitation or necrosis of the lungs. The cavities occur in the pulmonary tissue due to microbial bacteria, resembling bacteria found in gingival cavities. As the tissue is eaten away by bacteria, lung abscess or bacterial fluid can fill these holes, thus resulting in asphyxiation. However, consumption based on physical circumstance was difficult to diagnose given that many of its symptoms mimicked other illnesses. Prior to the emergence of Robert Koch’s germ
theory in 1882, consumption was thought to occur in three stages. During the first (1) stage, consumptives – as to say, those afflicted with the disease – took on a thin, pallid appearance and suffered from trouble breathing and cough – particularly after exercise. Stage two (2) included frequent cough with green phlegm, rapid pulse, and fatigue. In stage three (3), the reason for the given name ‘consumption’ was evident; it was defined by the coughing up of blood, constant joint pain, sunken eyes, and the body wasting away as though being consumed. In this stage death was imminent. Cures were sought from sanatoria, or if these were unaffordable, a change of air. These cures weren’t entirely useless; that is to say, a change of air could have prevented the endemic disease of the era.

Linked to the Industrial Revolution (1760-1840), the environmental conditions were nearly inseparable from the endemic nature of the disease. Conditions in factories, tenements, and prisons were ideal for the infestation of bacteria, especially affecting the impoverished and working classes. Air pollution and widespread malnutrition contributed to weakened immune systems, making them susceptible to the afflictions of tubercular bacteria. Due to these conditions, the disease consumed those rich and poor, alike. While it’s evident that impoverished communities were more commonly exposed to and afflicted by consumption, this fact wasn’t as obvious to society at the time. Unlike the concurrent and lethal pandemic of cholera, consumption targeted all groups of people – young and old, wealthy and poor, working and unemployed. In the words of Yale professor Frank Snowden while lecturing over the era of consumption, “This disease was too slow, too unrelated to digestion, too associated with the powerful, as well as the poor…” (Snowden 31:18). When people thought of the poor being consumed by the disease, they also recognized that the social elite were as well. Given that no social class could be correlated with consumption over another, this prevented the association of
There is no negative stigma with any singular group. Instead, due in part to the Romantic era (1800-1850), the social response was quite the opposite.

In the era of consumption, or as someone might call the romantic era of tuberculosis, the glorification of the disease bore little resemblance to the reality of the morbidity of its effects. Consumption became known as a delicate affliction. Another common name being ‘the robber of youth,’ consumption killed more than a third of people aged 15-34 and half of people aged 20-24 (Frith 32). However, romanticism often emphasized the brevity of youth and early death. Other common, romantic ideations included an ennobling belief that consumption released and relieved the soul from the suffering of the flesh (Snowden 40:03). This ideation then became associated with beauty and perpetuated a certain idealistic representation of the disease. Consumption was also thought to enhance genius and creativity; therefore, the disease began to be romanticized by poets such as John Keats or Lord Byron and writers such as Edgar Allan Poe or Robert Louis Stevenson, many of whom had died from or been associated with the disease.

Edgar Allan Poe described his youthful wife, Virginia, who was afflicted with consumption as being delicate, angelic, and ethereal. Emily Brontë described, with positive connotations, the consumptive heroine of *Wuthering Heights* as having a thin physique and sparkling eyes. However, Brontë, her five siblings, and mother had all fallen victim to consumption. The intimacy between the writer and the disease didn’t inspire aversion to it; by these examples, I argue that it inspired greater fidelity to romantic ideations. The imagery of consumptives was also popularly used as inspiration for the tradition of vampirism in 19th century literature. Consequently, due to the pallor of consumptives and the association of consumption with blood, actual consumptives were sometimes thought to be vampires themselves (Frith 32). Bram Stoker’s *Dracula* perfectly represents the relationship between
consumption and vampirism. Stoker was known to collect newspaper clippings mentioning consumption to be cases of vampirism (Talairach 6). Perhaps this is the reason that the death of Lucy, who falls victim to Dracula, is described in a more pathological tone than it is a supernatural one.

In the prior examples and many others, the depiction of consumptives in romantic literature often focused on feminine qualities and females in general. In the era of consumption, literature had an apparent diversion from sensitive, romantic texts to romantic texts idolizing consumptive women. Here it became evident that gender dispositions were at play within society. Romantic literature began to emphasize the symptoms of consumption that conferred an attraction towards women. The tragic heroine who embodied spiritual beauty or fragility became a common textual trope in novels. She often possessed extreme intellect and charm, coupled with impotence and invalidism – the state of being chronically ill for the rest of one’s life. During the romantic era, a following cultivated around invalidism in which the male desire for fertility and hip-curvature became challenged by thin and infertile, consumptive women (Fairclough 1).

