

## TUBERCULOSIS AND 19TH AND 20TH CENTURY PAINTERS

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The demise of Smike in *Nicholas Nickleby* from 'a dread disease - which sometimes moves in great strides and sometimes at a tardy sluggish pace but slow or quick it is ever sure and certain' is a reminder that tuberculosis in the days before chemotherapy was often a fatal disease. Recovery was rare and regarded as a 'divine and mysterious ordination'.<sup>1</sup> After a steady decline in incidence from the mid-nineteenth century<sup>2</sup> the resurgence of tuberculosis lends interest to a consideration of the effects of this disease on painters; whether afflicting the artist or his immediate family, tuberculosis has exerted profound effects on art, including such aspects as the medium employed and subject matter and the artist's creativity and output.

### DISABILITY AND CHOICE OF MEDIUM

Deterioration in an artist's physical condition may encroach on the ability to use a particular medium or tool and require other means to be adopted to remain creative.

*Amedeo Modigliani (1884-1920)*. Sculpture on a monumental scale was at first his chief aspiration; he carved stone for four years without selling a single work until Augustus John bought two large heads.<sup>3</sup> However the use of this medium proved an unfortunate choice for a young man suffering from pulmonary tuberculosis. His precarious health, the physical effort of carving in stone and the coughing induced by stone dust, eventually turned him away from sculpture and back to painting for which he had originally trained.<sup>3,4</sup> Modigliani's tuberculosis presented with pleurisy at age eleven and recurred, accompanied by a 'violent' haemoptysis and fever, at sixteen with doctors pronouncing his case hopeless. The only bonus of his illness was that he was rendered unfit for military service and thus spared the possibility of an even shorter life span. By 1918 the deterioration in his health led him to recuperate at Nice; his hostess, Rachel Osterlind, was also gravely ill with intestinal tuberculosis.<sup>3</sup> He soon returned to Paris to resume his downward spiral of destruction the result of extra pulmonary spread brought on by his impaired immunity, a consequence of starvation, exposure, alcohol and hashish. On the 14th January 1920 he was stricken with terrible renal colic and although he was spitting blood, feverish and emaciated, nephritis was diagnosed. His admission to the Hôpital de la Charité was delayed for eight days for some incomprehensible reason; by then he was unconscious and two days later on 24th January, he died from tuberculous meningitis.<sup>3-6</sup>

*Aubrey Beardsley (1872-98)* had evolved a highly individualistic and unique style. His formal art education had consisted solely of a year of evening classes - sufficient for a graphic genius, whose sensuous, decadent, often macabre drawings marked the beginning of a new era in book illustration.<sup>7</sup> Beardsley first showed signs of pulmonary tuberculosis at the age of seven, but nevertheless he was despatched to boarding school. Ironically his first employment, when in his teens and suffering

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haemoptyses, was in an insurance office. Although told by no less an authority than Burne-Jones that he would one day 'paint very great and beautiful pictures',<sup>8</sup> the restrictive forces of tuberculosis and a predilection for line, dictated otherwise: because of weakness, periods of confinement to bed and lack of time to learn the techniques of oil painting, he concentrated on pen and ink illustrations having completed only two oils. Reduced to a state of great weakness by fever and haemorrhages, Beardsley, like the tuberculous Robert Louis Stevenson, worked in 'creative spurts',<sup>9</sup> his eroticism fuelled by a vivid imagination, youthful sexuality and confinement to bed. Eventually he became too ill to complete his commissions on time and too weak to avoid debts by 'moonlight flits'. Fearful of death he sought to postpone the inevitable by falsifying his date of birth.<sup>8</sup> A restless traveller, his short life of 25 years ended at Mentone in the south of France, confined to a hotel room following a pulmonary haemorrhage. The frequency of tuberculosis in Beardsley's circle is perhaps demonstrated in the founding of the then-scandalous magazine *The Yellow Book*, conceived jointly by Harland (literary editor) and Beardsley (art editor). They had first met in the waiting room of a consultant physician - both were tuberculous.<sup>8</sup>

#### DISABILITY AND CHOICE OF SUBJECT

The terrors of tuberculosis exerted a profound and direct effect on the imagery used by many artists in their works.

*Ferdinand Hodler (1853-1918)* was ravaged by the disease. When only seven years old his father died of tuberculosis and his mother remarried a widower with three children, and gave birth to three more before dying aged 39. By 1889 all his siblings had succumbed one by one to tuberculosis: 'it seemed', he lamented, 'that there was always a corpse in the house'.<sup>10</sup> This overwhelming experience of disease and death in Hodler's youth is reflected in his subject matter. In *The Convalescent* (Fig 1) the pale listless invalid sits beside the bed in which she has been confined so long. In *Night* Hodler illustrates his own fear of death with the powerful image of a black-robed figure leaning over the terrified painter. These and the other paintings *View into Eternity*, *A Troubled Soul* and *Disappointed Souls* express his concern with the sombre realities of existence. Hodler's almost life-long confrontation with tuberculosis was continued when his own son, Hector contracted the disease in 1915 and was confined to a sanatorium in the mountains which Hodler had painted so beautifully. Hector, who for Hodler symbolised a future of health and strength survived only five more years.<sup>10</sup>

