Bilderdijk’s Head
Meta-medical Reflections of an Afflicted Poet

By Joris van Eijnatten*

SUMMARY. The controversial Dutch poet and thinker, Willem Bilderdijk (1756–1831), filled his letters with observations on his own health and well-being. These frequent appraisals of his physical and mental condition served as ‘meta-medical’ reflections by which he enhanced his self-understanding and ‘constructed’ his own self. In more than 1,500 published letters that Bilderdijk wrote to different correspondents in the course of five decades, he makes it clear that he regarded his head as the main locus and source of his many afflictions. His head-related complaints enabled him to draw together medical, cultural, biographical, psychological, religious, philosophical and aesthetic strands in his life and thought. His life’s motto semper idem, his indebtedness to Leibniz, his practice of spontaneously ‘ejaculating’ verse and his ability to contact the metaphysical world, centred on his head as both the focal point of adversity and the seat of the soul. While evidently inspired by well-known medical-cultural traditions—melancholy or hypochondria and the scholars’ illness (the morbus eruditorum, on which he wrote a lengthy didactic poem)—Bilderdijk’s meta-medical reflections on sickness, identity, and poetry at the same time illustrate the complexities involved in the often highly individual, early modern understandings of illness.

KEYWORDS: identity, the self, melancholy, hypochondria, letter-writing, Leibniz, childhood, aesthetics, religion, illness.

Introduction

Willem Bilderdijk (1756–1831) has gone down in Dutch history as the outstanding poet of his age, a controversial thinker and a difficult, headstrong man.¹ He also left a substantial correspondence, part of which was published in the nineteenth century. Scholars have used his letters either to obtain a glimpse of his love life or confirm his religious orthodoxy. The letters are, however, a treasure-trove of information on sundry matters, including Bilderdijk’s opinions on his own well-being. He was notorious even in his own time for his unremitting complaints about his many afflictions, and for having constantly predicted his own imminent demise during the final three decades of his life. He entertained distinctive ideas on science, including medical science. If Bilderdijk was confused in some respects, he was nevertheless erudite and knowledgeable, and certainly able to give an intelligent account of the state of his own mind and body.

*VU University, Amsterdam, Faculty of Arts, De Boelelaan 1105, 1081 HV Amsterdam, The Netherlands. E-mail: j.van.eijnatten@let.vu.nl


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Historical accounts of the interrelations between sickness and selfhood tend to move through history with giant strides, identifying ‘medieval’, ‘early modern’, ‘enlightened’, ‘romantic’, and ‘(post-)modern’ selves on the way. The case of Willem Bilderdijk shows how problematic such labels can be. A self-conscious, perhaps even obsessive melancholic, he chronicled in morbid detail the symptoms of a disease or disturbance that would have been recognized immediately by a host of literate people from the sixteenth to the nineteenth centuries. Few contemporaries would have been astonished by medical dossiers such as his. Yet they would also have acknowledged that each individual case of melancholy (or hypochondria) was unique, or at least susceptible to being interpreted as a personal affliction arising from a very particular combination of physical problems, psychological difficulties, and external obstacles. Samuel Taylor Coleridge’s cryptic articulation of his state of mental agony—he was in love at the time with Sara Hutchinson, to whom he devoted his Dejection: An Ode (1802)—reflects a highly personal appropriation of elements from what was then a well-known medico-cultural tradition:

I write melancholy, always melancholy: You will suspect that it is the fault of my natural Temper. Alas! no—This is the great Occasion that my Nature is made for Joy—impelling me to Joyance—& I never, never can yield to it.—I am a genuine Tantalus—

Such idiosyncratic expressions of the relationship between depression, personality, psychology, and even metaphysics abound in the history of melancholy. In this sense, Bilderdijk and Coleridge are as unique as their co-sufferers ranging from Caspar Barlaeus to Immanuel Kant. Careful analysis of each ‘case’ will contribute to a comparative understanding of the complexities involved in early modern understandings of illness.

