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POETIC INSIGHTS INTO DEPRESSION AND THE SLEEPING MIND

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The biological basis to 'depression' is accepted and our nomadic ancestors doubt-less ground to a halt with it when the challenges of immediate survival allowed of no solution. But modern man in the developed world has additional complex goals in life borne of his consciousness—he is condemned to think existentially—he knows the past, can anticipate and fear his future, may have unrealistic aspirations borne of the expectations of others, is overwhelmed by information and insoluble problems on a cosmic scale and, in Christendom, may seek personal salvation. Few would doubt that our poets add to our insights into this aspect of ourselves.

Within depression, problems are recognised by and preoccupy the individual though they are experienced as overwhelming. And yet the multitude of defences we can put up against the experience and such self-knowledge may distance us from possible solutions and personal growth. Perhaps the human race itself would be better to acknowledge its depression; common purpose could then lighten its burden. The time may have come in research when we should again encourage one hundred people to study one mind instead of the present custom of one person studying 100 other minds!

The melancholy mind has been recognised throughout recorded history. The ancient Greeks saw links between it, the individual's temperament, their body build and their body chemistry. Democrates persistently dissected the body in search of the centre of melancholy. Scholarly descriptions of melancholy have come down to us over the centuries, notably that of Burton, himself an acknowledged melancholic and testimony to the insight that the condition can bring. The melancholic mind has not always been medicalised. The Puritans looked depression in the eye and saw it as a necessary condition for mankind. Both Bunyan and Milton strove manfully against it on that basis and yet achieved the peaks of human creativity.

In modern times Adolf Meyer has brought us once again the concept of depression as a psychobiological reaction to adverse events² and more recently this view has found endorsement by George Engel.³

In the United Kingdom there has been a debate about classification of depression with the term 'endogenous' being used, with its aetiological implications, to define a cluser of symptoms, some of which are non-specific to depression, and others of which are clearly reactive to life events. The arguments raged over whether there were categories of depressive illness or whether the disorder is spectral or multi-dimensional. The debate was ill-founded, opinions being based on experience of the selected few people with depression who attended psychiatric services. The depressed masses in medical wards (the somatisers), those in general practice and others avoiding carers altogether, were ignored. More recently, Eugene Paykel has emphasised how restricted is

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our knowledge.⁴ For examples, a previous episode of mania has prognostic significance; anxiety is associated with mild depression; agitation with severe depression.

The word 'depression' is firmly bound into the English language to indicate an illness through the 1921 translation of Kraepelin's work on melancholia.⁵ The dictionary indicates that it also describes the slowing down of trade, a reduction in atmospheric pressure, or that it can be the product of pulling down or pushing down, but also makes some mention of the complex variety of associated feelings that Burton and Engel have highlighted as often present. Not just sadness or hopelessness, but also anger, envy, despair, anxiety and helplessness, each with its own psychobiological status and with vectors that clash e.g. anger and anxiety. The syndrome is then laden with further distortions generated by the doctor/patient relationship with its transferential social basis.

My own approach to depression has been partly through the study of sleep.⁶ Individuals with severe depression may waken early. Our own research confirms that this is not present in all. The hallmark feature of severe depression is a complaint of wakening too early however late the person wakens.

The depressed person wants to return to sleep. On wakening they not only feel wretched but in the severely affected, depression is at its worst in the morning. Consciously they seek oblivion; more accurately perhaps, sleep itself has not worked. Perhaps here is the key to 'biological' depression; if we waken with something that we didn't go to sleep with, may sleep itself be the culprit? There are other such relationships known to medicine, such as migraine on wakening and the morning stiffness of rheumatoid arthritis. They invite the same questions.

Can poetry help us here too, by shedding light on the process as well as the content? Such knowledge is not always as modern as we may think! In *Hamlet*, Shakespeare assures us that through the play elusive truth can emerge. Plays, he states, are.

the abstract and brief chronicles of the time.

