Bloody Poetry: On the Role of Medicine in John Keats's Life and Art

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To see Keats only as yet another British Romantic poet, author of the odes and the Hyperions, who died in exile, after one last fit of tuberculosis, is to forget that he spent as many years – six years to be precise – of his short life studying medicine as he did writing poetry. First a young apprentice to an apothecary, then a medical student from 1811 to 1816, Keats chose to start his career as an artist without completely burying his scientific past, making sure never to get rid of his old books on medicine – these books that were to previously shape his intellect before he even started putting together his collections of poems. Satisfied to have had the ability to distance himself from a rather contrasted form of education in order to favour a unified conception of knowledge, Keats will always seem to go back to those first readings as a source of reference. They are indeed the foundations of this unique rapprochement between medicine and poetry which, in British Romanticism, is certainly specific to him. It takes a visionary painter and a close friend, John Hamilton Reynolds, to remind us, in his very axiomatic letter of 3 May 1818 that Keats will never cease to praise the medical world as a means to keep “every department of knowledge” alive. From this pattern of now two complementary backgrounds, he therefore extracts the binary substance of one “great whole”¹:

Were I to study physic or rather Medicine again, — I feel it would not make the least difference in my Poetry; when the Mind is in its infancy a Bias is in reality a Bias, but when we have acquired more strength, a Bias becomes no Bias. Every department of knowledge we see excellent and calculated towards a great whole. I am so convinced of this, that I am glad at not having given away my medical Books, which I shall again look over to keep alive the little I know thitherwards […]².

But then again, in Keats’s writings, such influences defining an art of medicine subjected to poetic aspirations or, conversely, an art of poetry

²Ibid.
fraught with medical overtones are often infected by the venom of the author’s anxieties. In March 1819, in a letter expressing Keats’s pessimism towards what he perceives as the chaos of his thoughts, appealing to the virtues of poetry makes no more sense than to simply take on the task of the physician. Either way, there is no preferable outcome which would put an end to such a whirlwind of indecision: “I have been at different times turning it in my head whether I should go to Edinburgh & study for a physician; I am afraid I should not take kindly to it, I am sure I could not take fees—& yet I should like to do so; it is not worse than writing poems, & hanging them up to be flyblown on the Review shambles—Every body is in his own mess3”. Two months later, however, Keats had a somewhat unexpected change of heart. And although he contemplated, for a while, the prospect of boarding an Indian ship for a journey during which he would have put his surgical talents to better use, he soon realizes, with minimum efforts of self-persuasion, that the fever and energy of poetic knowledge suits him best. And if Chekhov, another renowned poet-physician after Keats, had learned how to avoid an impossible dilemma, considering himself lucky to lead a double life, whereby he revelled in the shared pleasures of a Mrs. Medicine and a Miss(tress) Literature – “Medicine is my lawful wife, and literature my mistress [...] when I get tired of one, I spend the night with the other4”, for the young Romantic apothecary, such a divided soul and body would seem more of a curse than a blessing. As it is between two equally dangerous beverages filled with illicit substances to swallow that the “palate of [his] mind” wavers. In a letter to Mary-Ann Jeffrey, of 31 May 1819, Keats, however, appears to be slowly yielding to the temptation of poetry as he would to a lesser evil, indulging in his taste for the melancholic Beauty of “an aching Pleasure [...] /Turning to poison while the bee-mouth sips (Ode to Melancholy, 3, 23-24)5”:

I have the choice as it were of two Poisons (yet I ought not to call this a Poison) the one is voyaging to and from India for a few years; the other is leading a feverous life alone with Poetry—This latter will suit me best—for I cannot resolve to give up my Studies. It strikes me it would not be quite so proper for you to make such inquiries (...) Yes, I would rather conquer my indolence and strain my nerves at some grand Poem—than be a dunderheaded Indiaman6.

