PAPER

Sir Alexander Morison and *The Physiognomy of Mental Diseases*: Part 1

A Beveridge[1]

History & Humanities

Abstract

Sir Alexander Morison's *The Physiognomy of Mental Diseases* and the original art work that formed the basis of the book have not had the scholarly attention they deserve. The published book and the commissioned portraits have not been studied in any detail. Historians have tended to offer cursory assessments that have reflected their own preconceived ideas rather than properly engaging with the material. This is a pity because Morison's work is a rich source that tells us much about the history of psychiatry. The pictures and text give us a glimpse into the world of the asylum and that of the patient. Although we see the patient through the eyes of the artist and Dr Morison, they do emerge as individuals. The accompanying texts reflect the psychiatric approach of the time and reveal contemporary notions of diagnosis, aetiology and treatment. Morison's work can also be located in the history of ideas about physiognomy. He himself was particularly influenced by Jean-Étienne-Dominique Esquirol, and Morison's work, in turn, influenced WAF Browne. These papers will outline Morison's career and consider in detail his book on *The Physiognomy of Mental Diseases*.

Correspondence to:

A Beveridge
Royal College of Physicians
of Edinburgh
9 Queen Street
Edinburgh EH2 1JQ
UK

Email:

allanwbeveridge@outlook.
com

Alexander Morison and *The Physiognomy of Mental Diseases*

Alexander Morison's *The Physiognomy of Mental Diseases*[1–3] and the original art work that formed the basis of the book have not had the scholarly attention they deserve. His work certainly gets mentioned in accounts of the history of psychiatry and Sander Gilman[4] accords Morison a significant place in the development of medical approaches to 'seeing the insane'. However, the published book and the commissioned portraits have not been studied in any detail. Historians have tended to offer cursory assessments that have reflected their own preconceived ideas rather than properly engaging with the material.[5,6] In her otherwise extensive survey, *About Faces. Physiognomy in Nineteenth-Century Britain*, Sharrona Pearl[7] makes scant mention of Morison, while Scull, MacKenzie and Hervey's[8] biographical assessment of Morison says little about his work on physiognomy. This is a pity because Morison's work is a rich source that tells us much about the history of psychiatry. The pictures and text give us a glimpse into the world of the asylum and that of the patient. Although we see the patient through the eyes of the artist and of Dr Morison, they do emerge as individuals. The accompanying texts give us something of their stories, some disturbing, some poignant and others comical. The nature of delusions during this period is also revealed and

we find patients who believe they are Kings, Queens, Jesus Christ, the Virgin Mary or possessed of great wealth. We find patients who are tormented by the devil and who believe they are damned. Others strike odd postures, while some are mute. Furthermore, the texts reflect the psychiatric approach of the time and reveal contemporary notions of diagnosis, aetiology and treatment. A study of Morison's book will add to our understanding of the psychopathology of 19th-century asylum patients and their treatment.[9–12]

Morison's work can also be located in the history of ideas about physiognomy. He himself was particularly influenced by Jean-Étienne-Dominique Esquirol, and Morison's work, in turn, influenced WAF Browne. Carlson[13] claims that Morison's book initiated the practice of relating in depth a person's appearance to their psychopathology and that this influenced Jean-Martin Charcot and Paul Richer when they came to produce their serial *Nouvelle Iconographie de la Salpêtrière* (1888–1918). Morison's commissioned work can be approached from the history of art and that of the portrait. It represents a particular type of genre portraiture. His studies of the insane came at a time when portraitists were extending their gaze beyond the rich and titled to the 'outsiders' of society.[14]

Morison lived through a significant period in the evolution of psychiatry. The asylums were beginning to be built from the

[1]History and Medical Humanities Editor, Royal College of Physicians of Edinburgh, Edinburgh, UK

late 18th century onwards and career opportunities in the field of lunacy were opening up. Publications and medical lectures on the subject of mental disease started to emerge. One reason for Morison's neglect lies with developments during his own time. In 1839, photography was introduced into Western Europe and radically changed the way in which the mentally ill were seen. As Gilman[4] has observed, the photograph became the key to the new scientific physiognomy during the latter half of the 19th century. In Britain, Hugh W Diamond produced the first photographs of the insane, and they came to be regarded as more scientifically accurate than the portraits produced by artists. Diamond's work was championed by Morison's great rival, John Conolly in a series of articles on 'The Physiognomy of Insanity' and Morison's work was judged by many as redundant.[4] However, within decades the supposed 'scientific objectivity' of medical photography was being called into question. Though this did not lead to a rehabilitation of Morison's work, there has recently been a renewed interest in the art of medical illustration,[15,16] and contemporary artists such as David Hockney[17] have strongly asserted the superiority of the artist over the photographer in portraiture. This should lead us to a reconsideration of Morison's *The Physiognomy of Mental Diseases*.

As well as the secondary literature and Morison's published books and papers, this research makes use of primary material such as the original art work for the *Physiognomy* and Morison's extensive diaries. Morison kept a diary throughout his adult life, amounting to 20 volumes. They provide a very detailed account of his everyday life and are invaluable to the historian. However, he did not describe his inner life, and disappointedly for this research, nor did he reveal his underlying philosophy of the practice of psychological medicine or his approach to art.

Brief biography

Alexander Morison was born on 1 May 1779 in Edinburgh.[8,18–21] In 1787 he attended Edinburgh High School, before enrolling at Edinburgh University in 1792. Two years later he embarked on the study of medicine. He was apprenticed with Sandy Wood, a well-known Edinburgh physician nicknamed 'Lang Sandy'. During this period Morison became acquainted with the physician Alexander Crichton, who was to exercise an important influence on his intellectual development. In 1799 Morison qualified in medicine and went to London for 2 years of further study. Here he renewed his contact with Crichton,[22] who had published *An Enquiry into the Nature and Origin of Mental Derangement* the year before.

In 1799 Morison married the wealthy Mary Anne Cushnie who was to have 16 pregnancies by him. Morison spent a considerable time attempting to establish a career in medicine. He spent the first 20 years of his professional life as a physician. However, he was interested in the subject of insanity and during this period he journeyed back and forth to London, courting the rich and the titled in an effort to establish his career in the field of mental diseases.

