John Monro was not, I suspect, an interesting man. He was the solid representative of his profession, and of his dynasty, during a substantial portion of the eighteenth century, the first name to be thought of in treating the mad, the physician to the first hospital to be thought of in housing the mad, as his father had been before him, and as his son was to be after him, and his grandson after that. But he was not in himself, apparently, remarkable, either for his exceptional energies, or for introducing changes in professional practices, or for being a terror to his patients or an outrageous profiteer. He seems to have had no more than standard – for his day – political views of a Tory cast, and to have conducted himself in his private and domestic life in a manner acceptable to his family, his friends and to society at large. His father, James, had been censored in print by one of his own patients, Alexander Cruden, as a Jacobite and an adulterer, but not John, who also treated Cruden and was also portrayed by him, generally favourably, in print. John was what he should be, no more and no less.

If John is interesting, it is rather as a pane of glass is interesting, more for what is seen through it than for itself. John Monro’s career – and he was physician at Bethlem between the death of his father in 1752 and his own effective retirement in 1787 – coincided with a remarkable period in mad-doctoring: the increasing professionalisation of the ‘mad-business’, the slow progress towards legislation in housing the mad, the beginnings of innovations in treating mad patients and the emergence therefrom of the management movement, and above all changes in social attitudes towards the insane, all of which substantially realigned the pressures and assumptions under which the mad-doctor worked. Of these, John Monro certainly participated in the first, as did most of his prominent contemporaries. He had financial connections with several private London madhouses, up to the time when he became licensee of Brooke House in Chelsea, and conspicuously shared in the lucrative proceeds of this business. With regard to the other great shifts of his time, however, he appears to have been either neutral, a recipient of whatever legal or social changes were in progress, or else a passive impediment, as with therapeutic innovation. After decades of stagnation, something was happening with the mad, but it was not because of Monro.

Here is the context for Jonathan Andrews’ and Andrew Scull’s Undertaker of the Mind. Having discovered John Monro’s private case book for 1766, which is published as part of a separate volume, Customers and Patrons of the Mad-Trade: The Management of Lunacy in Eighteenth-Century London.
(Berkeley and Los Angeles: University of California Press, 2003), in this same series, they decided to draw on this material for a second volume, describing not only Monro’s own practice but also setting him within this rich period. Monro in his own right does not sustain a second volume so much of the substance of the book depends on the rehearsal of that wider view. The preface makes the case. Monro’s career ‘played itself out on a larger stage, and attending to his activities in the public sphere permitted us to develop a broader and more wide-ranging perspective on Unreason and those who undertook to combat it in Augustan England’. (p. xii) Monro is therefore to be assessed ‘as one among a number of emerging specialist practitioners of the mad-trade, closely reading his career through the broader lens of contemporary medical practice and culture’. (p. xiii) That lens is constituted by ‘an astonishing array of sources’ (p. xii), and includes diaries, correspondence, poetry and painting, cartoons and ballads, the daily press, archives, wills, treatises and trial papers. But at the same time, and not sitting quite easily, there is a thesis: ‘that other historians had simultaneously underestimated and misconstrued Monro’s importance in the development of eighteenth-century mad-doctoring’. (p. xi) So we have twin intentions, both to see Monro as himself a case study within his time, and also to correct our assessment of him.

The case against Monro, it has to be said, is weighty and Andrews and Scull have an uphill task if they genuinely want us to accept that Monro has been ‘underestimated and misconstrued’ by historians. They make that case effectively themselves. Apart from profiting largely by his profession, Monro seems to have accomplished nothing exceptional apart from having the career he was likely to have had. Over several portions of the opening chapter, ‘John Monro: The Making of a Mad Doctor’, the inertia at Bethlem, and Monro’s share in it, is detailed. There is ‘the singularly unadventurous approach toward the treatment of patients that he and other medical officers continued to practise there for decades’, with the regular round of seasonally administered ‘purges, vomits, and bleeding’ (p. 28); there is the lack of interest in medical change or in activities intended to develop knowledge of the insane, for example post-mortem investigations, where Monro ‘failed to take advantage’ of available facilities, unlike, for example, Bryan Crowther and John Haslam (p. 34); there is his apparent passivity with regard to the now appalling practice of displaying ‘madness as spectacle’, with ‘scant evidence’ during his long tenure as physician ‘that he himself exerted, or attempted to exert, much influence over the practice’ (p. 24); and there is the retrospective cloud that the 1815–6 Parliamentary Enquiry’s conclusions cast on his entire Bethlem career:

- gross negligence in the care and management of patients, and heedlessness of the conditions in which they were housed; decided medical apathy toward therapeutic innovation; excessive restraint employed by design and default, and as a means of coping with under-staffing; and inadequate medical supervision of dishonest, and often brutal, ancillary staff - and it goes without saying that these practices had very deep roots that date back to John Monro’s time and to that of his own father, James. (pp. 40–1)