Shakespeare (1564–1616), Hamlet II, ii, 517–8

and even tho' nothing else is able to,

a play's the thing, wherein I'll catch the conscience of the King

Hamlet II, ii, 600-01

and the purpose of the play is

to hold, as t'were, the mirror up to nature

Hamlet III, ii, 25-26

The literature suggests that many poets are prone to depressive illness. If poets have personal insight into depression, are they particularly favoured as sufferers to tell us about its causes? But which is the cart and which the horse? Can the searing insight that poets sustain, itself bring despair? Why, until recently, have there been so few female poets? One could hardly claim that women have been uninspired to write poetry if poetry is born of adversity. There is some evidence

that female poets are now coming into their own but were the French right when they claimed that despite enslavement by man, woman is 'hope' whilst man is 'despair'.

The early writings of many of our male poets expressed romance and hope but later drifted into melancholy. Wordsworth, for example, who never recovers from the death of his brother, and laments:

We poets in our youth begin in gladness; But thereof comes in the end despondency and sadness.

My former thoughts return'd: the fear that kills; That hope that is unwilling to be fed; Cold pain, and labour, and all fleshly ills; And mighty Poets in their misery dead.

Williams Wordsworth (1700-1850), Resolution and Independence

As Arnold ages, disillusion becomes complete.

... for the world, which seems
To lie before us like a land of dreams,
So various, so beautiful, so new,
Hath really neither joy, nor love, nor light,
Nor certitude, nor peace, nor help for pain;
And we are here as on a darkling plain
Swept with confused alarms of struggle and flight
Where ignorant armies clash by night.

Matthew Arnold (1822-88), Dover Beach

The same fate awaits Henry VIII; Shakespeare immortalises it.

There is a state of man: to-day he puts forth The tender leaves of hope; to-morrow blossoms, And bears his blushing honours thick upon him; The third day comes a frost, a killing frost;

And when he falls, he falls like Lucifer, Never to rise again.

King Henry VIII, III, i, 352

Shakespeare apparently lived lifelong expressing the full gamut of emotions. Does this allow him to make the salient point that to acknowledge depression can yield insight? The insights of later life revealed in the preceding three verses may have emerged with age as psychological defences crumbled, as is also the case during one of Lear's moments of hopeless clarity.

The failed mind (i.e. undefended) perceives the heart's failings. An English subtitle to a Japanese version (RAM) of King Lear

Does ECT relieve depression by restoring the mind's defences? Chaucer certainly knew mankind at large very well.

Full wys is he that can him-selven knowe.

Geoffrey Chaucer (1340-1400), The Monkes Tale 1, 149 Canterbury Tales

Perhaps to be wise carries the penance of sadness. The price of insight?

The relationship of sleep to depression

When trying to command medical students' attention during their meagre hours

of teaching about sleep within their 5-year course, I suggest to them that sleep is the optimal condition in life and that wakefulness is the interlude! I promote the hypotheses that, within sleep, biological processes are anabolic, alternating between the body and the mind. The latter would seem to occur within REM sleep when information may be being processed and absorbed into the long-term memory banks which have been mobilised for the purpose (and which Freud saw as an opportunity to obtain access to them). If the new information is too dissonant then conflict will develop and, initially, wakeful anxiety may be our lot. Information is basic to solving the problems of the next day. If those problems, and their existential basis, to which we remorselessly return at night dislocated from the distractions of the day are insoluble, then we waken inert. No action is possible. Further problem solving is necessary, but sleep, though we now crave for it as a refuge from wakefulness, can no longer serve its healing purpose.

Not everyone would agree with that conceptualisation of the nature of sleep but what have the poets to say about it?

Thou has been call'd, O Sleep! the fried of Woe, But 'tis the happy who have called thee so.

Robert Southey (1774-1843), The Curse of Kehama. Motto xv, 12.

Southey points out the paradox that—when we most need sleep—i.e. oblivion, he believes that it is the most elusive. He fails to recognise that it may be sleep each night that brings back his woe.