The aim of this article is to offer an outline, based on more than 1,500 published letters, of Bilderdijk’s remarkably consistent but peculiar perception of the relations between illness, identity, and poetry. I shall attempt to show how

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5 All letters consulted were written by Bilderdijk. I have used Brieven van mr. Willem Bilderdijk, 5 vols (Amsterdam, 1836–7), (hereafter Brieven); Mr. W. Bilderdijk’s briefwisseling. Aanvullende uitgave.
his appraisals of his own sickness and health served as ‘meta-medical’ reflections that enabled him to enhance self-understanding and ‘construct’ a self. The example of Bilderdijk also illustrates the importance of letter writing for an almost egomaniacal personality whose poetry is not remembered for its psychological insight and subtle self-reflection, and who lacked the patience and probably the ability sensitively to examine his own self in a diary. I shall first provide some background information on the afflicted poet. Then I shall review his comments on the where and when of his illnesses, on the nature of his disorders and their cures, and on the medical profession. Finally, there will be a discussion of some of his metaphysical observations and the role of sickness and health in Bilderdijk’s epistolary self-assessment.

**An Afflicted Poet**

Willem Bilderdijk came from a middle-class family in Amsterdam, where his father Isaac had given up his medical practice to become a tax farmer. Between 1776 and 1781, Willem made an early start as a poet by winning several awards for lengthy didactic verses. He became a solicitor in The Hague in 1782, after reading law at Leiden University. However, partly because of the revolutionary turmoil of the period, his career failed to get off the ground. His marriage to Catharina Woesthoven was disastrous. Unhappy at home, burdened with financial debt and disappointed in his profession, Bilderdijk underwent a spiritual and intellectual conversion centred on a form of orthodox, revivalist Christianity, theosophical notions concerning the spiritual world, and a conservative and, in many respects, even reactionary world-view. In 1795 he was banished from the Netherlands for refusing to take the obligatory oath of allegiance to the new French-dominated Batavian Republic. Leaving behind his wife and children, he lived alternately in England and Germany. In London he fell in love with Katharina Schweickhardt, the eighteen-year-old daughter of a Dutch painter. He eloped with her to Brunswick, regarding her as his second wife.

Bilderdijk returned to the Netherlands in 1806. Initially he lived on grants from self-appointed guardians and from Louis Napoleon, who was at that time King of Holland. In 1813 he exchanged French patronage for that of King William I of Orange. He wrote huge quantities of poetry, which increasingly bitterly attacked his compatriots and denounced on every occasion any idea that smacked even slightly of progress, optimism, democracy, or enlightenment.

One biographical detail deserves special mention. Of the many afflictions the poet claimed to experience, at least one was demonstrably not psychosomatic. As a child, Bilderdijk suffered an accident to his foot, which apparently led to...
an infection of the periosteum. In one particularly despondent letter written towards the end of his life, he pointed out the consequences of this mishap:

It was only the ailment in my left foot, from which I suffered terribly since I was five years old, which first permitted me to go out when I was sixteen, and which healed when I was twenty-seven, that prevented me from leaving my parents’ house to lead a roving life, unknown, and to seek out death in some or the other foreign land without any plan or prospect, unknown and un lamented; as I would very much have liked to have done.6

Apart from thwarting his desire for a wandering existence, the accident to his foot compelled Bilderdijk to remain indoors as a child, secluded from the outside world and bereft of play-mates. He spent much time in his father’s study, poring over books that few children of his age were in the habit of reading or, for that matter, were allowed to read.

Because of this problem, Bilderdijk ‘gave in’ to his precocity. He claimed to have been an unusually talented child. He also believed himself to have possessed a substantial knowledge of ‘the history of the Bible, Mythology, and the main facts of Universal History’ at the age of one and a half. Barely able to walk, he had taught himself French and explained the meaning of allegorical paintings for the benefit of his grandmother. He was even able to clarify the religious doctrines of the Heidelberg Catechism to the satisfaction of his parents.7 As we shall see, in constructing his identity as an afflicted poet, Bilderdijk drew heavily on his traumatic experiences as a handicapped and lonely, but precocious youth.

Included in Bilderdijk’s prolific output as a poet—he is believed to have written more than 300,000 lines of verse—are didactic poems on such topics as The True Love for the Fatherland (1777), The Spirit World (1811), and The Animals (1817). On his return from exile, he published a poem of some 3,000 lines of verse on the morbus eruditorum called The Scholars’ Sickness (1807). The topic had been extremely popular in the eighteenth century, although not often addressed in a carmen didacticum.8 Whether Bilderdijk’s claim to having derived the content of his poem from his own experience of the human body, his personal observations, and ‘a very limited Materia Medica’ is true or not is perhaps less important than the assertion itself. In the poem, he presents himself as a knowledgeable, self-made physician.9 Central to the poem is the Hippocratic tenet of the healing power of nature, to which Bilderdijk refers through the aphorism ‘Medicine supports but does not recreate Nature’.10 Sickness is a natural part of the healing process. Pain and affliction do not corrupt the body, but emanate from nature’s therapeutic work.

