



TIMES AND TIDES OF
Tuberculosis

PERCEPTIONS REVEALED IN
LITERATURE, KEATS TO SONTAG

THOMAS M. DANIEL

MEDICAL HISTORY BOOKS BY THOMAS M. DANIEL

Polio

(editor, with Frederick C. Robbins)

Captain of Death: The Story of Tuberculosis

Pioneers of Medicine and Their Impact on Tuberculosis

Drama and Discovery. The Story of Histoplasmosis

(with Gerald L. Baum)

Wade Hampton Frost. Pioneer Epidemiologist.

1880–1938. Up to the Mountain.



JOHN KEATS, 1795-1821
Pencil drawing by Shannon Casey

TIMES AND TIDES OF TUBERCULOSIS

*Perceptions Revealed in Literature,
Keats to Sontag*

Thomas M. Daniel

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Cover photograph by Arthur B. McComb, May 3, 1988.
Abandoned building of the White Haven Sanatorium. The White Haven Sanatorium opened in 1901 and operated until it closed on March 1, 1956. It housed an average of 617 tuberculosis patients annually. It attempted to provide free or low-cost care for tuberculosis victims of limited means.

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For Janet

*Who loves me, helps me, and encourages me.
Without her this book would not have been possible.*

Pray, of what disease did Mr. Badman die? For I now perceive we are come up to his death.

I cannot so properly say that he died of one disease, for there were many that had consented, and laid their heads together, to bring him to his end. He was dropsical, he was consumptive, he was surfeited, was gouty, and, as some say, he had a tang of the foul distemper in his bowels. Yet the captain of all these men of death that came against him to take him away was the consumption, for it was that that brought him down to the grave.

—John Bunyan

The Life and Death of Mr. Badman

Diseases manifest multiple personalities just as do living creatures and social institutions. The various moods which they display in different circumstances and at any given time reflect the dominant aspect of the relationship between the disease process and the life of man in society.

— René and Jean Dubos

The White Plague: Tuberculosis, Man, and Society

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PREFACE

THIS BOOK is about tuberculosis. It is not, however, a text. It says little about the etiology or pathogenesis of tuberculosis, nor the signs and symptoms of the clinical illness. I have written about those and other features of the disease in texts, scientific reviews, and research reports.

This is a book about history. It presents two centuries of the history of tuberculosis. Yet it does not recount the global spread of that disease. Nor does it chronicle tuberculosis from its ancient origins in Africa. I have written about those aspects of the disease in books, chapters, and articles.

This is a book about books. And about poetry and short stories and journals and letters written by authors. It is a book rooted in literature. This book examines attitudes towards and perceptions of tuberculosis. It does so by considering descriptions of tuberculosis and its victims in words written by those affected by the disease. It examines changes in those attitudes over time as reflected in those writings over time.

Tuberculosis was the focal point of my professional career. I witnessed much of the evolution of the drug treatment of tuberculosis. Inevitably, my background and professional experience with the disease have influenced this book in what I hope is a positive fashion.

As I thought about the many richly written descriptions of the disease, I decided to base this work on published literature. There is much to choose from, and I chose works that illustrate the range of views for each of three epochs—no available treatment, sanatorium care, and curative drug therapy.

As I have presented the works of individual authors selected for inclusion in this book, I have tried to set the times and life circumstances of those writers. I have told the stories of their lives briefly. I have told the stories of their encounters with tuberculosis in more detail. I have quoted from their works and their letters to reveal their

attitudes towards tuberculosis. Insight into literature is gained from understanding the circumstances of its creation.

I have read and reread the works quoted in this book. While I have focused on the authors' perceptions of tuberculosis, I have also offered interpretations of their works. Good literature does more than tell a simple story. There are evocative images, metaphors, and symbolisms included that convey ideas and concepts. Thus, I have provided interpretations, and they are solely mine. Although I have consulted the many, usually scholarly works of critics in this regard, I have relied on my personal understanding of what the chosen authors wished to communicate.

This is a carefully researched work. Yet I have tried to avoid pedantry. One does not need to be a phthisiologist (tuberculosis expert) to enjoy this book. One does not need to be a historian nor a literary critic. Tuberculosis affected and continues to affect ordinary people. Ordinary people are and long have been interested in tuberculosis. Ordinary people can gain insights into tuberculosis from the words of talented writers.