In order for Keats to perceive with such vision the ins and outs of two parallel paths, medical science and poetic sentiment, as well as to conceive the possibility of their being brought together, he first had to go through the shock

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3 Rollins, Letters, II, 70.
of early drama when theory meets practice. Keats belongs indeed to a long line of writers and doctors, throughout countries and centuries, from Rabelais to William Carlos Williams, or from Tobias Smollett to, of course, Chekhov. And although Keats, like Somerset Maugham, is one of the few medically trained authors never to have actually practiced medicine, his idiosyncrasy is to be part of a tradition where the layers of personal and professional influences are superimposed. Robert Gittings’s hypothesis in terms of genealogy is here to confirm this atavism as he attempts to explain the ease with which Keats took to medicine and, despite his young age, very quickly blended in the esoteric world around him:

A Dr. William Keate(s) (born c.1708-09) was an apothecary in Wells in 1733 and later Mayor of Wells; Thomas Keate was house surgeon at St. George’s Hospital in 1767, later Surgeon to George, Prince of Wales, afterwards George IV, Surgeon General to the Army, and three times Master of the Corporation of Surgeons; his son, Robert Keate (1777-1857) was also a distinguished and successful surgeon attached to the Army⁷.

This continuity, from one generation to the next, would have been enough for Keats to fully blossom in the hands of a science his elders seemed to particularly care about, had it not been for the pouring out of that same poison onto his loved ones. By upsetting not just the intellectual but also the emotional life of the future poet, this fate would not spare any single part of Keats, body and soul, all the way to his last gasp. Such a marriage of heaven and hell or rather a divorce between the impulse of knowledge and the drawbacks of experience, Keats, the over-sensitive physician, poet of hereditary ills and heartaches, quickly reached the harsh understanding of a legacy illustrated by the pathologies of his next-of-kin: “[Keats’s] father died when he fell from a horse in 1804, and his grand-father died a year later. In 1810 his mother succumbed to what was probably tuberculosis, Keats having nursed her through her illness. His maternal grand-mother died soon after taking the Keats children under her roof, and Tom died after contracting tuberculosis while John watched helplessly⁸”.

The only survivor of a Greek tragedy within the Romantic era, Keats, the condemned poet, knew, at the very moment when death crawled in the family hearth, that he would never be granted the comfort and satisfaction he had hoped for: whether in medicine or in poetry, there shall be no mercy, except maybe if one is able to reconcile the best elements of their mutual virtues. And it is partly thanks to a strong academic supervision provided by the old school of medicine linking culture to tradition and its multiple forms of science that Keats was taught how to

rationalise personal ordeals caused by medical insufficiencies. This he felt when both father and mother succumbed very rapidly to their misfortune without giving the poet any time to digest the pain. But in studying a more constructive and thus more positive medicine, he opted for an art based on former models and precursors, a necessity in any field and the groundwork for the healthy development of a poet or doctor:

It is interesting to see how the forces of medicine and poetry ranged themselves as influences on this decisive period of Keats’s life. In regard to medicine, the lecturers to whom he paid fees for separate enrolment over and above the general enrolment in the Medical School were of the highest quality. The two courses in the theory and practice of medicine, with Dr. Babington and Dr. Curry, introduced him to sound textbook teachers of the old school; but lectures on chemistry were probably by Alexander Marcet, an extremely distinguished Fellow of the Royal Society.9

Properly trained and ready to examine, Keats was then capable of sketching a new approach to poetic diagnosis. The symptoms are indeed numerous as he thoroughly examines his new family of father poets and offers his care in the hope of receiving as much as he dispenses. Less attentive to the sound of the ancient lyre, the aspiring physician writes verse while listening to the corporeity of a long gone past, anatomically rich in physical manifestations of all kinds. Yet in self-prescribing poetry as his sole remedy, Keats can now welcome, with relief but without regulation, the nervousness of the Homeric song, the tremors of Spenser’s musicality or even Milton’s foul temperament. We find them all condensed in one Apollonian ode, freed from the Romantic poet’s own anxiety crisis: “There Homer with his nervous arms/Strikes the twanging harp of war [...] (2, 7-8). Nor move till Milton’s tuneful thunders cease,/And leave once more ravish’d heavens in peace. [...] (4, 22-23) A silver trumpet Spenser blows [...] Enchantment softly breathe, and tremulously expire (Ode to Apollo, 6, 30 & 35)10”. But poetic equilibrium, like medical balance, is sometimes slightly uneven, sometimes very fragile. The menace of a relapse is imminent when one decides, like Keats, to dig up the wound of ill-being instead of letting it heal. Facing a strong addiction to creativity pills, the poet’s reaction is quite predictable. When Keats unravels the spectacle of a Saturnian hero’s decay – an oozing natural force mourning the loss of his divinity –, the poet’s fear of being himself deprived of such a gift is expressed once again. Thus ripped out of his Muse’s womb, forced out of the cradle of a poem’s healing virtues, the Gods’ elect, the chosen one, is afflicted with all the pangs of the universe. Then the poet is struck by another form of medical epiphany, home