In March 1818, Morison travelled to Paris to meet Jean-Étienne-Dominique Esquirol at the Salpêtrière. They corresponded for many years, Morison visited him on a further five occasions, and Esquirol subsequently sent students over to him. Morison visited a variety of Paris hospitals and was impressed with the French example that work could serve both as occupation and punishment. He noted the use of bath treatment with water to the head. He explored the theory of phrenology: he attended a lecture by Franz Joseph Gall and met with Johann Spurzheim, who told him he did not follow Esquirol's classification of insanity.[23]

During his trip, Morison also visited the art galleries and museums of Paris and was enthusiastic about the work of Jacques Louis-David. On his return from Paris, Morison started to visit asylums and private madhouses to learn about mental disease and its treatments. His diaries record the patients he saw and their management.[24] He met lunacy doctors such as John Haslam, and discussed mental diseases. Haslam was an Apothecary to Bethlem between 1795 and 1816. He published *Observations on Madness and Melancholy*.[25–28] Morison also started to see private patients and became the physician visitor to the Surrey private asylums in 1810.

In 1819 he went on a European tour with the daughters of the wealthy Coutts family in the role of medical attendant. To their horror it was their father's newly acquired wife, the young actress Harriet Melon, who subsequently inherited his wealth. Sometime later, however, the new Lady Coutts agreed to fund Morison's attempt to establish a lectureship in mental diseases. In 1823 he began the first lectures on mental diseases in Britain at Edinburgh. In 1826 he also began lecturing in London.

In 1825 Morison brought out the first British textbook of psychiatry, *Outlines of Mental Diseases*,[29] and there were to be five editions between 1825 and 1856. Morison recorded in his diaries that Haslam not only liked the book but declared that metaphysical doctrines would be superseded by the work of medical men.[30] Scull, MacKenzie and Hervey[8] have judged that Morison's book was unoriginal but that it was significant because it was the first textbook specifically for students and for that reason pioneering. Morison was writing at a time when there was little available on the subject.

In 1827, Lady Coutts withdrew her financial support for Morison, much to his disappointment and annoyance. In the same year, however, he became President of the Royal College of Physicians of Edinburgh, serving until 1829. In 1832 he was appointed as visiting physician to Hanwell Asylum. Similar appointments followed to Bethlem in 1835[31] and Surrey County Asylum in 1840. In 1838, the same year he was knighted, he brought out *The Physiognomy of Mental Diseases*.[1] In 1840 it was published with an appendix containing eight further portraits.[2] A second edition followed in 1843.[3]

In 1839 John Conolly was appointed to Hanwell Asylum. He was a rival and had championed the cause of non-restraint,

whereas Morison was in favour of retaining it, although only for particularly difficult or self-destructive patients – a view with which many of his contemporaries agreed. Conolly ended Morison's access to the Hanwell Asylum and thus his commissioned portraits of its patients. Morison's permission to take drawings of inmates was also withdrawn from St Luke's and Bethlem.

In 1842 Morison set up 'The Society for Improving the Condition of the Insane', which historians have judged was primarily concerned with perpetuating the hegemony of private practice in London.[8] In 1846 his wife died and he remarried in 1851. He died in 1866. Scull, MacKenzie and Hervey[8] have judged that Morison offered treatment outside asylum walls in the shape of being a personal physician to patients and their families. As such he has been overlooked in histories of psychiatry which focus on the asylum.

Morison and the literature on mental diseases

Morison read the work of his colleague, Alexander Crichton's *An Enquiry into the Nature and Origin of Mental Derangement*. In this Crichton downplayed nosology in favour of finding the cause of the mental disorder and he also adopted the Scottish philosopher, Thomas Reid's schema of the mind. Reid favoured an introspective approach examining how childhood experiences influenced the development of the mind. Morison, too, read the work of Reid.[32] Crichton emphasised that even the lunatic's actions had motives. These ideas informed Morison's approach to the mentally ill and he was also influenced by his Evangelical Christian beliefs.

Morison read the early work of James Cowles Prichard, who was later to write the standard British textbook, *A Treatise on Insanity*,[33] and judged that his 'new views of Insanity I think good'.[34] He also read 'Ferriar on Insanity'.[35] John Ferriar was a Physician of Manchester Infirmary, Lunatic Hospital and House of Recovery. He wrote on apparitions and insanity, and favoured a mild approach to the management of the mad rather than restraint (p. 543).[16] Morison read the 'Treatise on Insanity' by John Syer.[36] Syer had written *A Dissertation on the Features and Treatment of Insanity* (p. 831).[16] Morison was familiar with 'Burrows on Insanity'.[37] George Mann Burrows owned a private asylum in Chelsea. He wrote *Commentaries on the Causes, Forms, Symptoms, and Treatment, Moral and Medical of Insanity*.[38] Significantly, in view of Morison's interest in French alienism, Burrows was in close touch with psychiatric developments in France, visiting establishments in Paris. He was the first in Britain to report on the work of Antoine Laurent Jessé Bayle and Louis Florentin Calmeil, whose work established the clinical picture of general paralysis of the insane (pp. 777–781).[27]

Morison and art

To understand Morison's relation to physiognomy, it is important to be aware of his interest in art. We know that Morison was interested in art from an early age, but his diaries do not reveal the underlying reasons for this. Jordanova[15] has suggested parallels between the work of the artist and the clinician, and, given Morison's interest in physiognomy, her observations seem especially relevant to him. Like portraitists, clinicians have to look carefully and record faithfully. Jordanova suggests that 'before an artist, every sitter is in some sense a patient', a person to be looked at repeatedly. Likewise, clinicians act as portraitists, building up a picture out of facial expression, gesture, gait, etc.