And here is a poet who sought relief from the pain of wakefulness most of his life—which seems to have been down hill from University days onwards. Much of his notable poetry was born of despair.

So my thoughts are:
But sleep stays far,
Till I crouch on one side
Like a foetus again—
For sleeping, like death,
Must be won without pride,
With a nod from nature,
With a lock of strain,
And a loss of stature.

Philip Larkin (1922-85) How to Sleep

Larkin is searching for what he believes is oblivion, but which I have been arguing is not. Sleep is a very active part of our lives, and as I have argued to some extent, the immediate mainspring of depression. Larkin does see that sleep at the least requires that we accept ourselves as we are.

Unfortunately, it is unhappy wakefulness that infects our sleep as the following haiku* of mine attempts to convey.

From sleepless anger, Born of loveless days and nights, Lord, deliver me.

'Insomnia'

And here is Shakespeare summing up sleep in six economical and beautifully truthful lines.

*Japanese verse form invoking, at its most simple, the constraint of expressing an observation or sentiment in 17 syllables, five on lines one and three; seven on line two.

Methought I heard a voice cry, 'Sleep no more! Macbeth does murder sleep', the innocent sleep, Sleep that knits up the ravell'd sleeve of care, The death of each day's life, sore labour's bath, Balm of hurt minds, great nature's second course, Chief nourisher in life's feast.

Macbeth II, ii, 36

Within the 1st and 2nd lines Macbeth's conscience does not allow him to sleep. He is riven by guilt and self-disgust. He will never recover. In line 3 he is dangerously close to seeing sleep as blessed oblivion but clearly recognises the active role of sleep—its mental integrative functions. In line 4 we learn not that sleep equates to death but that the onset of sleep heralds the end of that day's wakeful experiences. Now those experiences need to be woven into the mind. Tomorrow will consequently be experienced differently. Furthermore sleep is restorative to the body as every mother and every labourer knows. In line 5 Macbeth confirms that sleep is an active part of life; and in line 6 comes clean. Sleep is the optimal condition in life, the locus of our problem-solving and prophetic abilities.

Daniel is another poet who feels in his bones that sleep is the arbiter determining how we will waken to and cope with the next day.

Care-charmer sleep, son of the sable night,
Brother to death, in silent darkness born,
Relieve my anguish, and restore the light,
With dark forgetting of my cares return.
And let the day be time enough to mourn
The shipwreck of my ill-adventured youth;
Let waking eyes suffice to wail their scorn
Without the torment of the night's untruth
Cease, dreams, th' imagery of our day-desires,
To model forth the passions of the morrow;
Never let rising sun approve you liars,
To add more grief to aggravate my sorrow.
Still let me sleep, embracing clouds in vain,
And never wake to feel the day's disdain.

Samuel Daniel (1563-1619) from Delia

The poet pleads with his dreams to help him the next day and not to have to waken to that day's disdain—the cornerstone of depression.

Another poet attests to the potential healing properties of sleep;

Deeply have I slept, as one who has gone down into the springs of his existence, and there bathed.

Thomas Lovell Beddowes (1803-49)

And Coleridge also sees this expressing, as the wedding guest goes off to digest the Mariner's tale;

He went like one that hath been stunned, And is of sense forlorn: A sadder and a wiser man, He rose the morrow morn.

ST Coleridge (1772-1834) The Ancient Mariner

Shakespeare again:

To die, to sleep; To sleep, perchance to dream: ay, there's the rub; For in that sleep of death what dreams may come When we have shuffled off this mortal coil, Must give us pause.

Hamlet, III, i, 56

He allows Hamlet to perplex us through his own perplexity. How akin to death is sleep? Hamlet fears the future and knows that man must pause; dreams can be on a cosmic scale and, if they 'fail' then our pause can grow into the inertia of depression.

And what do other poets say about that fateful wakening from such a sleep that has not worked?

How art thou fallen from heaven, O Lucifer, son of the morning!

The Bible, Isaiah xi, 12

Isaiah knew, that man has to run the gauntlet of each morning—when Lucifer is at large—a product seemingly of the night and of sleep itself perhaps.