Finally, it may be useful to provide a brief indication of the relatives and friends with whom Bilderdijk discussed his illnesses. They fall into several categories (the

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6 Brieven II, 284 (JdV, 21-4-1829).
7 Brieven II, 103–4 (JdV, 3-9-1806).
8 Bilderdijk admits to having read, as a child, Neuropathia, sive de morbis hypochondriacis, et hysteriis (York, 1740), a didactic poem by Malcolm Flemyng.
10 ‘Geneeskunst steunt Natuur, maar zy herbaart haar niet’. The classic work is M. Neuberger, Die Lehre von der Heilkraft der Natur im Wandel der Zeiten (Stuttgart, 1926).
abbreviations are used to specify the correspondents in the footnotes). His relatives form the first group. This consisted of his wives, Catharina Rebecca Woesthoven (CRW) and Katharina Wilhelmina Schweikhardt (KWS), his brother-in-law, Samuel Elter (SE), and his sister-in-law, Maria Petronella (Elter-)Woesthoven (MPEW). The second group consists of his closest friends, Johannes Valckenenaer (JV), Jeronimo de Vries (JdV), Hendrik Willem Tydeman (HWT), and two Jewish converts to Calvinism, Abraham Capadose (AC) and Isaac da Costa (IdC). A number of poets and writers were in the third group. These included Jeronimo de Bosch (JdB), Laurens van Santen (LvS), Juliana Cornelia de Lannoy (JCDL), Rhijnvis Feith (RF), and August Heinrich Hoffmann von Fallersleben (AHHvF). The fourth group consisted of Adriaan Loosjes (AL), Pieter Johannes Uylenbroek (PJU), Gerrit Outhuys (GO), Cornelis Carel Callenbach (CCC), Abraham de Vries (AdV), and Samuel Izn Wiselius (SIW).

In addition to writing about his own health, Bilderdijk discussed the well-being of his wives and children. He also often proffered advice to his correspondents. His observations range from brief comments to detailed accounts. In his youth, an ‘extraordinary dullness of Mind’ or a ‘painful indisposition’ served as an excuse that explained his delay in answering correspondence. In his youth, an ‘extraordinary dullness of Mind’ or a ‘painful indisposition’ served as an excuse that explained his delay in answering correspondence.11 He treated his two wives to thorough descriptions of his maladies. The most extensive passages on his health occur in letters to the physician, Abraham Capadose, but even more so to his confidants Isaac da Costa and Jeronimo de Vries.

An Ailing Mind

How, then, did Bilderdijk discuss the state of his health and body? Throughout his life he assured correspondents that his physical condition largely depended on the whereabouts of his body. Several places he quite definitely wished to avoid, such as The Hague and Amsterdam, but, above all, Brunswick. ‘I lost my health in a Brunswick marsh’, he once observed. Writing from Brunswick itself in 1805, he exclaimed that the opportunity to become professor of law in Moscow would be welcome ‘if only to get out of this polluted bath of vapours in which I am mouldering’. In this place everything that lives and grows wastes away, decays, dies, and degenerates.13 He complained of similar ‘suffocating fumes’ in the Netherlands, in Amsterdam and Haarlem.14 The ‘murderous’ sea air and ‘marshy, choking vapours’ of The Hague—the ‘worst place’ in the province of Holland, where he lived between 1782 and 1795—were likewise reviled. ‘I was always sick, and could only breathe again when I changed air for a short while during a holiday.’15 By contrast, the air in Hamburg was ‘very good’.16 The

11 Briefwisseling 1772–1794, 17 (LvS, 14–7–1777) and 76 (JCDL, 9–3–1780); Brieven I, 126 (PJU, 24–7–1784).
13 Brieven II, 4, 29 (JdV, 10–3–1805 and 7–6–1805).
15 Brieven I, 189 (PJU, 23–5–1792); Brieven II, 146 and 158 (JdV, 4–5–1807 and 26–1–1808); Brieven I, 266 (GO, 12–8–1808).
16 Briefwisseling 1795–1797, 76 (CRW, 4–6–1795).
same applied to England in general and to London in particular. *Frankly, I was never healthy anywhere but in Leiden, and afterwards in London.*17 The air in Leiden was ‘quiet, pure’, although even here Bilderdijk complained of ‘unremitting misty and foggy fumes’.18