Morison's career provided him with several opportunities to pursue his interest in art.[39] He received the patronage of Lord Sommerville, which included access to the wealth of art housed in England's country estates and regular tickets to Royal Academy exhibitions in London, Covent Garden and the Paris salons. Access to art was limited in the early 19th century. There were very few public galleries in Britain at this time. The Ashmolean in Oxford had been opened to the public since 1683, while the Hunterian Museum and Art Gallery in Glasgow opened in 1807. In 1824 the National Gallery in London opened, its collection based on that of John Angerstein. Despite the paucity of public galleries, art dealers were well established in London by this period and Morison would have had access to major art works through them.

During his European tour as the physician to Thomas Coutts' daughters, Lady Bute and Lady Guilford between 1820 and 1822, he visited Nice, Milan and Rome and saw work by Raphael, Leonardo, Caravaggio, Durer, Veronese and Canaletto.[39] From the 1830s onwards, Morison was building up a collection of prints, mostly religious in nature.

His nephew Andrew McCrae married Georgiana Gordon. They were close to the Morisons. Georgiana regularly studied Lavater's *Essays in Physiognomy* as part of her training under John Varley in London. She was an accomplished portraitist. One imagines that Morison and Georgiana must have discussed their mutual interest in physiognomy and portraiture, but this is not recorded in Morison's diaries.

In 1852 the famous portrait of Morison was painted by Bethlem inmate, Richard Dadd.[40,41] In this, the 'medical gaze' is reversed, and it is now Morison's turn to come under the scrutiny by a patient. Michel Foucault introduced the concept of the 'medical gaze' to describe how from the late 18th century onwards, the trained eye of the doctor reduced patients to objectified medical problems, problems that only the clinician's training could reveal.[42] In this painting, Dadd has captured Morison looking as weary and troubled as some of his commissioned portraits. (As well as the portrait by Dadd, Morison was also painted by James Irvine, John Watson Gordon and Philip Westcott.)

It was Charles Gow, one of the *Physiognomy* portrait artists, who first made Morison aware of Dadd. In his diary for 21 November 1844, Morison writes that Gow told him that 'Dadd is an extraordinary artist'.[43] Morison began acquiring Dadd's watercolours, though it is not known exactly which

pictures.[40] It is established that he owned Dadds's *Dymphna Martyr*, which depicted the Irish princess whose tragic story inspired the project at Geel in Belgium where the mentally ill stayed in the homes of locals rather than in the asylum.[40] Morison had visited Geel and the Church of Saint Dymphna on his European travels in 1825.[44] He had asked Dr Backer at Gheel to send him 'a copy of Dymphna and sketches of her history especially that in which the insane are depicted'.[45]

History of physiognomy

Houston[46] has contended that for centuries, 'a look of madness or stupidity' had been the criterion used by the sane to identify mental derangement or enfeeblement'. In her history of physiognomy in 19th century Britain, Pearl[7] argues that physiognomy 'achieved almost universal penetration into Victorian consciousness' and featured not only in learned journals and textbooks but also in popular cultural entertainments (p. 2). Physiognomy was accessible to the non-expert and was used as a technique of understanding one's fellow human beings across all classes of society.

As James[47] has observed, portraits of patients were a common feature of all sorts of medical practice in early modern Europe and beyond. More specifically, by publishing his book on *Physiognomy*, Morison was participating in a long tradition of the visual portrayal of the mentally ill. The history of the subject has been ably examined by Gilman[4] in his book, *Seeing the Insane*. In 1680 Cajus Gabriel Cibber carved two statues for the portal of Bethlem Asylum: 'Melancholy' and 'Raving Madness'. William Hogarth provided a famous depiction of madness in the eighth and final plate of *A Rake's Progress* (1735/1763) with its cast of mad folk in Bedlam. Morison referred to these two artists in his book. Strangely he made no mention of Johann Caspar Lavater, an early theorist of physiognomy, but he did record looking at 'Lavater's Physiognomy' in his diary.[48] Lavater was a Zurich pastor who published a four volume illustrated study of the subject that appeared between 1774 and 1778. Lavater drew on an older tradition of physiognomy started by Charles Le Brun (1619–90). Morison did, however, refer to Sir Charles Bell, an Edinburgh surgeon and artist, who had portrayed madness as a state of animality in his *Essays on the Anatomy and Philosophy of Expression*.[49] Bell's emphasis on movement in the portrayal of the human figure was to inspire Géricault when he came to paint *The Raft of the Medusa* (1818–19).[50] A key influence on Morison was Esquirol who commissioned portraits of patients at the Salpêtrière in Paris in the 19th century. Esquirol's colleague and student, Étienne-Jean Georget commissioned Géricault to paint portraits of the insane.

The French connection

Morison was greatly influenced by French psychiatry. He met the leading clinicians, visited asylums in Paris and in other parts of France. He read the major works and translated some of them into English. He was particularly influenced by the French work on physiognomy.

Jean-Étienne-Dominique Esquirol (1772–1840) was the founder of the French tradition of the nosology of mental disorders.[51–53] He studied with Philippe Pinel[54] at the Salpêtrière and went on to edit Pinel's *La Médecine Clinique* (1801). He joined the medical staff of the Salpêtrière in 1811, where he stayed until 1825. Esquirol was one of the first to refine the classification of mental disorders with such terms as 'monomania' and 'lypemania'. In 1838 he published *Des Maladies Mentales*, which contained portraits of patients from the Salpêtrière. In the opinion of Prichard, Esquirol was the only writer who had made a significant contribution to the study of mental disease in the early 19th century.[33]

Esquirol's interest in the appearance of the insane and his example of commissioning portraits of patients inspired Morison's interest in physiognomy. Morison visited Esquirol several times and his diary entries give a picture of contact with the eminent French clinician and the Salpêtrière. In his entry of 22 March 1818, Morison recorded his first meeting [sic]:

> Went to Dr. Esquirols and from thence to the Salpetriere where I found him between 30 & 40 I think, an intelligent man who for 10 years has paid great attention to the subject of Madness and has written and collected much upon the subject of Hospitals & private receptacles for the Insane. – he has nearly 200 plaster of paris Casts of the faces of Insane persons and 60 skulls.[55]

Morison accompanied Esquirol as he saw patients at the Salpêtrière. Later he visited Esquirol's private asylum, the Charenton.