Southey, several thousand years later, reflects this:

From his brimstone bed at break of day
A walking the Devil is gone,
To look at his little snug farm of the World,
and see how his stock went on.

Robert Southey (1774-1843) The Devil's Walk, i.

And here is Hamlet, sinking deeper into the mire, aware of the paralysing and destructive forces of ambivalence with guilt swamping intent, fear swamping impulse, generating that inertia wherein everything is neglected; identifying perhaps with Lucas Van Leyden's 'Portrait of a Young Man' (Fig 1)

My stronger guilt defeats my strong intent; And, like a man to double business bound, I stand in pause where I shall first begin, And both neglect.

Hamelt, III, iii, 40.

Meanwhile Coleridge has no doubt that morning inertia (depression) can be born of preceding sleep.

So two nights past; the night's dismay Saddened and stunned the coming day. Sleep, the wide blessing, seemed to me Distemper's worst calamity.

ST Coleridge (1772-1834) The Pains of Sleep

And what do the poets have to say about the experience of depression itself.

Here Longfellow drawing the distinction between overwhelming and transitory distress to which one can react or with which one can cope.

A feeling of sadness and longing, That is not akin to pain, And resembles sorrow only As the mist resembles the rain.

Henry Longfellow (1807-82), The Day is Done



FIGURE 1

'Portrait of a Young Nobleman' (1519) by Lucas van Leyden. Reproduced by kind permission of the Print Division, The New York Public Library, Astor, Lennox & Tilson Foundations.

Walter Raleigh, a poet of distinction, emphasised the overwhelming nature of distress that will not yield;

But stay, my thoughts, make end, give fortune way.

Harsh is the voice of woe and sorrow's sound,

Complaints cure not, and tears do but allay

Griefs for a time, which after more abound.

Sir Walter Raleigh (1552–1618) The Ocean to Cynthia

It is no good complaining and the effects of abreaction are temporary!

Anne Brönte eloquently restates the same experience and in such a short life.

Oh, I am very weary, Though tears no longer flow; My eyes are tired of weeping, My heart is sick of woe.

Anne Brönte (1820-49), Appeal

Elizabeth Barrett Browning, too:

I tell you, hopeless grief is passionless;

Touch it; the marble eyelids are not wet: If it could weep, it could arise and go.

Elizabeth Barrett Browning (1806-61) Grief

Beautiful poetry, uncloying and truthful. In line 1 she suggests why there is no reactivity in severe depression, whilst in line 2 she sees the necessity for regaining contact with her feelings and being able to express them, (something not possible in Fig 2).

Here is a contemporary poet whose verse could have been written in any age and who wishes to emphasise man's sense of isolation as perhaps the basis of all depression. On the face of it he led a riotous life. Is it just 'thinking' or 'intuitive' man or is it 'Godless' man?

I know only that the heart Doubting every real thing else Does not doubt the voice that

tells

Us that we suffer. The hardest part At the dead centre of the soul Is an age of frozen grief No vernal equinox of relief Can mitigate, and no love console.

George Barker (1913-91), The True Confession of George Barker

Milton—advised us to face up to such problems—to try and think them through—to use our intellect. Was he still sustained by a belief in God at the time?

For who would lose, Though full of pain, this intellectual being, Those thoughts that wander through eternity, To perish rather, swallowed up and lost In the wide womb of uncreated night, Devoid of sense and motion?

John Milton (1608-74). Paradise Lost, bk. ii, i, 146.

For the youngish Wordsworth one can live with and describe such states without experiencing them as melancholic or requiring the straining of every nerve and sinew.

Thanks to the human heart by which we live Thanks to its tenderness, its joys, and fears, To me the meanest flower that blows can give Thoughts that do often lie too deep for tears.

William Wordsworth (1770–1850) Ode, Intimations of Immortality, xi.