*Edvard Munch (1863-1944)*. This self-taught Norwegian painter was also deeply affected by watching the slow but relentless progress of tuberculosis ending in the death of loved family members. Dark moods of anguish and despair are reflected in his paintings: 'Disease, insanity and death were the angels which surrounded my cradle'.<sup>6</sup> He was only five when his mother, barely thirty-three years of age, perished from tuberculosis; his eldest sister, Sophia died from the same disease aged sixteen. 'Nothing', he wrote, 'but illness and death in our family - we are simply born to it'.<sup>11</sup> These indelible marks on his imagination inspired such works as *The Sick Child* and the tragic *Sick Chamber (The Moment of Death)* (Fig 2) which depicts Sophia's death; she had asked to be returned to bed but before this could be done she fell back in her chair - dead.<sup>12</sup> Tuberculosis also exerted an indirect influence on the painters' choice of subject.



FIGURE 1

*The Convalescent.* The tuberculosis patient, pale, weak and listless, sits by the bed in which she has been confined so long.

Ferdinand Hodler (1853-1918) Oil on canvas.

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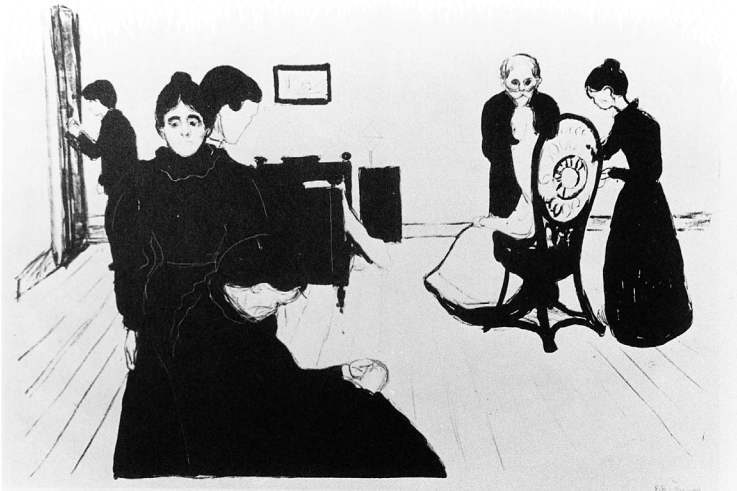


FIGURE 2

*The Sick Chamber (The Moment of Death).* The family awaits horrified for the moment of death. A boy quietly leaves the room.

Edvard Munch (1863-1944). Lithograph. ©Munch Museum/Munch Estate/BONO, Oslo/DACS, London 1997.

*John Constable (1776-1837)* married into a consumptive family for his wife Maria, her mother, sister and a brother suffered from pulmonary tuberculosis.<sup>13</sup> In the forlorn hope that sea air would alleviate his wife's condition, Constable installed his family at Brighton far from his beloved local pastoral scenes which inspired *The Valley, The Village, The Lock* and *The Cornfield*. He disliked Brighton: 'There is nothing here for a painter but the breakers - and sky'.<sup>14</sup> Nevertheless such enforced visits yielded a series of brilliant studies and his large Academy exhibit *Chain Pier, Brighton*. Sea air proved inefficacious against the tubercle bacillus; his wife died in the winter of 1829 and from then on changes were noted in his painting style.<sup>15</sup> Disease played a major part in what Constable painted, not only his wife's tuberculosis but also his own late onset of rheumatic fever - he avoided painting winter scenes.<sup>16</sup>

*Mark Gertler (1891-1939)* had a prodigious talent and was said to possess not only amazing gifts of draughtsmanship but also 'the vivid eyes of genius and consumption'.<sup>17</sup> In fragile health since childhood he was diagnosed as tuberculous at the age of 29. Poverty, overexertion and long stays in sanatoria are said to have led to a 'sense of dislocation in his work'.<sup>17</sup> Five years after his tuberculosis was diagnosed a pulmonary haemorrhage led to his admission to Mundesley sanatorium in Norfolk. (In the same year, 1925, 444 new cases of tuberculosis with 251 deaths were recorded in Norfolk).<sup>17</sup> Gertler's preferred subjects were still-lives and nudes such as the earthy and voluptuous *The Queen of Sheba* in the Tate Gallery.<sup>18</sup> In sharp contrast to this colourful imagery his stay in Mundesley sanatorium was marked by melancholic landscapes, mostly views through windows, including *Sanatorium Gardens in Norfolk*.