On 29 May 1825 Morison again went to Paris.[56] He gave Esquirol his *Outlines* and they discussed whether the number of lunatics was increasing. The next day he heard Esquirol lecture on delirium and monomania and went round the wards of the Salpêtrière.[57] On 2 June he recorded seeing a deluded patient and the way the medical staff at the Salpêtrière tried to persuade her of the falsity of her beliefs:

> …[one woman] supposing animals within her preceded by having worms once supposed a woman in her head – a crucial incision made & piece of one shown to her. Had but temporary effect…[58]

The same day he mentioned, 'Dr Esquirol gives me leave to take copies of his casts. Am to pay Artist 25 fr, for heads + 12 ½ fr. for masks and faces'.[59] On 4 June he records Esquirol telling him that 'his masks of the insane were taken to discover if there was any connections between the fixed Physiognomy of the insane & their insanity'.[60] On 7 June he arranged for Esquirol's lecture notes to be copied.[61] The next day he obtained permission from Esquirol to copy his figures of the insane and spoke to the artist, Théodore Susemichl, to do them at a cost of 6 francs for each head.[62] He subsequently fell out with Susemichl over costs. Esquirol gave him a 'list of the articles contributed by him to the Dictionaire des Science & Medicales'.[63]

Morison translated the works of the French alienists, Philippe Pinel (1745–1826) and Étienne-Jean Georget (1795–1828).[64] Georget was a student of Esquirol and in 1820 he published *On Madness*. Georget emphasised the fleeting nature of the facial expressions of the insane. He asked his friend, the artist, Théodore Géricault to paint the portraits of 10 patients at the Salpêtrière as potential illustrations. Both men died before the project was completed and the work was never published. According to Gilman:

> With Georget and Gericault the individuation of the insane, the reduction of the perception of the psychopathologies to the observation of individual patients, reached a new level. The concept of a portrait of a single insane individual embodies the new status of the insane as citizens within the state not outcasts from it. (p. 90)[4]

How aware Morison was of this project is difficult to say, though he, too, was to emphasise the transitory nature of the physiognomy of the insane. Likewise, his work also emphasised the individuality of the patient.

Morison records that he obtained a copy of 'Bayle on Mental Disease'.[65] Antoine Laurent Jessé Bayle (1799–1858) was the first to give a description of what was to be called general paralysis of the insane.[66] Morison also read Fodéré.[67] François-Emmanuel Fodéré (1764–1835) was a physician of the 18th century mould: he held vitalist principles and his views on insanity were an off-shoot from his medico-legal preoccupations (pp. 620–1).[66]

Later Morison was to meet Jean-Pierre Falret in London.[68] Falret (1794–1870), who worked at the Salpêtrière and had been inspired by Pinel and Esquirol, originated the diagnosis along with Jules Baillarger of circular insanity or manic-depressive illness.[66]

The lecturer

In his diary entry for 7 January 1823, Morison recorded:

> …Mrs Coutts said she had made up her mind that she herself would establish a fund for the professorship to perpetuate the memory of so excellent a man as the late Mr Coutts… in the city of Edinburgh where he was born and educated, consisting of one hundred guineas per annum in Quarterly payments to Scotchmen.[69]

Morison drew on all he had learnt in France when he began his course of lectures on mental diseases. In his diaries we see Morison preparing for his lectures. His diary entry of 15 February 1823 he records:

> Called on Mr Putnam - some rules for Lecturing –
>
> Speak in your natural way but as if you wish to be heard in the next rooms.
>
> Address yourself to the most remote part of your Audience.

> Turn occasionally with gentle movements to different parts of your audience. This calls attention.
>
> Learn by heart as much as you can.
>
> Compose your own periods to write them down after speaking them out.[70]

He also read 'Campbell's Philosophy of Rhetoric and Walker's Grammar of Elocution'.[71]

On 21 November 1823 Morison began his first lectures.[72] By 24 November he was writing to Mrs Coutts, 'I have broken the ice & have already delivered 2 Lectures on Diseases of the Mind… I am gaining confidence as I proceed'.[73] Morison seems to have reached the conclusion, or had been advised, that his lectures would be better received if he had some visual material. On 7 November 1825, he records: 'gave Lecture on Brain illustrated by Casts and Drawings'.[74] Two weeks later he records giving a lecture with '4 drawings shown'.[75]

The portraits

Over the coming years Morison commissioned portraits of hundreds of asylum patients. The originals, of which there are 249, are kept at the Royal College of Physicians in Edinburgh and were catalogued by the archivist, Helen Smailes.[76] According to Smailes, the drawings of asylum patients in the collection cover a period of over 20 years and were originally commissioned as illustrations to Morison's lectures on physiognomy. The earliest are probably the copies of drawings commissioned at the Salpêtrière asylum by Esquirol. Morison began commissioning portraits of the insane in 1826. The first draughtsman was the fashionable miniaturist, Francois Rochard (1798–1858). In 1835 when Morison was appointed visiting physician to the Bethlem Hospital, he resumed his commissions to Rochard. From 1836 he also commissioned the young Scottish portrait and genre painter Alexander Johnston (1815–91). A selection of Johnston's drawings, along with some by Rochard and copies from Esquirol, formed the basis of *The Physiognomy of Mental Diseases* (1838). About 1841, Morison began to employ Charles Gow, an obscure Scottish portraitist, who continued to work for Morison throughout the 1840s, and many of whose portrait studies were reproduced in the *Outlines of Lectures* of 1848. Morison accompanied the artists to the asylum and had dinner with them afterwards. Morison and his artists visited the Bethlem, Hanwell, Hoxton and Surrey County asylums. His diary frequently records that the artist would 'take' a patient that Morison had selected.