Milton himself succumbs and in his verse puts flesh on that sense of isolation



FIGURE 2

'Not made of Wood'. Reproduced by kind permission of the designer, Paul May, from the cover design for the book *Not made of Wood* by Jan Foudraine (1974), published by Quartet Books, London.

when it also overwhelms him by its immutability when precipitated by loss. Here he is deeply 'depressed' by the loss of his friend.

But O! the heavy change, now thou art gone, Now thou art gone, and never must return! John Milton (1608–74), Lycidas (a lament for a lost friend)

In this next verse we return to Man preoccupied with his own fate and seemingly isolated without support or hope.

I feel the shake Of wind and earthquake, And consuming fire Nigher and nigher, And the voice catch clear, 'What doest thou here?'

Thomas Hardy (1840-1928) Quid Hic Agis? III.

Hardy's great novels are all about Man's capacity for self-destruction and also his helpless battles against overwhelming odds and fate. For Hardy 'depression' is inescapable although most of his characters are courageous.

On this account Robert Burns envies the insignificant mouse.

Still thou are blest, compared with me! The present only toucheth thee: But och! I backward cast my e'e On prospects drear! An' forward tho' I canna see, I guess and fear!

Robert Burns (1759-96), To a Mouse.

In this poem Burns identifies the special nature of human consciousness and its burden. To be able to think about the future is that fearful human capacity that we rarely like to employ.

And here is Hardy again, in a lament, exhausted by his condition. Wanting to start again, like Burns, to erase the memory of his painful life. He also loved life and yet his nihilistic thoughts are there in the last three lines. The penalties of thinking are great (Fig 3).

It wears me out to think of it,

To think of it;
I cannot bear my fate as writ,
I'd have my life unbe;
Would turn my memory to a blot,
Make every relic of me rot,
My doings be as they were not,
and gone all trace of me!

Thomas Hardy (1840-1928), Tess's Lament, iv.

And Donne, three centuries before, also finally capitulates. Sees life as having been no more than a prison; he is pleased to die after less than 60 years of troubled existence.

Tyr'd, now I leave this place, and but pleas'd so As men which from gaoles to'execution goe,

John Donne (1572-1631), Satyre III.

And Shakespeare again.

In sooth I know not why I am so sad; It wearies me; you say it wearies you; But how I caught it, found it, or came by it, What stuff 'tis made of, whereof it is born, I am to learn.

The Merchant of Venice, I, i, 1.

The unfathomable origins of depression, unfathomable to the sufferer, that is. But Shakespeare also told us 'the play's the thing—to hold, as 'twere, the mirror up



FIGURE 3 The Thinker-Photograph of a statue by Rodin.

to nature', and so we may later discover, as Antonio discovers, why he is depressed.

In the next verse a poet describes another person overwhelmed with grief, for grief is the price we pay for love.

> He first deceas'd; she for a little tri'd To live without him; lik'd it not, and di'd.

Sir Henry Wotton (1568-1639), Death of Sir Albertus Moreton's Wife

Do poets also see a way out of this morass? Perhaps the processes of mourning

and pining can be creative as we draw on the virtues of the lost friend and absorb them for the rest of our journey through life.

Grief is itself a med'cine.

William Cowper (1731-1800), Charity, I, 159.

Cowper, living during the period of the French Revolution, sees the therapeutic potential of grief. He thinks that loss can be transcended.

Crabbe, living a little later than Cowper, a young man at the time of the French Revolution, sees this point very clearly. Hopefully not the arrested mourning that is associated with idealisation of the lost person—but the ultimate recognition of their true worth.

> Virtues neglected then, adored become, And graces slighted, blossom on the tomb.

George Crabbe (1753-1832), The Church, i, 133.

Shelley reminds us that life is rhythmical and cyclical; each year we shall be reminded of the loss.

Ah, woe is me! Winter is come and gone, But grief returns with the revolving year. Percy Bysshe Shelley (1792-1822) Adonis, xviii.

Another reminder of seasonal links comes from Eliot, preoccupied with his troubled existence and its negative resonance with the joy of spring.