ACKNOWLEDGMENTS

“WHERE DID you find those quotes?” asked a friend who had just read an early draft of one of this book’s chapters.

“I read the book,” I replied, somewhat testily.

This work depends upon and derives from published literature. My own personal library contains many of the works cited; I pulled from its shelf my copy of the source of the quotation queried by my friend. Other works came from public and university libraries. I owe much to the libraries and librarians of Case Western Reserve University in Cleveland, Ohio, where I am an emeritus professor of medicine and international health. The Kelvin Smith Library contains a rich trove of classic literature and biographies of noted authors. I spent hours seated at cubicle desks in the Kelvin Smith stacks. Librarians and many work-study students helped me find volumes that seemed in hiding, especially including librarian Janet Klein. I used the copy machines in the library, and I used my faculty card to check out individual volumes.

Many people have been helpful to me in writing this book. I particularly want to thank Roger Allen for ferreting out information about Derek Lindsay; Martha Brandt Pollock for helpful insights into Henry David Thoreau; Ted and Felicia Justin for driving me to Haworth and the Brontë Museum in Yorkshire on two occasions; Hannah Scanlon for comments on the professional tennis world of Alice Marble; Leslie Sowle for insightful comments on the works of the Brontë sisters; and Ned Yost and Tim Marrs for helping in my attempt to sort out the meaning of Mann’s Hofrat.

My younger brother, John, an author, editor, and publisher, gave me much helpful advice as I navigated my route from laboratory bench to word processor.

Above all others, I am grateful to my wife, Janet, who has read and helped edit every page of this book through multiple revisions.

TIMES AND TIDES
OF TUBERCULOSIS

INTRODUCTION

OVER THE course of human history tuberculosis has afflicted and killed hundreds of millions of people. It was carried across the globe by early humans as they migrated from Africa, and evidence of it exists worldwide in early archeological sites. Slowly mounting to reach epidemic proportions in Europe, this flood of disease peaked in the early nineteenth century. We do not have accurate statistics based on case reporting for that era, but 1819, when John Keats developed tuberculosis, is a reasonable choice for a starting point in the narrative, and the one used in this book. Our story begins then. At that time tuberculosis may have been responsible for as many as one in four deaths in Europe. Since then, the tide of this disease has slowly ebbed. Today it is known to most persons in the medically advanced world as a malady that may have shown up in a grandparent or other forebear but is of no current concern.

The history of the great epidemic of tuberculosis can be divided into three time periods. At the time of its peak and during most of the nineteenth century, it was a disease evoking despair. Physicians could offer nostrums relieving some symptoms, but no meaningful solace. With the discovery of the cause of tuberculosis and the openings of sanatoria devoted to its treatment at the end of the nineteenth century, there was some hope for improvement, if not complete recovery. The advent of curative drugs in the mid-twentieth century ushered in an era of cure and expectations of recovery. This era with its expectation of the recovery of health and well-being dates to a series of drug discoveries in the latter half of the twentieth century. They began in 1944, with the discovery of streptomycin and continue to the present.

Tuberculosis remains with us today, however, especially in Sub-Saharan Africa and Southeast Asia. More than a million people die of this disease each year. It is worth recalling its history and the threat that any resurgence would impose.

One can recount the history of tuberculosis in many ways. This book does so in the words of a series of persons who suffered from the disease. They were not ordinary people, however. They were authors whose writings reflect their experience with the dread disease. They were intelligent people, generally well-educated among their peers, and their words were written with skill. We can only assume that those with the talent and inspiration to put pen to paper reflected the views of other, less literary people. What they wrote was widely read and enjoyed at the time; what they wrote remains readable and enjoyable today.

To provide context for the literary excerpts used to illustrate the impact of tuberculosis on its victims, Part I of this book describes the historical period covered by the work. In this single-chapter section, the changing times and evolving knowledge of disease are briefly recounted. Modalities of treatment shifted with the emergence of theories and knowledge of the life-threatening disease. As they changed, so also did the expectations of afflicted persons.

The subsequent Parts II, III, and IV of this book present the lives and writings of authors afflicted by tuberculosis in its three time periods, each characterized by distinct prospects for those suffering from the disease. A final coda in Part V notes that the threat of this disease remains with us and recounts the challenges presented in seeking new means of addressing the threats of the Captain of Death.