This procedure has important implications for the creation of the image. As James[48] has observed, 'Artists were "in the room". They had their own clinical gazes. They partly determined the psychodynamics of looking and being looked at'. Artists brought their own perspective to the portrait, which, in turn, was influenced by the reactions and demeanour of the sitter patient. Likewise, the patient

Figure 1 Susan Distant. C Gow. 1841. 'Mania/Negress/ succeeded by Dementia and epilepsy'. Surrey Lunatic Asylum. Journal, 10 Sept, 1841. DEP/MOR/4/167

Figure 2 Unidentified male. Rochard. Dementia after Mania/St Lukes. DEP/MOR/4/163

responded to the particular circumstances of the portrait. As a clinician, Morison was both a viewer and a producer of art. Thus, the final image is a result of all these factors. The question as to what extent the patient was 'posed' does not have a simple answer. Morison was influenced by his medical background and his knowledge of art, while the portraitists had their own artistic training and influences. Most obviously they were able to draw on the centuries-old Christian tradition in Western Art of portraying suffering and on previous artistic representations of the mad, but there was also the portrait genre itself. The patient brought something of themselves to the sitting, albeit constrained and distorted by their lowly position in the hierarchy as asylum inmate.

Morison's diaries detail how he built up his collection of patient portraits. They show him visiting asylums with his commissioned artists and selecting patients for portraits. We see him in discussion with lithographers and publishers, haggling over costs. We see him placing advertisements in journals and newspapers for the published work and we see him giving his book to colleagues and eminent people in his efforts to promote it. In addition, Morison was occasionally sent portraits of interesting patients, for example the portrait of an Aberdeen inmate said to be suffering from 'nymphomania'.

Morison's first recorded visit to an asylum for the purpose of patient portraiture was on the 22 February 1826. He writes in his diary, 'Visited Bedlam… looked over a number of cases in order to get drawings of some of them'.[77] On the 24 February, he writes, 'Took Mr Rochard to St Lukes', and the next day, 'Mr Rochard drew two heads of insane for me'.[78] However, Morison soon encountered problems in getting access to some asylums. On the 27 February he records, 'had letter saying I could not get any more heads taken at St Luke's on account of disturbing the patients'.[79]

13 March 1826 finds him visiting Hoxton Asylum and having three portraits undertaken.[80] On 6 June, now back in Edinburgh, he records, 'Got some drawings of the Brain prepared for tomorrows Lecture'.[81] He was also preparing to have the patient portraits featured in his book, *Outlines of Lectures on Mental Diseases*. On 12 July he notes, 'Called on Mr Miller engraver about plates for my outlines – he asks about 23 guineas for 15 besides the paper'.[82] A little later he approached William Home Lizars, who was to become his chosen engraver, 'Spoke to Lizars about my plates + got an estimate'.[83] Lizars did popular engravings for the naturalist, John James Audubon, and for plates in some of Sir Walter Scott's novels. Lizars' brother, John, was a pioneering surgeon in Edinburgh and was a close friend of Morison's.

Morison's project was evidently provoking interest amongst his medical colleagues. He writes:

> Met Dr Poole who said he + others thought of publishing 3 or 4 Quarto volumes of Natural Physiognomy and that his son had told him that I had some good drawings

Figure 3 Unidentified female. Rochard. DEP/MOR/4/79

Figure 4 Caulfield. Johnston. 1837. Bethlem/Mania. DEP/MOR/4/47

characteristic of mental disease. I told him I had + and was just publishing them showing him the first head finished by Lizars.[84]

He arranged for his book to be advertised in *The Scotsman* and *The Courant*.[85] In May 1828 we see him in dispute with a Mr Nimmo, 'Refused to pay Nimmo £3 for the Lithographic plates the charge being so much more than the London charge'.[86]

Judging from the diaries, there seems to have been a lull in the commissioning of portraits until 1835 when Morison was appointed visiting physician to Bethlem and he once again approached Rochard. On 5 November 1835 he records, 'Took Mr Rochard to Bethlem who took likenesses of 3 women & 1 man in 3 hours'.[87] On the 26 November he notes, 'Visited Bethlem, copied cases – Mr Rochard drunk tea and brought drawings made. A Maxwell & Mr Lawsons likeness – paid him £2.2/- owe him 10/6'.[88] In the following years he records visiting asylums with Johnson and later Gow, whom he commissioned to draw the unfortunate patient, Hoddinot, who placed his head on a fire.[89]

Historical and cultural aspects of portraiture

Historians have examined how the mad have been represented in visual and literary culture over the centuries. Andrews[90] has described the early modern period when the mad were portrayed with dishevelled hair, wild eyes, unkempt appearance and often in a state of nakedness. Houston[46] has demonstrated that since at least the beginning of the 18th century, artists employed the pictorial trope of long, untidy hair to depict madness. Showalter[6] has contended that from the end of the 18th century onwards, the symbolic gender of the insane person shifted from male to female. She identifies three major Romantic images of female insanity: the suicidal Ophelia; the sentimental Crazy Jane; and the violent Lucia. Showalter goes on to suggest that many of the depictions of women in Morison's *Physiognomy* were influenced by the image of Crazy Jane, and as a consequence, they were rendered as sweet, passive and vulnerable females. Busfield[91] has argued that Showalter paints a very unbalanced picture and that images of male insanity were also prominent in the 19th century. She identifies three main categories: the mad genius; the criminal lunatic; and that of masturbatory insanity.

These cultural stereotypes of madness undoubtedly influenced medical illustrations of the mentally ill. However, there is a danger that such an approach neglects the nature of mental disturbance itself, what Busfield[91] has called the 'ontological reality' of madness, and implies that the depiction of the insane in medical works is entirely a creative and cultural construct. As clinicians and sufferers well know, mental disturbance can strongly affect one's demeanour, appearance and behaviour. Dishevelled hair, staring eyes, avoidance of gaze, loss of weight, pallor, hunched posture,

Figure 5 Sarah Anne Larder. C Gow. 1847. Bethlem/mania/ Cataleptic. DEP/MOR/4/242

Figure 6 Unidentified male. Artist unknown. Dementia/Hoxton. DEP/MOR/4/166

agitation or lack of spontaneity can all be products of loss of reason or emotional anguish. Could it be that Morison's portraitists, despite being aware of such stereotypes and being influenced by them, were also professional artists who were able to observe their sitters and record what they saw, albeit through the lens of their particular culture? Consideration of the actual physical and emotional presence of the patient is missing from a purely aesthetic perspective. However, the situation is even more complicated than this. As Oyebode[92] has observed in his study of the portrayal of madness in the theatre, there is likely to be an interplay between artistic and clinical representations of insanity, so that patients may take on some of the accepted theatrical tropes of mental derangement when they become ill. Oyebode asks: do the mentally ill come to know what is 'expected' of them when in a disturbed state and 'perform' in the role of a mad person? Likewise, Pearl[7] has argued that the Victorian theatre was a location were actors and audience interacted to experiment with and develop the physiognomies of different human types, including that of the mad.