April is the cruellest month, breeding Lilacs out of the dead land, mixing Memory and desire, stirring Dull roots with spring rain.

TS Eliot (1888–1965), The Waste Land, I, The Burial of the Dead.

For some of us spring may be joyful; not so with Eliot for it stirs up painful memories from his childhood.

What psychopathology other than loss can bring us to a halt; deny us tears? Byron suggests shame can, which for him was an erring sister.

And every woe a tear can claim Except an erring sister's shame.

Lord Byron (1788-1824) The Giaour, I, 420.

And Larkin, with his lifetime's despair, rounds on his parents and then forgives them because they are victims too—and sees oblivion as the only answer.

They f... you up, your mum and dad, They may not mean to, but they do. They fill you with the faults they had And add some extra, just for you. But they were f...d up in their turn By fools in old-style hats and coats Who half the time were soppy-stern And half at one another's throats. Man hands on misery to man. It deepens like a coastal shelf. Get out as early as you can, And don't have any kids yourself.

Philip Larkin (1922-85), This be the Verse.



FIGURE 4

George III. Illustration by Dr Mandy Assin, senior registrar in Psychiatry, 'St George's'/SW Thames Regional Health Authority. Reproduced with her permission.

People at large have such a need to defeat depression that any defence will do especially when reframing the cause of the melancholy of our representatives! (Fig 4). May there be any substance in the following ditty of mine, brazenly inserted amongst the present company for the sake of making the point!

George the Third was wont to be often somewhat grandiose but also melancholy. In faith, the truth was plain to see: he was a case of m.d.p. What an awful tragedy, could it be heredity? the Hanoverian dynasty, the very notion of the monarchy was coming under scrutiny.

The cry went up 'The urine's red'. 'Tis porphyrins causing him to brood and then to elevate his mood. He's not to blame it's just his chain of porphyrin mols has slipped a link, is on the blink.' What a naughty little gene but perhaps it's all he'd ever seen of his mother; what a Queen! So, if its King you want to be fit to govern, nobly born, don't admit to owning feelings shaped by life, tho' predetermined. Love and hate are things you hide, but put your urine on the slide.

The Purple Patch-Up Job, or Mother's Not to Blame*

Should we once again, then, turn for help to re-energising antidepressants or ECT? This is the realm of Medicine and the poets have little comment. However, they do prescribe; thus a 14th century poem strongly recommends contentment with the ordinary; do not strive and do not be ambitious, the poet says.

I wish but what I have at will;
I wander not to seek for more,
I like the plain, I climb no hill;
In greatest storms I sit on shore,
And laugh at them that toil in vain
To get what must be lost again.

Anonymous, A song set by William Byrd, 1388

Cowper, suggests that we must busy ourselves. The reflective contemplative mind may begin to operate and endanger us unless we keep ourselves busy.

The absence of occupation is not rest, A mind quite vacant is a mind distressed.

William Cowper (1731-1800).

Shakespeare, too, recommends cure through occupation in Comedy of Errors (V, i, 78–82). In Alls Well that Ends Well (III, ii, 3–10), we find him commending music and singing. In Romeo and Juliet (I, i, 139–140), he recommends 'good counsel' whereas, in the Taming of the Shrew, he falls back simply on comic entertainment.

Meredith offers a different prescription. Food.

He may live without books,—what is knowledge but grieving?
He may live without hope,—what is hope but deceiving?
He may live without love,—what is passion but pining?
But where is the man that can live without dining?

Owen Meredith (1831-91) Lucille, pt 1, c 2, xxiv.

*The matter of George III's porphyria and its relationship to his melancholic illnesses provoked a lively correspondence (Derek Russell Davies & John Roberts, 29 January, 12 February, Charles Whitty, 19 February, 1970 *Times Literary Supplement*) following the publication of 'George III and the mad business' by Ida Macalpine and Richard Hunter.

But not quite so for Burns, who believes still in love.

To make a happy fire-side clime, To weans and wife, That's the true pathos and sublime Of human life.