He recommended ‘dry air, dry sandy soil’ as a healthy environment: ‘No other air is tolerable for my constitution but dry cold [air].’19 He insisted that his health depended on time no less than place. Even where the air was good, its quality varied during the course of the year. Throughout Bilderdijk’s life, spring-time meant illness.20 He worried that ‘the Spring that always devastates me will set the animal spirits going, which so unsettle the brain!’21 The ‘clammy, moist weather’ of autumn led to a ‘despondent lethargy of the mind and sluggishness of the body’, which could last several months.22 Yet summers, too, were in Bilderdijk’s view highly detrimental to health. He hated heat.23 In the end, the only period in which he could feel content was winter. A night frost induced high spirits.24 ‘What is my present condition’, he complained in 1826, ‘but a consequence of the lack during more than two consecutive years of the wholesome influence of the stiffening winter frost, which alone allows me to recuperate from the spring air (so unpleasant for me), the summer oppression, and the precipitation of autumn vapours?’25

In the 1820s, Bilderdijk added another time-related perspective to his view of the cycle of seasons. This perspective was eschatological. History was in ominous decline. Earthly events were gradually drawing to a close. The end of time was at hand. The deteriorating quality of the air confirmed this view. ‘The change in the state of the atmosphere that has become gradually more disadvantageous to the human constitution since my 12th year portends worse things, and I can do nothing but expect an awesome catastrophe.’26 A sensitive constitution could only be harmed by the current ‘universal revolution in the atmosphere’. This in turn paved the way for enormous catastrophes in the physical state of the earth.27

The duration of his illnesses varied. One particularly lengthy illness lasted from April 1807 to May 1808, another—an ‘enormous fatigue’—from January 1814 to February 1815.28 An unspecified ‘attack’ could keep him in bed for 14 days, or

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17 Brieven II, 3, 146 (JdV, 10-3-1805 and 4-5-1807).
18 Brieven III, 8 (JdB, 24-9-1807); Brieven IV, 272–273 (IdC, 12-12-1826).
19 Brieven I, 277 (GO, 7-5-1817); Brieven IV, 48 (IdC, 4-12-1822); Brieven V, 160 (AC, 26-12-1826).
20 Brieven V, 217 (AHHvF, 20-1-1822).
21 Brieven IV, 322 (IdC, 8-2-1829).
22 Brieven IV, 182 (IdC, 14-11-1824). Also Briefwisseling Tydeman I, 147 (HWT, 16-10-1809); Brieven V, 160 (AC, 26-12-1826); Brieven IV, 4 (IdC, 1-2-1817).
23 Briefwisseling 1795–1797, 76, 110 (CR W, 9-6-1795; SE, 26-9-1795); Brieven V, 131 (AC, 11-7-1826); Brieven II, 246 (JdV, 5-9-1826).
24 Brieven IV, 41 (IdC, 9-11-1822).
25 Brieven V, 160 (AC, 26-12-1826).
26 Brieven IV, 175 (IdC, 26-7-1824); Brieven V, 184–5 (AC, 8-6-1829).
27 Brieven II, 315–16 (Adv, 4-12-1823).
28 Brieven I, 265 (GO, 12-8-1808); Briefwisseling Tydeman II, 35 (HWT, 5-2-1815).
three weeks.\textsuperscript{29} In fact, however, Bilderdijk claimed that he had never been healthy. He had stared into the face of death from the age of five; for 60 years he had daily been awaiting his demise.\textsuperscript{30} In his letters, particularly those written after 1805, he discusses the imminence of his death so often that a footnote with the pertinent quotations and references would be as long as this essay. At one point, he mentions 1825 as his terminal year. He did not choose this point at random, nor was his prediction the result of medical prognosis. Bilderdijk dabbled in astrology, and 1825 happened to be an ‘evil Saturn year’, with a particularly malign influence in relation to his life.\textsuperscript{31}