PART II

HIGH TIDE

—*Captain of Death*—

CHAPTER 2

ROMANTIC POET

JOHN KEATS, 1795–1821

—*Submission*—

Youth grows pale and spectre thin and dies.

—*John Keats, Ode to a Nightingale*

JOHN KEATS was born into a family of modest but comfortable means on October 31, 1795, in Moorfields on the outskirts of London—now engulfed by the spread of the urban metropolis. Nothing in his early life would have suggested that he would one day rank as one of the English language's finest romantic poets. His parents, Thomas and Frances Jennings Keats, operated a livery stables, the Swan and Hoop, originally owned by her parents, who also owned a neighboring pub of the same name. John was the eldest of four surviving children of the couple; he had two brothers, George and Tom, and a sister, Frances, the youngest. Little is known of Keats's genealogic lineage. His father came from Cornwall or Devon and found employment at the Swan and Hoop, where he proved to be able and was made manager. The Keats parents were not highly educated, and there are no literary antecedents in either family.

On the night of April 15, 1804, when Keats was eight years old, his thirty-year-old father fell against an iron railing when his horse stumbled. Newspaper reports at the time indicated that he may have been inebriated. He fractured his skull in the fall and died within hours. Less than three months later, on June 27, Frances married William Rawlings, a bank clerk. That marriage did not last long, and when Frances left Rawlings, her mother, Alice Jennings, took primary responsibility for the care the children.

Keats and his brother George attended the school of John Clark at Enfield, not far from his grandmother's home. He was an average student. Much liked by his fellow students, he was also impetuous and sometimes short tempered. He was schooled in and enjoyed the Greek mythology that was to feature so prominently in his later poetry. It was at Enfield that he met Charles Severn, who would become a successful painter and portraitist and a life-long close friend. Charles Cowden Clarke, son of the schoolmaster and four years older than Keats, also became a good friend.

Despite separation from her maternal care, Keats remained devoted to his mother. She had suffered with arthritis for some time and became seriously ill in December 1809, probably suffering from tuberculosis. The fourteen-year-old Keats took on the responsibility of much of her care, cooking for her, feeding her, and administering medicines to her. Within three months she was dead. Alice Jennings, Keats's grandmother, then moved to establish a guardianship for the Keats children, choosing as trustees John Nowland Sandell and Richard Abbey, a tea dealer. Sandell died two years later, and the further care and financial well-being of the Keats children rested solely with Abbey. There should have been adequate fiscal resources from the Jennings estate to provide each of the children with a modest income, but money was never forthcoming from Abbey. Keats spent much of his life in debt and begging his friends for funds.

In the summer of 1811, Abbey arranged for Keats, then fifteen years old, to be apprenticed to Thomas Hammond, a local surgeon and apothecary. Such an apprenticeship was the usual route of entry into a medical career, and there is reason to believe that Keats looked forward with pleasure to such a prospect. Keats moved into Hammond's house and followed him on his daily rounds, acquiring the surgical skills of dressing wounds, pulling teeth, setting broken bones, and other practical skills of a nineteenth-century physician. Continuing the customary course of medical training of the time, Keats entered the medical school at Guy's Hospital in London, then and today one of Britain's most distinguished medical schools, on October 1, 1815. There he embarked upon a year of medical lectures

and anatomical dissections under the tutelage of some of England's preeminent practitioners. He was apparently a good student, and he passed the qualifying apothecary examination on his first attempt in July 1816. At Guy's Hospital, Keats secured an appointment as a dresser, a position somewhat analogous to that of a modern-day hospital intern, which carried with it a salary. This appointment continued until March 1817.

During his later years as a medical apprentice and student, Keats began writing poetry with increasing commitment to this muse. At some time in 1817 he confronted Abbey with his decision to abandon medicine for the life of a poet. Abbey, a man of business, was not sympathetic to this decision, and this added further to Keats's financial straits. But Abbey's disapproval did little to dissuade Keats. Among his notable early works was "On First Looking into Chapman's Homer." He started work on his allegorical, lyric, poetic retelling of the Greek tale "Endymion." Keats's famous opening line, "A thing of beauty is a joy forever," was originally written as "A thing of beauty is a constant joy" during a chemistry lecture. Yet Keats did not regret his study of medicine. In a May 3, 1818 letter to his friend and fellow poet, John Hamilton Reynolds, he wrote:

Were I to study physic or rather Medicine again, I feel it would not make the least difference in my Poetry; when the Mind is in its infancy a Bias is in reality a Bias, but when we have acquired more strength, a Bias becomes no Bias. Every department of Knowledge we see excellent and calculated towards a great whole. I am so convinced of this, that I am glad at not having given away my medical Books.¹

As early as some time in 1816, Keats's friend Charles Cowden Clarke showed some of his poems to Leigh Hunt, an influential political rebel, minor poet, and publisher of the liberal journal *The Examiner*. Keats had little interest in politics—his mind was consumed with images of beauty and Greek mythology. An excerpt from "Ode on a Grecian Urn," written in the spring of 1819, epitomizes these facets of Keats's thinking and poetry.

*O Attic shape! Fair attitude! With brede
 Of marble men and maidens overwrought,
 With forest branches and the trodden weed;
 Thou, silent form, dost tease us out of thought
 As doth eternity: Cold Pastoral!
 When old age shall this generation waste,
 Thou shalt remain, in midst of other woe
 Than ours, a friend to man, to whom thou say'st,
 "Beauty is truth, truth beauty,"—that is all
 Ye know on earth, and all ye need to know.²*

Keats was soon drawn into Hunt's circle of radical thinkers, sometimes called "the rascals." It was there he met Percy Bysshe Shelley, whose reputation was somewhat more firmly established than that of Keats. Neither young poet had yet achieved the recognition that would later be accorded to them; Wordsworth and Coleridge were the iconic poets of that time. Initially Shelley and Keats were not friends. In fact, at that time Shelley disparaged Keats's work. Later he would much admire Keats's poetry. Hunt's sponsorship helped launch Keats into a world of poetry, even while it also attached to him an undeserved and inappropriate political aura. It was through Hunt that Keats met Charles Armitage Brown, who would become his close friend.

In early 1818 it became apparent that Tom, Keats's brother, was ill, probably with tuberculosis, and the two brothers went to the Devon coast at Teignmouth, hoping that the sea air would foster a recovery for Tom. Indeed, Tom did improve, but dreary, rainy weather soon convinced them to abandon the shore and return to London. The rain did, however, provide ample time for Keats to retreat to seclusion and complete "Endymion."

Tom's health waxed and waned. He had several episodes of hemoptysis (coughing of blood). On reaching London, he seemed in much better health, and Keats determined to set off on a long-planned and much-delayed walking tour with Charles Brown. They walked through the Lake District and across Scotland to Inverness. They climbed Ben Lomond. During the trip, Keats was recurrently

plagued with a sore throat, the cause of which is not clear. After consulting a local physician about his throat, Keats decided to return to London by ship. On return in August, he found his brother to be much worse, and much of his time and effort during the next three months was devoted to caring for his dying brother. Tuberculosis claimed the life of Tom Keats on December 1, 1818; he was nineteen years old.

Following his brother's death on December 18, 1818, Keats moved in with Charles Brown. Brown lived in one of two adjacent rented houses at Wentworth Place. The other house was occupied by the Brawne family. Frances Brawne, Fanny, then age eighteen, caught the eye of John Keats. They were soon in love, and on Christmas Day, 1819, they announced to Fanny's widowed mother their intent to marry. The months of late 1818 and early 1819 were among Keats's happiest and most productive; a number of his poetic works were published and well received.

On February 3, 1820, Keats had his first episode of hemoptysis, and he made his own diagnosis of tuberculosis. His friend, Charles Brown, described the events in the following, often-quoted passage from his early biography of the poet.

One night, at eleven o'clock, he [Keats] came into the house in a state that looked like fearful fierce intoxication. Such a state in him, I knew, was impossible; it therefore was the more fearful. I asked hurriedly, "What is the matter,—you are fevered?" "Yes, yes," he answered, "I was on the outside of the stage this bitter day till I was severely chilled,—but now I don't feel it. Fevered!—of course, a little." He mildly and instantly yielded, a property in his nature towards any friend, to my request that he should go to bed. I followed with the best immediate remedy in my power. I entered his chamber as he leapt into bed. On entering the cold sheets, before his head was on the pillow, he slightly coughed, and I heard him say,—"That is blood from my mouth." I went towards him; he was examining a single drop of blood upon the sheet. "Bring me the candle, Brown; and let me see this

blood." After regarding it steadfastly, he looked up in my face, with a calmness of countenance that I can never forget, and said,—“I know the colour of that blood;—it is arterial blood;—I cannot be deceived in that colour;—that drop of blood is my death-warrant;—I must die.” I ran for a surgeon; my friend was bled; and, at five in the morning, I left him after he had been, some time, in a quiet sleep.³