Portraits had originally been of the wealthy and powerful, but in the 19th century, artists began to paint the criminal, the insane and individuals from other countries. As a consequence, West[14] argues, portraitists were less constrained by the conventions of gesture and expression they had to adopt when painting the more privileged. While this could lead to powerful work, as in the case of Géricault's portraits of the insane, it could also be used to demonstrate the supposed superiority of the higher ranks of society or reveal their prejudices.

In her history of the portrait, West[14] discusses the concept of 'the duality of likeness and type'. The artist not only attempts to capture the likeness of the sitter but also stresses the typical, conventional or ideal aspects through pose, expression or props. This dichotomy applies to Morison's work, where the artist was trying to capture the likeness of the individual patient, yet, at the same time, illustrate the supposed 'type' of mental condition the patient suffered from. The artist used props such as depicting patients in restraint or with the bars of the institution visible in the background.

Woodall[93] has critiqued the dualist assumptions in the portraiture of physiognomy, whereby the 'external' likeness of person is claimed to reveal their 'internal' identity. She contends that when such an approach is used to portray marginalised groups, such as Jews, the diseased or the insane, the individual is judged only on their outward experience and are not granted a unique inner life.

Interesting and unpublished portraits

Before considering *The Physiognomy*, it is worth looking at the portraits that did not feature in the book. This will also serve to illustrate the nature of the original art work. There are, in fact, many more drawings in the collection than

Figure 7 Original drawing on left, etching on right. Unidentified female. Rochard. Dementia. St Lukes. Physiog. 1840. Plate LXXIII. Engraved by WH Lizars. DEP/MOR/4/193

Figure 8 Original drawing on left, lithograph on right. Phillippa May. A Johnston. 1838. Bethlem CD. Murder. Physiog. Plate L11. DEP/ MOR/4/136

made it to Morison's published works. It is not clear how the published work was selected. Certainly there are very many interesting unpublished drawings. They tend to have a greater range of poses than the textbook reproductions and to show a greater sense of movement. With these unpublished drawings, we only have information about the patient's name, age, diagnosis and asylum, which was written on the back of the picture. With the textbook we have an accompanying text, which provides more clinical and personal details.

The portraits are all intriguing but some have distinctive qualities. Figure 1 is the only black patient in the series. Figure 2 is a powerful study of a man who appears to have ptosis of the right eye. Figure 3 shows a female patient with an intense rather quizzical look. Figure 4 is a sensitively drawn study of a young woman, seemingly lost in thought. Figure 5 is a lively portrait capturing the posture of the patient. Figure 6 is an atypical but, nevertheless, striking picture. It is the only portrait where the patient is naked. This picture seems to refer back to earlier depictions of madness, such as that by Sir Charles Bell, who portrayed the madman bereft of any clothing. There is no attribution for the portrait but, judging by the style, it is likely that it was not executed by any of Morison's regular group of artists, and may have found its way into the collection of drawings by chance. It certainly was not reproduced in the book and would have looked out of place alongside the other fully clothed patient portraits. As Andrews[90] has shown, in an earlier period from around 1650 to 1850, the depiction of the nakedness was commonly used to indicate the madness of the subject. By Morison's time, insane figures were usually portrayed fully clothed.

The Physiognomy of Mental Diseases

The origins of *The Physiognomy of Mental Diseases* lie with Morison's earlier publications. In the second edition of *Outlines of Lectures on Mental Diseases*, Morison included some portraits of patients. These were copies of 13 of Esquirol's illustrations. In the book Morison observed:

Masks of the insane have… been taken, to ascertain whether or not there exists any connection between what is termed the fixed physiognomy, or form and position of the bones of the face, and the different species of insanity. (pp. 125–6)[94]

He then went on to emphasise his approach:

The following series of Plates is intended to convey an idea of the moveable physiognomy in certain species of mental disease. (pp. 125–6)

The *changing* nature of facial expression was a key concern of Morison and his subsequent commissioned portraits would attempt to illustrate this.

In the third edition of 1829, for the first time, Morison[95] featured portraits that he had commissioned of his own patients rather than relying on copies of Esquirol's. The book included 17 illustrations and departed from the portraiture found in Esquirol. The use of lithography, which had been developed in the late 18th century, permitted a more impressionistic sense of the mobility of the features than was possible in the earlier engravings, with their sharp, clearly delineated features.

Gilman[4] writes:

The illustrations are strikingly similar to those of Esquirol for *The Dictionary of Medical Sciences*. The emphasis, however, is more on moveable facial features of the patient. Indeed the bodies of the patients tend to vanish in the illustrations. (p. 92)

Some years later Morison had a sufficient number of portraits to make a book. In 1838 he published *The Physiognomy of Mental Diseases*. It contained 98 plates. In 1840 it was published with an Appendix containing another eight plates. Of the 98 plates, 44 were of males. Showalter's[6] contention that the female replaced the male as the iconic image of madness in the 19th century does not hold for Morison's book. Busfield[91] has convincingly refuted Showalter's

argument and pointed out that images of male insanity continued alongside those of women. In any case the proportion of male to female asylum patients in Britain during this period was roughly equal.[91] In 1843 Morison brought out a second edition. In 1848, in the final edition of *Outlines of Lectures of Mental Diseases*, Morison included 22 plates of portraits mainly completed in the early 1840s.