Bilderdijk’s illnesses were as diverse as they were frequent. A bilious complaint (\textit{galziekte}) caused much suffering in 1795.\textsuperscript{32} A flurry of activity—in this case important political errands in the City of London—would lead to ‘overheating’, which in turn might cause an inflammation already present in the blood to ‘fasten’ itself in the breast.\textsuperscript{33} In 1805, Bilderdijk suffered from what he called homesickness, which tortured him day and night.\textsuperscript{34} In the week before Christmas 1827 he had a very serious nosebleed, losing more than ‘13\textfrac{1}{4}’ pounds.\textsuperscript{35} His eyesight gradually worsened, so that he had trouble reading and could do so only for short periods.\textsuperscript{36} In 1797, Bilderdijk diagnosed his illness as ‘peripneumony’—an ‘illness even uglier than its name’. This was presumably an inflammation of the lungs.\textsuperscript{37} A similar attack of ‘pleurisy’ in 1818 was so severe that both ‘Doctors and Professors’ abandoned all hope; but it eventually subsided.\textsuperscript{38} A general indisposition, diverse pains and heavy coughing constituted a perennial set of complaints, and he often worried that such symptoms indicated impending death.\textsuperscript{39}

However, most of the ailments Bilderdijk mentioned between 1777 and 1831, and to which he claimed to be particularly susceptible, were closely associated to a single part of his body: his head. Take, for example, the attacks of ‘rheumatism’ that so frequently plagued him. Rheumatism once led to ‘immovably rigid’ neck and loins. Bilderdijk informed his spouse that, luckily, the wife of the Dutch plenipotentiary in Hamburg had agreed to stroke his back for two to three hours, which enabled him to move and which lessened the pain.\textsuperscript{40} Invariably, rheumatism affected the head. In 1794, rheumatic fevers continued for more than four months, causing exhaustion of ‘mind and brain’, and robbing Bilderdijk

\textsuperscript{29} Briefwisseling T ydeman I, 93 (HW T ydeman, ?-10-1808); another 14 days, with headaches and rheumatism: Briefwisseling T ydeman II, 32 (HWT, 9-10-1814); three weeks: Brieven IV, 9-10 (IdC, 24-8-1817).
\textsuperscript{30} Brieven V, 258 (Bastiaan Heykens, 19-5-1824); Brieven V, 100 (AC, 30-6-1824).
\textsuperscript{31} Brieven IV, 157, 216 (IdC, 27-2-1824; 25-4-1825). Similar calculations led him to believe that every seventh lunar and solar cycle signalled a particular development of the body: Brieven IV, 229–30 (IdC, 24-9-1825).
\textsuperscript{32} Briefwisseling 1795–1797, 83 (CRW, 3-7-1795).
\textsuperscript{33} Briefwisseling 1795–1797, 304 (KWS, 15-2-1797).
\textsuperscript{34} Brieven II, 3 (JdV, 10-3-1805).
\textsuperscript{35} Brieven V, 294 (CCC, 23-12-1827).
\textsuperscript{36} Briefwisseling T ydeman II, 26 (HW T ydeman, 8-7-1814); Brieven III, 117 (SIW, 7-1-1819).
\textsuperscript{37} Briefwisseling 1795–1797, 312 (MPEW, 8/9-3-1797).
\textsuperscript{38} Brieven I, 280 (GO, ?-7-1818).
\textsuperscript{39} Brieven IV, 99, 155–7, 194 (IdC, 1-5-1823, 27-2-1824, 12-2-1825).
\textsuperscript{40} Briefwisseling 1795–1797, 113 (CRW, 1/2-10-1795).
of all ‘thought and memory’. Even the slightest draught would lead to heavy pains in teeth, breast, and loins, but especially the head. Fevers, in this case brought on by an ‘epidemic cold’, caused turmoil in the head, an incessant and painful delirium and sleeplessness, making it impossible for him to think properly. Bouts of rheumatism, caused among other things by a heavy cold, involved a tightness of the chest, pains, fevers, or ‘terrible headaches’. Rheumatism seems to have been a ‘German’ malady since, according to Bilderdijk, it occurred in forms unique to Brunswick and often in the spring.