10 Stillinger, Keats, 8-9.
to a new birthright but leading to other realms of suffering when fever, suffocation, loss of identity and different modes of personality disorders succeed in dethroning the benevolence of poetry:

Who had power
How was it nurturéd to such bursting forth,
While Fate seem’d strangled in my nervous grasp?
And buried from all godlike exercise
Of influence benign on planets pale,
Of admonitions to the winds and seas,
Of peaceful sway above man’s harvesting,
And all those acts which Deity supreme
Doth ease its heart of love in.— I am gone
Away from my own bosom: I have left
My strong identity, my real self,
Somewhere between the throne, and where I sit
Here on the spot of earth.
(Hyperion, I, 102-14)\(^\text{11}\)

**Surgical Romanticism: Verse dissections**

Amongst contemporary critics whose favourite pastime was to scorn Keats’s affiliation to science, the *Blackwood’s Edinburgh Review* leaves us with this memorable piece of anthology. After having recycled, with the proper amount of criticism and irony, words from Keats’s pharmaceutical vocabulary, it issues a somewhat fake warning against the temptation for anaesthetic verse. The result is a vitriolic portrayal on the art of a poet here benumbed and threatened to faint with hunger through lack of proper nourishment: “It is a better and a wiser thing to be a starved apothecary that a starved poet; so back to the shop, Mr. John, back to ‘plasters, pills and ointment boxes,’ etc. But, for Heaven’s sake, young Sangrado, be a little more sparing of extenuatives and soporifics in your practice than you have been in your poetry\(^\text{12}\)”\(^\text{12}\). We know by now that, of all the perversions that he dreaded, Keats, protected by his scientific qualifications, would not have fallen under this category of the needy poet or even escaped the cliché of the starving artist. In addition, Keats’s poems appear to have been rescued from the often targeted soporific poetry readings. They are as much cut to the quick by the surgeon’s lancet as they are impregnated with the sleep-inducing potions of the “pharmakon\(^\text{13}\)”\(^\text{13}\). And because he had first roamed the alleys and rummaged in the sets of shelves of the apothecary shop before participating in the bloody work of the dissecting

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\(^{11}\) Stillinger, *Keats*, 251.

\(^{12}\) John Lockhart, “Cockney School of Poetry”, *Blackwood’s Edinburgh Magazine*, 3 (1818), 520.

rooms, Keats, who attended to the human body from the outside before discovering it from within, compels recognition as a poet of the surgical awakening purged of its medicinal toxicity. More than in the sibylline formula of a cure or in the power of its ingredients, Keats believes in the experience of the poet-observer. His verse pays homage to the quietude of the surgeon’s eye, sometimes intrigued by human skeletons and animal fossilisation, sometimes eager to minutely dissect the world of the living:

[...] skeletons of man,
Of beast, behemoth, and leviathan,
And elephant, and eagle, and huge jaw
Of nameless monster. [...] 
The gulping whale was like a dot in the spell,
Yet look upon it, and ’twould size and swell
To its huge self; and the minutest fish
Would pass the very hardest gazer’s wish,
And shew his little eye’s anatomy.
(Endymion, III, 133-36, 205-09)\(^{14}\)

From such a vision, a certain form of Keatsian “disinterestedness\(^{15}\)” and an art of exploration seem to emerge. The poet’s mind is concentrated and impervious to “circumstances\(^{16}\)”, devoid of affect in order to better carry these experiments through to a successful conclusion. A student during what is now known as the “rise of surgery”, Keats inherits from these years of innovation in terms of physiological anatomy and surgical pathology when, between 1800 and 1830, priority was given to the science of observation: “Following the French Revolution [...], surgery became an integral part of medicine. The transformation that ensued in academic medicine opened another realm of possibilities when it came to observation and even gave new momentum to experimental research. This led to the birth of specialised literature, which itself stimulated the process of professionalization\(^{17}\).”