In the 'Prefatory Observations' to *The Physiognomy* (pp. 1–3), Morison stated:

> The object originally in view, in collecting the following delineations was to illustrate Lectures which I commenced in 1823, and of which the outlines of three editions have been published, the favourable notice taken of those has induced me to extend the collection…[2]

Morison set out his credo:

> There is no class of diseases in which the study of Physiognomy is so necessary as that of Mental diseases. It not only enables us to distinguish the characteristic features of different varieties, but it gives us warning of the approach of the diseases in those in whom there is a predisposition to it, as well as confirms our opinion of convalescence in those in whom it is subsiding.
>
> The appearance of the face is intimately connected with and dependent upon the state of mind; the repetition of the same ideas and emotions; and the consequent repetition of the same movements of the muscles of the eyes and of the face give a peculiar expression, which, in the insane state, is a combination of wildness, abstraction, or vacancy, and of those ideas and emotions characterising different varieties of mental disorder, as pride, anger, suspicion, mirth, love, fear, grief, &c [sic].

Morison evidently thought that mental disease could leave its imprint on the face and this was done through the repeated movements of the facial muscles. He also used the preface to voice his objections to phrenology:

> If, however, in examining the brains, after death, of those who have laboured under only one variety of partial insanity, diseased appearances, such as those of inflammation or its consequences, be found, they are very seldom confined to one convolution but are, more or less, diffused over a number, and are more particularly observed in the membranes covering them…

Physiognomy, then, rather than phrenology would be his favoured approach.

Gilman[4] writes of Morison's *Physiognomy*:

> Morison's theoretical perspective had evidently not changed since the 1826 edition of his *Outlines*, for he prefixed his atlas with the same introductory comments. However the nature of the portraits had undergone a substantial alteration. They still concentrate on the expression, but are even more expressionistic. A comparison with the original drawings … with the printed version shows how the lithographer copied the originals in such a manner as to emphasize the fleeting aspect of the expression. (p. 95)

The Physiognomy of Mental Diseases contains reproductions of the original drawings, either in the form of engravings or lithographs. The drawings were made into reproductions by William Home Lizars and later Carl Christian Bohme.

The original drawings are naturally the most compelling in terms of intimacy and immediacy. They also convey the sense of the artist having a relation with the sitter. The artist will have needed to establish some kind of relation with the patient to ensure he or she cooperated and sat long enough for the portrait to be completed. The original drawings, which were done with conté and other crayon, are also lightly coloured in places, whereas the textbook portraits are in black and white (Figures 7 and 8).

Nevertheless, the textbook illustrations possess their own merits. The lithographs to some degree capture the fleeting nature of the drawings, while the etchings provide clear, firm lines, which can make for a striking image. Of course, the pictures in the book are framed by the fact they are in a textbook of mental diseases. They also have an accompanying text so that the subject becomes more of an exhibit. They are meant to illustrate a particular mental condition. The text often contains brief biographical and clinical details and this creates a tension in interpreting the portrait: should the picture be viewed as a medical case displaying the signs and symptoms of mental disease, or that of an individual? The portraits tend to undermine the first interpretation, as the patients are not rendered as stereotyped madman and madwomen, but rather as individuals.

In Part 2, we will consider the patient portraits in more detail. ⓘ

References

1 Morison A. *The Physiognomy of Mental Diseases*. London: Longman & Co; 1838.

2 Morison A. *The Physiognomy of Mental Diseases*. London: Longman & Co; 1840.

3 Morison A. *The Physiognomy of Mental Diseases*. 2nd ed. London: Longman & Co; 1843.

4 Gilman SL. *Seeing the Insane*. London and Lincoln: University of Nebraska Press; 1996. (Originally published by Wiley; 1982).

5 Browne J. Darwin and the Face of Madness. In: Bynum WF, Porter R, Shepherd M, editors. *The Anatomy of Madness, Vol 1*. London: Tavistock Publications; 1985. pp. 151–65.

6 Showalter E. *The Female Malady. Women, Madness and English Culture, 1830-1980*. London: Virago Press; 1987. (Originally published by Pantheon Books; 1985).

7 Pearl S. *About Faces. Physiognomy in Nineteenth-Century Britain*. Cambridge and London: Harvard University Press; 2010.

8 Scull A, MacKenzie C, Hervey N. Treating the Mad outside Asylum Walls: Sir Alexander Morison (1779-1886). In: Scull A, MacKenzie C, Hervey N, editors. *Masters of Bedlam. The Transformation of the Mad-Doctoring Trade*. Princeton: Princeton University Press; 1996. pp. 23–160.

9 Beveridge A. Madness in Victorian Edinburgh: a study of patients admitted to the Royal Edinburgh Asylum under Thomas Clouston, 1873-1908. *Hist Psychiatry* 1995; 6: Part 1, 21–54; Part 2, 133–56.

10 Beveridge A. Voices of the mad: patients' letters from the Royal Edinburgh Asylum, 1873-1908. Psychol Med 1997; 27: 899–908.

11 Doody G, Beveridge A, Johnstone EC. Poor and mad. a study of admissions to the Fife & Kinross Asylum. *Psychol Med* 1996; 26: 887–97.

12 Turner TH. A diagnostic analysis of the Casebooks of Ticehurst House Asylum, 1845-1890. *Psychol Med Monogr Suppl* 1992; 21: 1–70.

13 Carlson ET. Introduction. In: Gilman SL, editor. *The Face of Madness*. Hugh W. Diamond and the Origin of Psychiatric Photography. Brattleboro, Vermont: Echo Point Books & Media; 2014. pp. xi–xiv. (Originally published 1976).

14 West S. *Portraiture*. Oxford: Oxford University Press; 2004.

15 Jordanova L. Portraits, patients and practitioners. *Med Humanit* 2013; 39: 2–3.

16 Barnet R. *The Sick Rose: Disease and the Art of Medical Illustration*. London: Thames & Hudson; 2014.

17 Hockney D, Gayford M. *A History of Pictures: From the Cave to the Computer Screen*. London: Thames & Hudson; 2016.

18 Royal College of Physicians of Edinburgh (RCPE): Biography of Sir Alexander Morison by Alexander Blackhall-Morison c. 1920–1921. DEP/MAB/3/2/8.

19 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/4: Smailes H. Catalogue of Portrait drawings from an album presented to the Royal College of Physicians of Edinburgh in 1862 by Sir Alexander Morison (1779–1866); 1981.