All fevers, whether rheumatic or not, affected the head. Bilderdijk began to discuss delirium in the letters he sent to his beloved in 1797. Disoriented, he wrote: ‘I am sometimes raving with a perfect delirium.’ His own perception of his susceptibility to delirium became progressively clearer. Conversation, he observed in 1806, always brought on a bout and ‘burning fever’, forcing him to remain in bed for three days. Even without fever, Bilderdijk’s mind often went into overdrive. In 1805, after explaining a point of algebra to somebody—the problem concerned imaginary roots—the poet’s head spun out of control. He spent the night in ‘a spate of delirium’ which caused him to declaim poetry, exhausting his wife, who had to write down his words, and finally numbing his senses. These ‘paroxysms’, he wrote, eventually led to either madness or apoplexy. It was often the ‘unparalleled swiftness and unrestrictable desire and need to make verses’ that appeared to predict a fatal over-straining of the brain vessels. Frenetic activity or a wildly drifting imagination would cause insanity, a stroke, inflammation, or rupture of the brain. As we shall see, in all cases venaesectio (venesection—cutting a vein to withdraw blood) was mandatory.

Cephalic complaints often occurred in combination with other ailments. Obstructions ‘in regione hypochondriaca’ caused difficulties in breathing. He expected that the ‘consensus’ of several parts of the intestines with the brain, as well as the continuous congestion of blood in the head, would soon bring about his death. A sharp pain in the breast might coincide with headaches. Likewise, headaches often accompanied sleeplessness. To Bilderdijk, sleep was an unnatural stupor. He only slept every third night. He claimed that, in 1805, he stayed awake for seven or even ten days. Sleep did not refresh or invigorate him, as it

41 Brieven I, 192–4 (PJU, 7-5-1794); also Brieven IV, 71 (IdC, 24-1-1823).
42 Brieven I, 99–100 (JV, 30-6-1782).
43 Briefwisseling 1795–1797, 50, 64, 88 (CRW, 25-4-1795, 15/19-5-1795 and 17-7-1795); Briefwisseling 1795–1797, 110, 358 (SE, 26-9-1795 and 6-5-1797); Briefwisseling 1795–1797, 158 (JdV, 26-1-1808); Brieven V, 25, 96 (AC, 20-3-1819 and 28-4-1824).
44 Brieven II, 3, 38–9, 41 (JdV, 10-3-1805, 7-7-1805, 27-7-1805).
45 Briefwisseling 1795–1797, 326 (KWS, 19-3-1797).
46 Brieven II, 96 (JdV, 18-8-1806).
47 Brieven II, 70–1 (JdV, 15-10-1805). In Brieven IV, 293 (IdC, 10-4-1827): ‘Aut mania, aut apoplexia, says the Ars medica’.
48 Brieven V, 173 (AC, 22-2-1827); Brieven IV, 32–3, 208–9, 217, 250 (IdC, 18-1-1822, 4-3-1825, 25-4-1825, 2-8-1826); Brieven II, 238, 286 (JdV, 1-1-1826, 21-4-1829).
49 Brieven II, 42 (JdV, 15-10-1805).
50 Briefwisseling Tydeman II, 105 (HWT, 18-9-1815).
51 Brieven II, 49 (JdV, 15-10-1805).
did other people; even as a child he had woken up troubled and full of malaise. Mental exhaustion—in this case because he had been obliged to attend a conference from Monday until Saturday evening—triggered turmoil in his mind and made him incapable of activity. ‘I jump and claw at each thought, as a cat against a flat wall; only to tumble off again, without having gripped anything, and I collapse from fatigue in desperation and impatience when I can no more.’

Each meeting, even each conversation, might cost him eight days of illness.

Late in life, Bilderdijk feared nothing so much as a second childhood, a state of dementia. For a quarter of a century, he repeatedly mentioned his dread of succumbing to a ‘terrible weakening of the mind’, an irreversible decrease in the functioning of his faculties leading to madness or senility. In his sixties and seventies, he repeatedly described his mental condition as sad, distracted, sleepy, and spiritless. He complained continuously of a deteriorating condition, fading memory, failing intellect, a mind in turmoil, an imagination running riot, difficulties in focusing attention. The ‘head’ was indisputedly the most troublesome part of Bilderdijk’s body, and the one on which he fixed his attention most.

Healing the Brain

The treatment that occurs in Bilderdijk’s letters with the greatest frequency, and the one in which he seems to have had the most faith, was blood-letting. Given his focus on congestions and oppressions, this is hardly surprising. He was confident that ‘letting’ diminished the rheumatism and headaches from which he suffered. (He once mentions having been bled seven times in three weeks).