An important personality in the world of surgery was Sir Astley Paston Cooper who, at that time, would have been in charge of teaching recent operating methods in England. Opposite this professor and authority in the field, famous for his rhetoric, Keats could not have been indifferent. For Cooper provided the young poet with a somewhat atypical sense of the scientific anecdote, by imposing his charisma at the expense of his colleague, Henry Cline, and his more scholastic, mechanical approach. Faced with these two rival

\(^{14}\) Stillinger, Keats, 116-18.
\(^{15}\) Rollins, Letters, II, 79.
\(^{16}\) Rollins, Letters, I, 170.
schools of surgeons led respectively by a strong mentor taking all the risks, and by a disciplinarian, reliable in that he would never stray from tradition, Keats chose the former without a glimpse of hesitation:

Cline was reckoned the soundest and most mechanically ingenious of operating surgeons, Cooper the boldest, most dashing and experimental. The same characteristics were apparent in their lectures. Cline was immensely thorough; his lectures and demonstrations lasted one and a half to one and three quarters hours, whereas Cooper, also by far the quicker operator, never spent more than an hour and a quarter. [...] He was full of striking illustrations and vivid phrases, and it can be no accident Keats’s notes on Cooper are more full than those he took from Cline.  

A great orator in addition to being an experienced physician, Cooper proved to Keats and to the rest of his audience that enthusiasm in a surgeon and the art of its expression required the man of science to have many talents. Such passion and eloquence meant that he had to be both in the heat of the action with others as well as in a heated debate with his own self. This, of course, also meant that he had to share his interest between the life of human beings and the resonance of language:

His clear silvery voice and cheery conversational manner soon exhausted the conventional hour devoted to the lecture; and all who heard him hung with silent attention on his words, the only sounds which broke the quiet being the subdued pen-scratching of the note-takers... as he only talked of what he really knew from his own experience, what he taught was to be implicitly trusted.

This Falstaffian character, his sensuality, wit and iconoclasm, therefore prompted Keats’s aesthetics of scientific realism, adding panache and style to his own vision of medicine. According to Robert Gittings, medicine even seemed to outshine poetry in the chronology of Keats’s early influences:

These [“the lectures of the great Astley Paston Cooper [and] some of [his] more notable sayings”] had the greatest influence on Keats; one can even trace the rough commonsense and concrete examples of Cooper’s style of lecturing in some of the homely similes with which Keats illustrates the profound philosophical and aesthetic ideas in his own later letters. It is tempting even to import this early influence as a factor in Keats’s direct and sensuous poetic imagery. There is fascinating evidence of actual personal contact between the great surgeon and the future poet. A contemporary notes that Cooper obtained lodgings for Keats with two older men, George Cooper (no relation) his own dresser, and Frederick Tyrell.

18 Gittings, Physician, 53.
Before he even gave up his studies to become a full time poet, Keats discovered the first great anatomical features and basic articulations of poetry not only in the relationships he established with his fellow physicians but also in the days he spent wandering about the hospital halls and operating rooms. From the poet’s own insight into those lost souls and their dismembered bodies, Keats has extracted, somewhere between the fever of their preservation and the spectre of their degeneration, some of the most successful images of his lyricism. In these belated poems which seem to be poles apart from his surgical past, Keats nevertheless reconnects with the wounds of his education that first prompted him to write verse based on the incisions of medicine. In the hallways of his hospital memories, he continues to be haunted by sickness and paralysis. There, a multitude of zombies file past him, one by one, in a state of physical and moral enfeeblement, whose low spirits he depicts with the crude, impassive Word of the anatomist. Shrouded in darkness and diffuse scepticism, his poetry reeks with death. The ode thus becomes the only legitimate voice left to speak (or moan) in the name of an ageing humanity in need of assistance:

Fade far away, dissolve, and quite forget
What thou among the leaves has never known,
The weariness, the fever, and the fret
Here, where men sit and hear each other groan;
Where palsy shakes a few, sad, last gray hairs,
Where youth grows pale, and spectre-thin, and dies;
Where but to thing is to be full of sorrow
And leaden-eyed despairs,
Where Beauty cannot keep her lustrous eyes,
Or new Love pine at them beyond to-morrow.
(Ode to a Nightingale, 3, 21-30)\(^{21}\)

If Paracelsus’s alchemical approach to medicine has left traces on Shakespeare and on Keats while being the object of many concerns, literary criticism paid less attention to the role of Galien’s anatomy of dreams and memory in plays like Romeo and Juliet and Macbeth or poems like Ode to a Nightingale and Ode on Melancholy. From Galien to Keats, the Romantic poet-surgeon takes over the Shakespearean role of the amateur physician. His memorial is therefore built around a process of medicalisation which is poetised by the dream-like vision of the ode. By means of an all reconstructive surgery, Keats struggles against the imperfections of real life and the despair of its freaks and monsters, hoping to make them fade away as he injects an always greater dose of Truth and Beauty in his art. In order to

\(^{21}\) Stillinger, Keats, 280.
successfully weave back together that many bodily tissues in just a few lines, the harshness of the anatomy class is perfectly compatible with a certain sense of dereliction. It grabs hold of the forlorn physician as he indulges in forbidden acts of daydreaming. Sitting in rows next to rational minds, Keats’s escapism stands out as he imagines this (amphi)theatre of scientific exactitude enlightened by the magical beams of “fairy creatures”: “On one of his visits to young Clarke they sat in their favourite old arbour while the latter read Spenser’s ‘Epithalamium’ aloud. As Clarke afterward recalled this occasion, he pictured Keats following every line in a state of ecstasy. The young apprentice in surgery returned to work with Spenser’s *Faerie Queene* under his arm. In a similar way, the unpredictability of miracles in surgery cannot be resolved by simply renouncing to medicine but rather by preaching for its promises. In the hands of poetry, it can aspire to a more dignified success; that which would require another leap of faith coupled with a renewed sense of trust:

Cowden Clarke once inquired how far Keats liked his studies at the hospital. [...] « The other day, for instance, during the lecture [of anatomy], there came a sunbeam into the room, and with it a whole troop of creatures floating in the ray, and I [Keats] was off with them to Oberon and fairyland ». [...] Keats indeed always denied that he abandoned surgery for the express purpose of taking poetry: he alleged that his motive had been the dread of doing some mischief in his surgical operations. His last operation consisted in opening a temporal artery; he was entirely successful in it, but the success appeared to him like a miracle, the recurrence of which was not to be reckoned on.

This collaboration between the writer’s ink and the surgeon’s scalpel will, of course, outlive Keats and be taken up once again by Chekhov whose prose we are quoting here one last time. According to him, literature having drawn some of its substance from surgery, it will itself have to return the favour and come to the rescue of surgical writings: “You are preoccupied by your theatre, and I also have my worries. My *Surgery* journal still has one foot in the grave, and once more it is down to me to do whatever has to be done to rescue it, since I am the only doctor with any knowledge of, or connections to, the world of literature and publishing.” But our interest lies in the reversed phenomenon when poetry, mixed with fear and wonder, opens its heart, in the Romantic era, to a more humanistic surgery. In this new context, it cannot but be inspired by the science of integration and domestication of physical monstrosity; a science which makes sense only if slicing up crippled bodies allows for the beauty of their reconstruction. It also requires that the corpse digger would be willing, in time, to perform the duties of the “resurrection

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man”, in other words, witness the moment when the dissection of one dead body allows for the prospect of a resurrected humanity.