20 Beveridge A. On the origins of psychiatric thought: the contribution of Edinburgh, 1730-1850. In: Freeman H & Berrios GE, editors. *150 Years of British Psychiatry*. Volume II. London: Athlone; 1996. pp. 339–66.

21 Doyle D. Notable Fellows. Sir Alexander Morison (1779-1886). *J R Coll Physicians Edinb* 2011; 41: 378.

22 Crichton A. *An Enquiry into the Nature and Origin of Mental Derangement, Comprehending a Concise System of the Physiology and Pathology of the Human Mind*. London: Cadell & Davies; 1798.

23 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 4 June 1825.

24 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1. Diaries of Sir Alexander Morison, 1807–1862.

25 Haslam J. *Observations on Insanity*. London: Rivington; 1798.

26 Haslam J. *Observations on Madness and Melancholy*. London: J Callow; 1809.

27 Hunter R, Macalpine I. *Three Hundred Years of Psychiatry 1535-1860*. London: Oxford University Press; 1963.

28 Scull A, MacKenzie C, Hervey N. *Masters of Bedlam. The Transformation of the Mad-Doctoring Trade*. Princeton: Princeton University Press; 1996.

29 Morison A. *Outlines of Mental Diseases*. London: Longman and Company; 1825.

30 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 12 May 1825.

31 Andrews J, Briggs, A, Porter R et al. *The History of Bethlem*. London and New York: Routledge; 1997.

32 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 23 February 1825.

33 Prichard JC. A *Treatise on Insanity and Other Disorders Affecting the Mind*. London: Sherwood, Gilbert and Piper; 1835.

34 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 26 September 1823.

35 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 13 & 14 January 1825.

36 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/13. 31 October 1827.

37 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/13. 17 September 1828.

38 Burrows GM. *Commentaries on the Causes, Forms, Symptoms, and Treatment, Moral and Medical of Insanity*. London: Thomas and George Underwood; 1828.

39 Hervey N. *Dr Alexander Morison (1779-1866) and the interest in art he shared with patient Richard Dadd*. Paper delivered to the Museum of the Mind; 6 February 2016.

40 Tromans N. Richard Dadd. *The Artist and the Asylum*. London: Tate Publishing; 2011.

41 Huddleton S, Russell GA. Richard Dadd: the patient, the artist, and the 'face of madness'. *J Hist Neurosci* 2015; 24: 213–28.

42 Foucault M. *The Birth of the Clinic: An Archaeology of Medical Perception*. (trans. A Sheridan). New York: Vintage Books; 1973.

43 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/19. 21 November 1844.

44 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 23 June 1825.

45 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 27 June 1825.

46 Houston R. The face of madness in eighteenth and early nineteenth century Scotland. *Eighteenth Century Life* 2003; 27: 49–66.

47 James DH. Portraits of John Hunter's patients. *Med Humanit* 2013; 39: 11–9.

48 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 9 January 1823.

49 Bell C. *Essays on the Anatomy and Philosophy of Expression*. 2nd ed. London: John Murray; 1824.

50 Macmillan D. French Art and the Scottish Enlightenment. In: Dawson D, Morere P. *Scotland and France in the Enlightenment*. Lewisburg: Bucknell University Press; 2004. p. 128–58.

51 Goldstein J. *Console and Classify. The French Psychiatric Profession in the Nineteenth Century*. Cambridge: Cambridge University Press; 1987.

52 Murat L. *The Man Who Thought He Was Napoleon*. Chicago: University of Chicago Press; 2014.

53 Pinel P. *Medico-Philosophical Treatise on Mental Alienation (1809)*. Translated by Hickish J, Healy D, Charland LC. Chichester: Wiley-Blackwell; 2008.

54 Shorter E. *A Historical Dictionary of Psychiatry*. Oxford: Oxford University Press; 2005.

55 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/6. 22 March 1818.

56 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 29 May 1825.

57 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 30 May 1825.

58 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 2 June 1825.

59 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 2 June 1825.

60 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 4 June 1825.

61 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 7 June 1825.

62 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 8 June 1825.

63 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 12 June 1825.

64 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 20 September 1823.

65 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 9 June 1825.

66 Berrios G, Porter R. *A History of Clinical Psychiatry. The Origin and History of Psychiatric Disorders.* London: The Athlone Press; 1995.

67 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 22 January 1825.

68 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/16. 15 July 1835.

69 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 7 January 1823.

70 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 15 February 1823.

71 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 23 February 1823.

72 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/10. 21 November 1823.

73 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 24 November 1823.

74 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 7 November 1825.

75 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 24 November 1825.

76 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/4: Smailes H. Catalogue of Portrait drawings from an album presented to the Royal college of Physicians of Edinburgh in 1862 by Sir Alexander Morison (1779-1866); 1981.

77 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 22 February 1826.

78 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 24 & 25 February 1826.

79 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 27 February 1826.

80 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 13 March 1826.

81 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 6 June 1826.

82 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 12 July 1826.

83 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 19 July 1826.

84 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/11. 22 July 1826.

85 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/12. 1 September 1826.

86 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/13. 7 May 1828.

87 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/16. 5 November 1835.

88 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/16. 26 November 1835.

89 Royal College of Physicians of Edinburgh (RCPE): DEP/MOR/1/18. 24 September 1841.

90 Andrews J. The (un)dress of the mad poor in England, c. 1650-1850. *Hist Psychiat* 2007; 18: Part 1, 5–24; Part 2, 131–156.

91 Busfield J. The Female Malady? Men, women and madness in nineteenth century Britain. *Sociology* 1994; 28: 259–77.

92 Oyebode F. *Madness at the Theatre.* London: RCPsych Publications; 2012.

93 Woodall J. Introduction: facing the subject. In Woodhall J, editor. *Portraiture. Facing the subject.* Manchester: Manchester University Press; 1997. p. 1–25.

94 Morison A. *Outlines of Mental Diseases.* 2nd ed. London: Longman and Company; 1826.

95 Morison A. *Outlines of Mental Diseases.* 3rd ed. London: Longman and Company; 1829.