He believed that a pain in his side (zijdewee) required blood-letting as well as poulticing. When both had been done, the result was a pain in both sides: ‘I’m “ambi-phthisic” now’, he joked. Blood-letting did not always relieve his headaches or put an end to the ‘endless ringing’ in his brain. In fact, it was often ineffective. Yet no other treatment stands out in the same way in his letters.

Bilderdijk mentions remedies to various illnesses, but from his letters it is not clear that he had a methodical view of which cures suited which illnesses. (A systematic

52 Brieven V, 158 (AC, 18–12–1826).
54 Brieven I, 271 (GO, 12–3–1810).
58 Briefwisseling 1795–1797, 50 (CRW, 25–4–1795) and 302 (KWS, 13–2–1797).
59 Brieven II, 41 (JdV, 15–10–1805). The usual amount of blood was apparently ‘several ounces’: Brieven II, 305 (AdV, 7–4–1819), or even ten ounces: Brieven IV, 272 (IdC, 12–12–1826).
61 Briefwisseling Tydeman I, 359 (HWT, 31–7–1812); Briefwisseling Tydeman II, 192 (HWT, 17–10–1816); Brieven IV, 268 (IdC, 7–12–1826).
comparison between letters and his didactic poetry is called for here). Advising against porter, he recommended barley-water to his feverish young girlfriend in London. ‘Sal volatile’ was to be avoided, for it would not cure an oppression of the breast; nor should she eat mutton or beef, but rather stick to veal or broth. Before going to bed, she should take a conserve of elderflowers with lots of sugar, ‘in order to drive out the rheumatic stuff’. Apart from blood-letting and the use of learned or unlearned remedies, Bilderdijk paid due attention to the *res non naturales*. This often gave rise to commonsense observations: for example, that it is not wise to eat only one kind of food. Sick in Hamburg, he would have profited from a ‘currant jelly’, had he been able to find it. The biscuits were no good. Broths and soups were available in abundance, ‘but these do not benefit me; and everything one finds here is wholly devoid of spices; of which you know I cannot do without’. When ill, he neither ate nor drank, since at such moments he had an aversion to liquids.

His headaches diminished after having tea. Given his head’s chronic state of mental fatigue, he was dependent on certain kinds of food for his well-being—particularly meat, which provided support in the form of additional ‘animal spirits’. Unfortunately, in Brunswick the fat of German cattle and sheep was leathery, their meat hard, dry, and tendinous. Only pork was edible and apparently contained sufficient spirits. To make matters worse, his poverty as an exile had obliged him to live on dry bread and water for two years, wrecking his health. This so weakened him that eating meat and drinking wine—one bottle of Bordeaux every three days—was all that kept him from fainting. Again, in Germany, the wine was at best a ‘poisonous brew spiked with brandy’.

Bilderdijk’s work as a poet has often been associated with his use of opium. While such accounts are usually exaggerated, he undeniably had recourse to the drug, and, like Coleridge, probably with greater frequency than was good for him. Again, his use of this medication was stimulated by his brain-related ailments. He would counter a severe headache with five grains of opium, or use it to stimulate sleep. He once mentioned that he had not used opium for one and a half years, but that his headaches now forced him to do so. (The opium did not help). In the past, three to five grains had brought about the desired effect within two or three hours. As he became older, two grains were sufficient to cause a feeling of ‘sickly dullness’ for four, even five days.

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62 *Briefwisseling 1795–1797*, 267, 292, 309, 310–11 (KWS, 30/31-12-1796, 26-1-1797, 4-3-1797, 7-3-1797); original English.
63 *Brieven* II, 245 (IdC, 1-6-1826).
64 *Briefwisseling 1795–1797*, 83 (CRW, 3-7-1795).
65 *Briefwisseling Tyde man II*, 192 (HWT, 17-10-1816).
66 *Brieven* II, 49 (JdV, 15-10-1805).
67 *Briefwisseling 1795–1797*, 417 (MPEW, 31-10-1797).
68 *Brieven* II, 13–14, 28–9 (JdV, 4-4-1805, 7-6-1805).
69 *Brieven* II, 30, 49 (JdV, 7-6-1805, 15-10-1805).
70 *Brieven* IV, 212 (IdC, 19-3-1825).
71 *Brieven* IV, 277 (IdC, 23-12-1826); *Brieven* V, 174 (AC, 22-2-1827): two grains.
In providing morbid descriptions of his health, Bilderdijk took centre-stage at the cost of his correspondents. Perhaps the good-humoured letters he wrote to his sister-in-law in the 1790s best demonstrate his incorrigibly self-centred view of the universe. In one of them, he enclosed a drawing of himself lying on the floor in a syncope—once again a head-related problem. The Hamburg émigrés crowded around him, and he was the sole subject of their conversation [see Figure 1]. In another letter, he related—not without pride—how the community of exiles and foreigners insisted on consulting him as if he were a physician.