To ‘dishonest’ and ‘brutal’ we might add sexually exploitative, according to the charges against a keeper of the name of ‘King’ that were raised during the Committee’s questioning of John Haslam and which concerned the pregnancy of a female patient. While Haslam hedged, he did concede that appointing male keepers to the service of female patients was established practice when he took up his own post in 1795, another stigma of the Monro legacy. Strong charges, especially for one whose ‘importance’, it is claimed, has been ‘underestimated and misconstrued’ by historians of madness, and when, as it emerges elsewhere, those historians include ‘scholars ranged across an extraordinarily wide ideological spectrum’ (p. 66): Ida Macalpine and Richard Hunter in the 1950s and 1960s, Denis Leigh in 1961, Klaus Doerner, Dora Weiner, George Rousseau and Stanley Jackson in the 1980s, Roy Porter and, singled out as ‘capping the concensus’, myself (pp. 66–7). Strong support.

The defence, certainly in this first chapter, is not convincing and at best piecemeal. Monro was on, and might have been present at, Bethlem committees where resolutions were taken towards improving various aspects of inmates’ lives. (pp. 25–6, 35, 37–8) He expressed himself as firmly opposed to the practice of ‘blistering’ (p. 28). The amount of time he actually gave to his (underpaid) duties at the hospital (‘just three
times a week and for roughly two or three hours at a time’) was in accordance ‘with the customary model for hospital service’ (p. 18). And he was on a committee that annually rewarded the reforming steward, Henry White, who enlarged the provision of sheets for patients, which, along with other measures, such as ‘more effective provisioning of stoves and fires’, ‘probably still marginally improved patients’ comfort’ despite seeming ‘somewhat minimal’ to modern eyes (p. 37). On Monro’s acquiescence in the continuation of the entry of paying spectators at Bethlem – unlike the new St Luke’s asylum across the road, where the practice was banned from the outset – Andrews and Scull, admitting that such regulations as there were, regarding for example access to nude and semi-nude patients, were regularly flouted, can only speculate, when visiting was restricted after 1770:

Yet perhaps, after all, this may be a misplaced criticism. Impolitic as it may seem to raise the question, one must ask to what extent Bethlem’s patients benefited from the adoption of the new exclusionary policy. For the mob seeking their entertainment and show were only one portion of Bedlam’s visitors. Just how harmful to patients’ interests, on the other hand, were those friends who were barred from the hospital after 1770 because they visited too often (p. 27).

The point here, surely, is not that the mob was a fair price to pay for continued access by friends and relations, but that Bethlem, with or without Monro’s support, got it wrong again.

When Andrews and Scull turn in the second chapter to the Battie-Monro controversy, that angry exchange of pamphlets in 1758 that followed the founding of St Luke’s a few years earlier, then at least there is the written evidence, and the responses of contemporaries to go by to assess the extent to which Monro has been ‘underestimated and misconstrued’. Here, again, the case for Battie is convincingly made. Not only was he a man from a non-medical background whose career was not ‘pre-ordained’ (p. 50) by family, influence and inherited ways of doing things, but he was instrumental in setting out, and in putting into practice, a challenging new agenda for the insane, one which Monro, partly in defence of his father’s reputation, felt obliged to contradict. Whatever the waxing and waning of the bad feeling between the two men, these pamphlets stand as their major battleground. But, as others have pointed out before (to Andrews’ and Scull’s irritation), the battle is simply not equal, or being fought across the same territory. Even Battie’s agenda is in many respects extraordinary to a modern reader, but the crucial thing about it was the attempt to move medical attitudes towards the insane out of the rut in which they had been lodged, owing in part, Battie believed, to the restrictive, secretive and backward-looking attitudes of Bethlem. Monro, on the other hand, presents no medical agenda at all; his pamphlet follows Battie’s in point-by-point refutation and mockery.

The ground on which Monro chooses to enter the lists is family honour:

My own inclination would never have led me to appear in print; but it was thought necessary for me, in my situation, to say something in answer to the undeserved censures, which Dr. Battie has thrown upon my predecessors ( pp. 54, 55)

Rebuttal and sarcasm are appropriate methods for this engagement, which means that the two pamphlets differ stylistically as radically as they differ in medical outlook. Andrews and Scull praise the sarcasm, generously designating it as ‘at times … positively Swiftian’ (p. 58). This would be a matter of literary judgement, of course. Even if one were to concede the point (and one only has to read a page of real Swift to feel the need to demur), it would be unhelpful in our reassessment of ‘Monro’s importance in the development of eighteenth-century mad-doctoring’. Andrews and Scull themselves virtually concede defeat as they close this second chapter. ‘Practically speaking’, they admit, Monro’s

obduracy only went to consolidate retrenchment at Bethlem itself, which implemented barely a single reform in response to the example set at St. Luke’s. Monro and Bethlem’s governors resisted a further twelve years after St. Luke’s foundation before following its example and proscribing the indiscriminate admissions of visitors. Even more tellingly, while Monro clung to
the Bethlem physicianship until his death, his erstwhile rival gracefully resigned his office in 1764 with a view to improving ‘medical Knowledge.’ Medical progress, Battie characteristically remarked in his own resignation letter, could only be hindered by ‘men growing old in confirmed Habits and Opinions’, and failing to make way for ‘some younger Physician’ (pp. 71–2).