Inside the Body of Poetry: Keats, the Anatomist

This reflex of “dissecting and anatomising” the living forms of poetry is such that it will be mimicked by Keats’s contemporaries. Such prowess many times glorified by Keats, although he ran the risk of seeing it turned against him, had nevertheless its rewards. The young genius could take pride, for example, in having provided his peers with the same tools of reading which had previously helped him shape his own poetics of influence and his anatomy of writing: “Shelley was critical of Endymion: Keats seems to have associated his captiousness with that of Leigh Hunt [...] ‘He and Shelley are hurt, and perhaps justly, at my not having showed them the affair officiously and from several hints I have had they appear much disposed to dissect and anatomize any trip or slip I may have made’25. This large contribution to the art of poetic and critical dissection is undoubtedly a new fact which the Romantic poet-physician seems to have introduced to the period. But it is thanks to Renaissance medicine that he was able to prepare his consciousness for scenes of decomposition: “Thy flesh, near cousin to the common dust,/Will parch for lack of nutriment—thy bones/Will wither in few years, and vanish so/That not the quickest eye could find a grain/Of what thou now art on that pavement cold (The Fall of Hyperion, I, 109-13)26. What comes to mind here, on this particular theme, is no other than the famous episode of the graveyard confessions in Hamlet, where the hero meets, on a chance encounter, the clownish gravedigger. This fool we remember for his morbid yet scholarly digressions on the degradation of bodies soiled with syphilis in contrast with the resistance of Yorick’s skull. In addition to its many theatrical effects, this scene of tragi-comic relief is above all a pretext to invoke the memory of the deceased entirely contained in the uncanny presence of this skeleton and in the mystery of its preservation:

Ham. How long will a man lie i’ the earth ere he rot?

First Clo. Faith, if he be not rotten before he die, — as we have many pocky corse now-a-days, that will scarce hold the laying in, — he will last you some eight year or nine year; a tanner will last you nine year.

Ham. Why he more than another?

26 Stillinger, 363-64.
First Clo. Why, sir, his hide is so tanned with his trade that he will keep out of water a great while, and your water is a sore decayer of your whoreson dead body. Here’s a skull now; this skull hath lain you i’ the earth three-and-twenty years. (…) 

Ham. Let me see. — [Takes the skull]— Alas! Poor Yorick. I knew him, Horatio; a fellow of infinite jest, of most excellent fancy; he hath borne me on his back a thousand times; and now how abhorred in my imagination it is! my gorge rises at it. (Hamlet, V, 1, 177-190)²⁷

As each character seems to tackle with ease the question of human decadence and the bits of corpses which are there to illustrate it, Shakespeare’s irony is not as obvious as we would like to think. It rather comes from the fact that Hamlet’s heart immediately goes to the long gone “fellow of infinite jest” instead of upsetting itself over the stench of his last remains and the sight, though nauseating it might be, of his cranial bone structure. From the burial of the dead body before it falls into decay to unearthng, years later, its dry limbs, the poet-physician of the Renaissance learns how to closely observe and visualize that posthumous evolution. This distance he has gained from looking at things externally, in an objective and objectifying point of view. Naturally, this was later completed by another type of exhibition, in the course of which, the anatomical depths of recovered organs were brought to light. Learning to dissect, one had to be resistant enough to witness, like Keats did for a while, the fresh cuts in the flesh of diseased human beings. And even though the Romantic physician, more than in Shakespearean times, had learned not to shy away from a decrepit body, he nonetheless still remained quite sensitive to the unbearable smells of these antechambers of death. For in that space every discovery happened inside and not outside; in other words, not within the context of a clean, organised course on anatomy but in the bleeding chaos of a slaughter house, prone to surgical “de-butchery”. One of Keats’s contemporary, the uncle of the famous surgeon, Sir William Osler, failing to hide his disgust, provides us with his own recollection of a typical scene of dissection at Guy’s Hospital in 1815. We must note however that he vouches for a period prior to the Anatomy Act of 1832 which was to bring a stricter set of rules and a semblance of order to this barbarous chain of autopsies and corpses:

On entering the room, the stink was most abominable. […] The pupils carved them [the limbs and bodies] apparently, with as much pleasure, as they would carve their dinners. One, was pouring Ol. Terebinth on his subject, & amused himself with striking his scalpel at the maggots, as they issued from their retreats; here, were five or six who had

served but a three years apprenticeship, most vehemently exclaiming against that
regulation in the Apothecary’s bill, which obliges every one to serve five years\textsuperscript{28}.