This following began to use invalidism as a form of social leverage in terms of gender roles; this can be seen in Elizabeth Gaskell’s *Wives and Daughters* in which consumptive Lady Cumnor was “too energetic to allow herself this indulgence constantly” (Gaskell 91). When she desired to be active and energetic, Lady Cumnor’s health did momentarily return; however, the “indulgence” that came about during her periods of rest permitted long dinners, late hours, and exposure to London. Therefore, Lady Cumnor had only been presented with two options: to engage in activities for the sake of her health, or to opt for relaxation in spite of it. She was only allowed to indulge by choosing the latter – an ideology that spanned into culture as well.
women were socially acceptable when they were inactive and frail, and thus arose a cult of invalidism.

Cultural ideations which influenced romantic literature were also used in medical writings in order to link the disease with ways of life. Social constructs surrounding aesthetics and lifestyle began to permeate medical texts and perpetuate inherent ideologies against women. Although there was very little evidence linking consumption to women, it was still labeled as a “female disease” (Talairach 2). The correlations between the coughing up of blood and misplaced forms of menstruation were too great to be ignored; therefore, many medical professionals supported the idea that consumption was closely connected to uterine disorders. Physicians also found correlations between certain markers of consumption and consumption itself, often attributed to the routine misdiagnoses that consumptives would receive prior to the final stage of their illness. Therefore, common symptoms such as a thinness, pallor, flushed cheeks, dilated pupils, and high-colored lips were not simply remarked as symptoms of the disease; they were often appointed as features that made someone predisposed to the disease (Day, “Dying to Be Beautiful” 606).

Further observation led medical professionals to believe that certain characteristics could stimulate susceptibility to consumption. For instance, Thomas Hayes argued in a medical journal in 1785 that “most subject to become consumptive, are of a delicate make, fair complexion … narrow chests, prominent shoulders … Many of the above description have constitutionally weak lungs” (Hayes 70). This ideology carried over onto characteristics of behavior and fashion; therefore, a woman could be too artistic, too romantic, or too immodestly dressed and for any one of these reasons or another, she would be susceptible to the illness. Due to this association of consumption with dress and due to the cult of invalidism shifting the beauty ideals considered
favorable in women, fashion as a whole began to change. Women’s gowns and petticoats were manufactured from thin material and of scanty nature; many dresses were made to expose the limbs and back, and to droop off the shoulders as to emphasize them. Perhaps the most well-known trademark of consumption was the corset which abetted the pursuance of extreme thinness.

Eventually, ideas among medical professionals shifted again and just as too little clothing could cause consumption, so could clothing that was too tight. Consequently, corsets were a contentious issue as it became widely believed that corsets impeded bodily functions, particularly those associated with the respiratory system. However, by this time, the corset was already established as “an integral part of female beauty” (Day, “Dying to Be Beautiful” 612). According to the medical community, restriction by way of the corset not only emulated consumption but produced it (Day, “Consumptive Chic” 74); the issue of tightness concerning corseting was believed to create a consumptive diathesis, or susceptibility to suffering from the illness. Another diathesis theory was that of René Laennec, who shared his theory with the medical community in the early 19th century. His ideas were rooted in the idea that consumption was a hereditary disease and that only those with genetic predispositions were susceptible to the disease. Due to Laennec’s theory and prior ideologies being inherently against women, a popular idea arose that women more commonly had a genetic predisposition to consumption; therefore, women had a predisposition to beauty.

In the 19th and early 20th century, the beauty and virtue of a woman were thought to have a direct correlation with one another (Day, “Consumptive Chic” 72). Due to romantic literature establishing a relation between beauty and virtue, and medical publications establishing a relation between consumption and beauty, it’s easy to see how consumptive women were seen as
too moral and too beautiful. These became qualities that upper- and middle-class women increasingly sought after. Consumption became elevated as an ideal of beauty and just as with fashion, particular beauty practices were implemented in an attempt to emulate the consumptive appearance. One popular method was the use of belladonna, or nightshade, to dilate the pupils. Due to the limitations of cosmetics, many works of advice were published on how to whiten the complexion, emphasize the blue in the veins, or redden the lips (Day, “Consumptive Chic” 74), each of these being common occurrences in consumptives. However, assertions arose that the chemicals used in pursuance of these qualities could penetrate the pores, enter the lungs, and induce consumption. In addition to contention concerning the use of cosmetics, there was also the notion that beauty should be a natural quality in women; therefore, consumption itself – with its ability to confer attraction without the aid of cosmetics – became a method to achieve beauty and virtuous character.

However, the discussion doesn’t end here. Women’s pursuance of the consumptive appearance (and consumption as a means to achieve it) inevitably affected how society as a whole perceived the disease. If consumption could be attractive in women, it had the ability to be attractive in men as well. Granted, the attractive components in men attributed to consumption were founded to be creativity and intelligence, particularly in art, music, and writing. Men who were seen as geniuses in their profession and whose genius was often compared to his consumption included: Frederic Chopin, composer (1810-1849), Franz Kafka, writer (1883-1924), Henry David Thoreau, writer (1817-1862), and John Keats, poet (1795-1821). Following the death of John Keats, Percy Bysshe Shelley – another poet with consumption – likened Keats to an eagle that could finally soar past the darkness of the night, scale heaven, and prosper within the light of the sun (Shelley 17).
Works Cited