By a small irony, an exchange took place in 1997 on these review pages concerning Andrew Scull’s attitude towards biography, an approach, Scull rightly asserted, ‘which is not centrally about good and bad intentions’, the statement being prompted by a review of Masters of Bedlam, written by Jonathan Andrews. (1) Reading the first two chapters of Undertaker of the Mind, one wonders how far this principle has slipped with regard to their treatment of Monro’s relations to Battie. The reassessment of a career is one thing, but the defence of ‘obduracy’ is the stance of champions.

It is not, of course, necessary, and should not be allowed to detract unduly from what is, after all, a rich and rewarding book, not least because of the substantial amount of research that has been conducted over the last twenty years on different aspects of the history of insanity, not least by Andrews and Scull themselves. That research is drawn on, and drawn together, in the four remaining chapters to give, less restricted by the obligation to reconstruct a reputation, a telling highlighted canvas of late eighteenth-century society’s treatment of those it designated as mad. Successive chapters cover madness and religion, with particular focus on the fascinating figure of Alexander Cruden; madness and rank, dealing here with Horace Walpole’s nephew, Lord Orford; the development of the private madhouse; and madness and the law, not least the cases of the murderer Earl Ferrers and the would-be regicide Margaret Nicholson. If Monro’s relation to the main actors in these dramas is often oblique that is as it should be, in taking the ‘broader and more wide-ranging perspective on Unreason’ that was promised at the outset. Regarding the mad, or sometimes mad, Lord Orford, for example, Monro’s own voice is rarely heard. The information we have comes from other sources, not least through the correspondence of the more famous uncle. Walpole’s concerns are, understandably, more centred upon his family’s, and his own, reputation and the well-being of the property, than on the portrayal of John Monro. But that angle, with the mad-doctor (one among several called in) only a single piece in the jigsaw, is itself a telling fact in placing the response to insanity in the eighteenth century. The Walpole, too, who dominates these pages at the expense of Monro, is a slightly different one (to adapt John Perceval’s later, tantalizing, phrase) to the Walpole we encounter elsewhere. Similarly, while the stories of Earl Ferrers, who unsuccessfully claimed the defence of madness when tried for the murder of his steward, and Margaret Nicholson, who was concluded insane while not thinking to claim it for herself after damaging George III’s waistcoat with a kitchen knife, are familiar, they are less so when seen through the lens of mad-doctoring, particularly when that lens includes not only Monro’s traditional practice and his casebook, but the wealth of cultural and medical details the book has brought together. Andrews’ and Scull’s debts here are considerable: to Joel Peter Eigen for his work on insanity defences in the courts; to then-unpublished research by Elizabeth Foyster on the legal position of women, and on the Earl Ferrers case; to Roy Porter, of course, in most places, but particularly with regard to the development of private madhouses; to Akihito Suzuki; and to their own valuable earlier work.

Yet there are some curious omissions in those consulted: Sander Gilman, for example, for discussions of the visual representation of insanity (and a bonus of the book is the generous and revealing illustrations), as well as for his several volumes on the culture of sickness; William Parry-Jones, for his early work on the trade in lunacy; R. A. B. Houston, for detailed discussion of madness and the law, albeit in Scotland; Helen Small, for the change in the cultural representation of female insanity; and Clement Hawes, for religious mania. And while on the subject of omissions, or minor cavils, James Boswell, mentioned several times in the course of the text, appears only once in the index, where he is cited as ‘Thomas’ (there was a Thomas Boswell, but this was James’ younger brother, who changed his name from David: this is not he); and Margaret Nicholson is generally referred to as ‘Nicholson’ or ‘Margaret’ during the account of her offence and examination, but tends to become, a little patronisingly, ‘Meg’ (p. 239) once installed in Bethlem.

That said, and my earlier objections notwithstanding, this book is, not unexpectedly, given the credentials of
its authors, a rewarding and well-conducted account of a fascinating and significant period, painstakingly researched and richly annotated.

Notes

1. Review of *Masters of Bedlam. The Transformation of the Mad-Doctoring Trade* and Andrew Scull’s response [2]. Back to (1)

Other reviews:

[3]

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