But Keats soon realized that he had to stay away, as much as possible, from the nefariousness of the surgeon’s utensils which, when venturing onto slippery grounds, threatened the patient of a fatal \textit{faux pas}. To such damages done when dissecting the dead, we could add, with Keats, the even more diabolical effects of operating on the living: “‘He [Keats] ascribed his inability,’ wrote a friend, ‘to an overwrought apprehension of every possible chance of doing evil in the wrong direction of the instrument’. He went on to particularize his fear, at his last though successful operation, that he might open an artery\textsuperscript{29}”. And of all the associates which Keats was forced to work with in his medical circle, William Lucas junior, also known as the “hospital’s Butcher”, happened to be one of the most harmful, not so much affecting the poet-physician’s future as an artist but definitely disrupting the nature of his medical calling. Lucas, whose violence was horrifying even to someone like Cooper, would often use very brutal methods. He went as far as to offend his elder when the only qualities he displayed were restricted to the misuse of the lancet, leaving infinite stains of blood on the operating table. This frightening man provided Keats with a perfect example of the ruthlessness of medicine, a blind art groping its way through obscurity which he considered far too perilous for his taste: “He was neat-banded, but rash in the extreme, cutting amongst most important parts as though they were only skin, and making us all shudder from apprehension of his opening arteries or committing some other error”\textsuperscript{30}. Here was introduced a new poetic model whose mission was to rule out any negative assessment of medicine and apply its sharp edges more advisedly. When Keats reached the end of his surgical training, he then endeavoured to test some of the literary potentialities he found buried in a large sample of medical blunders.

The young bard seemed to have achieved such an objective with poems he dissected down to the last detail. And after having been many times chiselled by his scalpel, they were proof enough to the former intern of London hospitals that his anatomy of poetry had come to life. As so many chosen pieces of a work of art, raw to the core, where “plastic surgery” cannot entirely mask the essence of a poet’s mind, the scenes of exhumation and decapitation in \textit{Isabella; or the Pot of Basil} are striking not only for their putridity but also for their extreme, anatomical precision. In this romance on Keatsian medicine, the

\textsuperscript{28} Gittings, \textit{Physician}, 54.

\textsuperscript{29} \textit{Ibid.}, 55.

heroin struggles against the scourge of posthumous rot and the threat of a “hungry Death”:

Who hath not loiter’ in a green church-yard,  
And let his spirit, like a demon-mole,  
Work througth the clayey soil and gravel hard,  
To see scull, coffin’d bones, and funeral stole;  
Pitying each form that hungry Death hath marr’d,  
And filling it once more with human soul?  
Ah! this is holiday to what was felt  
When Isabella by Lorenzo knelt.  
(Isabella, 45, 353-60)\(^{31}\)

Far from the traditional female figure in a romance on courtly love, embodied by the fair Elisabetta in Boccacio’s *Decameron*, the bravery of Keats’s Isabella covered up in blood and bruises clearly sets her apart from her predecessor and source of inspiration. Newly baptised, she has now forgotten the past and lost her former innocence as she verges, in the name of her lover, on the rather disturbing world of the sordid fetishist. She becomes, to the Romantic reader, a modern surgeon, a “woman of the resurrection” who seeks to erase a murder and create another life after death for her beloved. Much to our surprise, she remains quite unruffled when it comes to the preservation of his decapitated body. The change here does not just imply a mere adaptation of Boccacio’s story, it also reproduces certain non-literary steps of a larger scientific study. This forces us to recognize, in line with the full awareness of Keats’s “pale vision”, that the original purity of a perfectly wrapped up and immaculate corpse, “still intact, without the least trace of decomposition” (*Decameron*, 4,5)\(^{32}\), is marred by the melodrama of dismemberment. The poem questions the origins of this “wormy circumstance” but not its reality, scientifically proven to be true:

Ah! Wherefore all this wormy circumstance?  
Why linger at the yawning tomb so long?  
O for the gentleness of old Romance  
The simple plaining of a minstrel’s song!  
Fair reader, at the old tale take a glance,  
For here, in truth, it doth not well belong  
To speak:—O turn thee to the very tale,  
And taste the music of that vision pale.  
(Isabella, 49, 385-92)\(^{33}\)

\(^{31}\) Stillinger, *Keats*, 194.  
\(^{33}\) Stillinger, *Keats*, 195.
A poetics of transgression seems to be the result of Keats’s extravagance. His poetry comes out as a mixed breed, proud of its grotesqueness. In this world, cutting the head of a man takes on the form of a vegetable potpourri shaped like a bodily “protuberance” and deformity leads to sepulchral “violation”: “[...] if she could, she would have taken the whole body with her to honour it with a more dignified burial, but seeing that it was not possible for her to do so, she removed, as best she could, the head from the chest with a knife” (Decameron, 4, 5). And, in the poem’s final act, the recovery of the dead by the living happens on a desecrated tombstone used as a dissecting table. In this medical tale based on fragments of necrophilia and on the fantasy of two lovers trapped in-between worlds, only a portion of the beheaded corpse is enough to feed us with the illusion of its eternal presence. Finally, it is thanks to the haven of female protection, here about to be sexually canonised beyond the norms of the “genre”, that Isabella’s culinary and gardening skills are completed with the virtues of a strange form of herbal surgery. Lorenzo’s entire being is no longer viciously carved by surgical hands but plucked like a woman, sheltered and hidden. The denouement is to be expected but still worthy of notice. The poetess-physician carries his organ and her orgasm to the end, and to ensure their common coronation, she gives the head to science before “filling it once more with human soul (Isabella, 45, 358)” and eventually bringing it back to life:

> With duller steel than the Persean sword  
> They cut away no formless monster’s head,  
> But one, whose gentleness did well accord  
> With death, as life. The ancient harps have said,  
> Love never dies, but lives, immortal Lord:  
> If Love impersonate was ever dead,  
> Pale Isabella kiss’d it, and low moan’d.  
> ‘Twas love; cold,—dead indeed, but not dethroned.  
> (Isabella, 49, 393-400)

Overall, this *tour de force* owes its brilliance to another way of picturing and reading scientific literature: the murder instinct and the fight for revival, super-natural medicine and the art of verdure, the belief in physical resurrection and the primitive side to head transplant, to name just a few. Moreover, such an odd narrative poem on the perversities of dissection

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35 Bec, *Décaméron*, 374.  
37 Ibid., 195.
paradoxically celebrates a perfect match, an osmosis so rarely equalled by any other of Keats’s feats of poetry: that which assimilates the *pharmakon* to the surgeon. This two-headed concept dates back to university and the early musings of the apothecary-poet. While sitting on the benches of medical school, he seemed to be contemplating floral arrangements to start an affair with poetry out of wedlock and possibly fantasize on a future elopement to seal their romance. By flipping through the pages of Keats’s notebook where the growth of medicinal plants completes a course on the anatomy of the human head, we can indeed easily imagine what could have been the genesis of Isabella and Lorenzo’s misadventures:

> The Lower Jaw is frequently dislocated from receiving a slight Blow while the Mouth is open—it is thus indicated—the Condyles of the Jaw are thrown under the Zygomatic Arches sometimes the coronoid process projects beyond the Arch. Cover the Thumbs with a Handkerchief and depress the lower part of the Jaw elevating the Chin with the fingers—if this should not succeed. *<There are little drawings of flowers in the inner margin of this page>*

In this famous page of notes written and illustrated by Keats, we can make out, on paper, the first traces of Keats’s modern vision and revision of what has come to be known as the Romantic doctor’s openly scientific conception of poetry: “The evening came, / And they had found Lorenzo’s earthy bed; / The flint was there, the berries at his head (*Isabella*, 44, 350-52).”

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**Mots clés**

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**Bio-bibliographie**

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**Pour citer ce texte**