*Francis Sidney Unwin (1885-1925)*, a fellow artist trained at the Slade, was dying from tuberculosis in Mundesley sanatorium and he summoned Gertler to witness his will.<sup>17</sup> The deterioration in the appearance of the stricken Unwin over a period of only ten days, and his death, triggered off one of the crippling depressive bursts to which Gertler was prone. The dread of a recurrence of his 'pernicious disease', the suicide of a former lover, Dora Carrington, a failed exhibition and financial problems led him to attempt suicide:<sup>17,19</sup> he incised his neck and arm - then summoned a nurse. Later a gas stove provided a more prosaic but effective escape from his problems.<sup>19</sup>

#### CREATIVITY AND OUTPUT

Creativity and output are closely interrelated. Although the lethargy and resignation so characteristic of tuberculosis may sometimes have resulted in a diminution of creativity and a reduced output, this was not always so and it led to a belief that the tuberculous possessed more creative drive than contemporaries who were disease-free. This notion persisted into the 20th Century.<sup>20</sup>

*J. D. Innes (1887-1914)*. Augustus John's perception of the effects of tuberculosis on his painting companion was that the disease 'lent his brush a greater significance and decision as he set down, in a single sitting, view after jewelled view of the delectable mountains he loved before darkness came to hide everything except a dim but inextinguishable glow'.<sup>20</sup> A curious dichotomy appears to exist between physical energy and creative energy with the creativity drive persisting in even the most desperate circumstances, as demonstrated in the recent discovery of 441 hitherto unknown works by Modigliani,<sup>21</sup> and Beardsley's search for 'a new kind of perfection' right up to the time of his death while working on illustrations for Ben

Jonson's *Volpone*.<sup>22</sup> The manner in which creativity can transcend the severest of sufferings is seen in the histories of other artists.

*Theodore Gericault (1791-1824)*. Despite a brief life, he developed and matured rapidly and his genius carried him beyond the artistic conventions of his day. His subject matter exposed him to heavy doses of tubercle bacilli at a time when his resistance was low because of his life style: a commission for ten paintings illustrating the physiognomy of the insane required visits to an asylum; studies of the effects of imminent death on the features of the terminally ill took him to the local hospital.<sup>23-25</sup> Asylums and hospitals were both reservoirs of highly infectious tubercle bacilli. He also had filled his studio with anatomical specimens which he used in still-life studies, *Fragments anatomies*, and in studies for his masterpiece *The Raft of the Medusa*. Shipwrecked survivors on the raft had resorted to cannibalism and the mast stays were loaded with drying human flesh when they were rescued.<sup>23</sup> (In view of Gericault's interest in the gruesome, it is curious that this is not a feature of the painting.) Throughout 1822 Gericault kept up both his social life and his painting but he was doomed to experience all the suffering he had once sought to depict. In the latter part of 1823 his physical condition worsened rapidly and he was described as 'having the look of a consumptive'.<sup>24</sup> Medical and surgical treatments were powerless against the lesion which had formed on his spine and gradually consumed its bone, diversely ascribed to neoplasm,<sup>25</sup> trauma<sup>18</sup> and venereal disease,<sup>26</sup> but more recently, and correctly, to tuberculous osteomyelitis.<sup>23</sup> Cachectic, anaemic, in extreme pain and drained of physical energy, Gericault remained creative and on his deathbed he made his last drawings, among them a beautiful chalk drawing of his left hand.<sup>25</sup>

*Richard Parkes Bonington (1802-28)*. His last work *The Undercliff*, a water-colour of sparkling beauty was painted only a short time prior to what his parents described as his 'fatal dissolution' from pulmonary tuberculosis.<sup>27</sup> Bonington distinguished himself early in his short life and, like Constable, recognition came first in Paris. In spite of failing health he took steps to safeguard his income by developing English contacts and in 1827 he exhibited for the first time at the Royal Academy. A sustained drive to establish his reputation in London proved disastrous for his health, when only rest might have prolonged his life. When he returned to Paris he sank into a state of weakness, exhaustion and irritability yet the creative urge in him was undiminished. By midsummer 1828 he needed an 'invalid chair'.<sup>28</sup> As a last resort the Bonington family moved back to London so that the dying artist could consult a London doctor who claimed to have successfully treated tuberculosis. The last glimpse of this indomitable young artist is of a cachectic figure supported on cushions while he experimented with a waterproof brown ink extracted from walnut shells. He expressed an intention that when he was better he would try the ink further; sadly that day never dawned - he died a month before his twenty-sixth birthday.<sup>28</sup>

#### TUBERCULOSIS AND ARTISTIC GENIUS

The frequency of tuberculosis in the Romantic Age meant that a number of individuals of extraordinary talent were among the mass of sufferers. This led to the mistaken idea that tuberculosis and genius were linked - a notion that the tuberculous were unlikely to discourage. The effects of tuberculosis on the mysterious creative process of painting, a mainly inspirational rather than intellectual process, are difficult to define. It has been speculated that the low-grade fever that accompanies the disease

might produce bursts of insight and heightened perception.<sup>2</sup> It is also possible that tuberculosis, like any other physical ordeal, bestows on the sufferer self-dependence and the ability to exploit inner resources;<sup>29</sup> perhaps the prospect of premature death injected urgency into the act of painting. One small consolation is that the painters discussed appear to have realised their full potential although denied the precious gift of time.

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