To Dr Blacklock.

Elizabeth Barrett Browning—beautifully, without a cloying rhyme in sight, tells what our aim must be to discover love.

For life, with all it yields of joy and woe, And hope, and fear, —believe the aged friend— Is just a chance o' the prize of learning love.

A Death in the Desert, 1, 245.

Such love can transcend life, perhaps through grief when this is inevitable, and otherwise through our friends and through our children. As she says:

But love me for love's sake, that evermore Thou mayst love on, through love's eternity.

If thou must love me

Finally, Shakespeare again gives the full picture. In lines 1 and 2 one can and must reflect. In lines 3 to 6 we have to live with pain, but it helps (lines 7–8) to have a partner in life.

When to the sessions of sweet silent thought I summon up remembrance of things past,

Then can I grieve at grievances foregone, And heavily from woe to woe tell o'er The sad account of fore bemoaned moan, Which I new pay as if not paid before. But if the while I think on thee, dear friend, All losses are restor'd and sorrows end.

Sonnets, 30.

REFERENCES

¹ Burton R. The anatomy of melancholy, 1621. All English text. Dell F, Jordan Smith P eds. New York: Tudor Publishing Co., 1927.

² Meyer A. The psychobiological point of view. In: Bentley M, Cowdry EV eds. The problem of mental health. New York: McGraw-Hill, 1934.

³ Engel GL. In: Psychological development in health and disease. Philadelphia: Saunders, 1962.

⁴Paykel ES. The classification of depression. Br J Clin Pharmacol 1983; 15: 155.

⁵ Kraepelin E. In: Manic-depressive insanity and paranoia. Edinburgh: E and S Livingstone, 1921.

⁶ Crisp AH. 'Biological' depression: because sleep fails? Postgrad Med J 1986; **62:** 179–185.

TOWARDS VICTORY IN EUROPE: THE BATTLE FOR WALCHEREN

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In The Eighty-five Days: the Story of the Battle of the Scheldt R. W. Thomson commented that the higher a soldier's rank the smaller is the scale of the maps he uses as he ponders large areas of a battlefield and the broad tactical and strategic considerations which are his responsibility. In contrast, the large-scale 'map' required by the frontline soldier is frequently little more than the ground around him, a house, a hedge, a ditch, a fold in the ground, a few yards of river or stream, a copse, a cross-roads: and in human terms the enemy in front of him—an espied rifleman, soldiers manning a machine gun, unseen mortar men—the colleagues with him, his 'mate' who has been wounded.

A marine commando contemplating the battle for Walcheren knew little more than that he was to participate in an attack against powerful coastal defences on the Dutch coastline, part of the vaunted 'Atlantic Wall' and that his task was to put into practice his training for such an assault. He knew, too, that earlier opposed sea landings of the type planned had proved very hazardous. His 'maps' on this occasion were to be the inside of a Landing Craft Tank or Landing Vehicle Tracked and the sea around them; pools of mud; wet, sliding and seemingly endless sand-dunes; hostile enemy pillboxes; trenches and gun casemates; ground to be fought over. He had to put his trust in many matters of which he knew little, trust the officers who led him and trust that, if he were seriously wounded, others including the commando medical staff, would make every effort to rescue him.

The officers' appreciation and understanding of their role, although wider, was also inevitably limited, defined from above in terms of the specific tasks allocated to them. In this sense the medical officer was no different. In military terms he had trained specifically for the task ahead but medical training and the duties of his non-combatant role gave him a unique opportunity to observe at close quarters, not only the nature of front-line battle, but also the human reactions in men exposed to extreme stress.

Time, an understanding of many of the features of the Walchern operation, unknown to the men when participating in it, and a wider appreciation of its strategic and historical background have put the operation into a more ordered and comprehendible perspective and revealed more of its significance and consequences.

PRELUDE TO WALCHEREN

Three months after the D-Day landings on the Normandy beaches on 6th June 1944 the Allied Armies had almost reached the Dutch border. During the

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