Keats was seen promptly by the local physician summoned by Brown. He withdrew blood from a vein, a standard form of therapy at that time intended to remove disease-causing humors from the circulation. Keats was confined to bed in a room with all windows closed, as fresh air was thought to be deleterious to health. Later, he was seen by Robert Bree, a specialist in chest diseases, who recommended continuation of the regimen of enforced confinement, bed rest, and bleedings. Keats also took calomel, a mercury-containing medication frequently used for patients with tuberculosis at that time. Keats poured out his soul in daily love letters to Fanny Brawne. Periods of improvement alternated with further progression of his illness.

Physician biographer Walter A. Wells believes that Keats's illness began earlier. He believes that Keats's fatigue during his 1818 walk with Brown and the symptoms for which he consulted a doctor in Inverness, Scotland, were manifestations of pulmonary tuberculosis.⁴ Wells's hypothesis is reasonable, for hemoptysis rarely marks the actual onset of tuberculosis; it usually requires well established disease with lung cavities. Ultimately Keats determined that he must go to Italy, where the favorable climate might prove salubrious.

When Shelley learned that Keats had developed tuberculosis with a major hemoptysis, he wrote to Keats on July 27, 1820, urging the ailing poet to come to Italy and stay with him in Pisa.

My Dear Keats,

I hear with great pain the dangerous accident that you have undergone, and Mr. Gisborne who gives me the account of it, adds that you continue to wear a consumptive appear-

ance. This consumption is a disease particularly fond of people who write such good verses as you have done, and with the assistance of an English winter it can often indulge its selection;—I do not think that young and amiable poets are at all bound to gratify its taste; they have entered into no bond with the Muses to that effect. But seriously (for I am joking on what I am very anxious about) I think you would do well to pass the winter after so tremendous an accident, in Italy, and if you think it as necessary as I do so long as you could [find] Pisa or its neighbourhood agreeable to you, Mrs. Shelley unites with myself in urging the request, that you would take up your residence with us.⁵

Keats was determined to go to Rome. He planned to put himself under the care of Dr. James Clark, a distinguished British physician and tuberculosis specialist then in Rome. (Dr. Clark is discussed in Chapter One.) He did not want to spend this time of illness in the free-love ménage that Shelley had established there with his wife, Mary Wollstonecraft, and her sister, Claire. In fact, Keats and Shelley had not been close friends. Keats, for his part, considered Shelley overbearing and found himself uncomfortable with a man of an obviously different social class. John Keats was a man from a middle-class background and a practical person who found it hard to relate both to Shelley's aristocratic origins and his fanciful revolutionary ideas.

In August 1820 the despairing Keats wrote to his beloved Fanny Brawne expressing distress at the parting this would bring:

I see nothing but thorns for the future—wherever I will be next winter in Italy or nowhere.... Suppose me in Rome—well, I should see you there as in a magic glass going to and from town at all hours.... I wish I was either in your arms full of faith or that a Thunder bolt would strike me.⁶

Keats was concerned about his future and his chances of survival. He wrote to John Taylor, a bookseller, on August 14, 1820. The purpose

of this letter was to ask Taylor to make arrangements for his passage on a suitable vessel. He added a postscript to the letter expressing his desires for disposition of his meager estate.

In case of my death this scrap of Paper may be servic[e]-able in your possession. All of my estate real and personal consists in the hopes of the sale of books publish'd or unpublish'd. Now I wish Brown and you to be the first paid Creditors—the rest is in nubibus—but in case it should shower pay my Taylor the few pounds I owe him. My Chest of Books divide among my friends.⁷

Charles Brown was still in Scotland. Keats hoped to make contact with him; indeed, Keats hoped he would accompany him to Italy. On August 20 he wrote to Brown indicating that he hoped to be *en route* to Italy within a month. This was followed by an undated letter reporting,

I ought to be off by the end of this week,...but I will wait till I have your answer to this. I am to be introduced before I set out, to a Dr. Clark, a physician settled in Rome, who promises to befriend me in every way.⁸

Brown did not receive these letters. He was already on shipboard heading back to London. In fact, he narrowly missed Keats, as his ship entered the Thames about the same time that Keats was on shipboard heading out. It was Keats's longtime friend Joseph Severn who accompanied the poet to Italy.

On September 17, 1820, Keats and Severn embarked on the *Maria Crowther* bound for Naples. Keats took with him a lock of Fanny Brawne's hair in a locket. Two other passengers occupied the cabin with the men. A Miss Cotterell, also a victim of tuberculosis headed for Italy for her health, and a Mrs. Pidgeon accompanying her. The voyage to Italy was a difficult one. The *Maria Crowther* was forced to turn back by stormy weather and spent many days in the Thames estuary. Once at sea, it encountered another storm in the Bay of Biscay.

The passengers were seasick, especially the two women. When they finally arrived in Naples on October 21, the ship was quarantined in the harbor for ten days because of an outbreak of cholera in England. Early in the voyage while on board the *Maria Crowther*, Keats wrote his last sonnet.

*Bright star, would I were stedfast as thou art—
Not in lone splendour hung aloft the night
And watching, with eternal lids apart,
Like nature's patient, sleepless Eremite,
The moving waters at their priest like task
Of pure ablution round earth's human shores,
Or gazing on the new soft-fallen mask
Of snow upon the mountains and the moors —
No — yet still stedfast, still unchangeable,
Pillow'd upon my fair love's ripening breast,
To feel for ever its soft fall and swell,
Awake for ever in a sweet unrest,
Still, still to hear her tender-taken breath,
And so live ever—or else swoon to death.⁹*

Death “pillowed on my fair love's ripening breast.” A romantic image of death for the poet who knew what awaited him.

After a few days in Naples, Keats and Severn traveled to Rome and met Dr. Clark, who arranged accommodations for them. Keats sickened further, suffering from abdominal complaints that led Clark to be concerned more about those symptoms than about his pulmonary tuberculosis. Perhaps Keats's tuberculosis had spread to his intestinal tract, an event that is rarely seen today but that sometimes occurred late in the course of untreated disease. Severn cared for Keats as he became weaker and obviously close to death. Tuberculosis was generally considered contagious in southern Europe—it was not considered so in Britain and northern Europe—and Severn was faced with the potential cost of burning all of their apartment's furnishings after Keats passed.

Keats was trained in medicine, and his attitude towards his

tuberculosis and impending death reflected that training. His romantic poetry dealt with beauty and love and only rarely death; his letters with reality. Through all, there was a tone of submission to the inevitability of death. Stanza VI of "Ode to a Nightingale," written in May 1819, three months after his portentous blood-spitting, greeted death as "easeful." It may represent the most romantic image of inescapable death written by Keats and was one of a very few such.

*Darkling I listen; and, for many a time
I have been half in love with easeful Death,
Call'd him soft names in many a mused rhyme,
To take into the air my quiet breath;
Now more than ever seems it rich to die,
To cease upon the midnight with no pain,
While thou art pouring forth thy soul abroad
In such an ecstasy!
Still wouldst thou sing, and I have ears in vain—
To thy high requiem become a sod.¹⁰*

A letter to Charles Brown written from Naples on November 1, 1820, dealt with his grief at separation from his beloved Fanny Brawne.¹¹ He clearly anticipated his demise in Italy: "O that I could be buried near where she lives!" This was followed later in the letter by: "Remember me to all. I will endeavour to bear my miseries patiently." There was nothing in this or other letters to suggest that Keats viewed death with any attitude other than resignation.

Keats longed for "easeful death." In his medically trained yet romantic mind there could be no outcome to tuberculosis other than death. While he surely was pained by this fatal prognosis, he equally surely accepted it. Resignation and acceptance were the only options for consumptive persons in Keats's era. References to death in his poetry were romantic, to be sure, but they also bespoke the certainty of life's end as the only outcome for the sufferer from tuberculosis.

As the end neared, Keats asked Severn for laudanum (tincture of opium), with which he intended to end his life. Severn refused. On Friday afternoon, February 23, 1821, the twenty-five-year-old Keats died in his friend's arms. An autopsy confirmed the presence of extensive pulmonary and widely disseminated tuberculosis. John Keats was buried in a Protestant cemetery, a letter from Fanny Brawne placed over his heart.