I don’t know what spirit sends them to me, but whether I like it or not, I have to feel pulses or write Recipes. Well, I’m sure I won’t kill them, but if they won’t heal by themselves, I shall not make much of a difference. Just the other day I prescribed a purgative for one of my patients (you do understand that they are all pro deo clients?), no one less than a Procurator-general from the Lorraine, who was supposed to imbibe one small tea cup up to three times if it did not have any effect sooner. The drink had to be taken in again after 2 and after 4 days. But my good Confrère drinks it all in one go, visits the closet 49 and a half times, faints five times, and remains half dead from fatigue and exhaustion. I thought, there goes my Medicinal reputation. But no, people had been present when I had prescribed the dose, and I was not given the blame. I had to ordain again; and [they thought] I had performed a merveille, because the man did get better. See, this is how it is with people.

Honoured to be identified with the medical profession, Bilderdijk practised medicine on his own terms.

In the letters to his new sweetheart, Bilderdijk took on the role of a lay doctor whose authority rivalled if not equalled that of a physician proper. ‘You are sick, my beloved, my dear hope! and I am deprived of seeing you, of examining the state and nature of your illness, and of prescribing you the proper remedies!’ Having found out, two days later, that she had caught a cold—he lists the symptoms: coughing, oppression of the breast, headaches, and burning fever—he counselled in broken English: ‘You will do well, my beloved, to continue the use of my herbs, who are the first universal remedy in every pectoral uneasiness.’ He enclosed two recipes, one for a syrup and one for pills, and advised her strongly not to spoil her ‘Angelica shape’ by putting a blister on her bosom.

He inquired after her health in almost every letter he wrote to her in 1796 and 1797. Bilderdijk’s recipes—many of which have been preserved—conformed to general medical practice. He used the standard abbreviations; apothecaries would have understood them, even if his correspondents did not. ‘Be so kind as to gargle with some decoction of figs mixed with some vinegar’, he wrote in order to soothe Katharina’s sore throat, ‘and to take the following syrup by thea-spoons’. After this there followed a professional recipe that would have carried authority with his beloved.

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72 Briefwisseling 1795–1797, 136–7 (MPEW, 7-11-1795); with thanks to Frank Huisman of the University of Maastricht for his comments on the drawing.
73 Briefwisseling 1795–1797, 79 (MPEW, 9-6-1795).
74 Briefwisseling 1795–1797, 239–40 (KWS, 28-11-1796); original English.
75 Briefwisseling 1795–1797, 266–7 (KWS, 30/31-12-1796); original English.
76 Briefwisseling 1795–1797, 277 (KWS, 16-1-1797); original English.
Fig. 1. Drawing by Bilderdijk, enclosed in a letter to Maria Petronella Elter-Woesthoven d.d. Hamburg, 7-11-1795, with his account of a conversation among the exiles and foreigners after he had

(continued)

The translation is based on the transcription and commentary in Briefwisseling 1795–1797, 136–7 and 565. The illustration itself is published by courtesy of the Letterkundig Museum, The Hague (shelf mark B 00583 B 1).
For all his desire to be recognized as a medical man in his own right, Bilderdijk often had a very poor opinion of real professionals. When Katharina’s father was taken seriously ill, he wrote to her that he would certainly survive, ‘provided he were not kill’d with preposterous remedies’. He was singularly unimpressed by the opinion of two English physicians, who actually did prescribe the ‘preposterous remedies’ he had feared.77 Disgusted by the ‘perverse and murdering behaviour’ of English doctors, he avoided them as much as possible.78 In Germany, too, he valued his own opinion above that of ‘the doctors’. Who could be more familiar with his own ‘sickness and constitution’ than he himself?79 Physicians, Bilderdijk believed, no longer fulfilled the role of therapist or minister naturae. Instead they attempted to dominate nature, ignoring the healing powers God himself had inserted into the body.80 Bilderdijk was, in most instances, his own healer, or

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**FIG. 1.** (continued) **collapsed.** The conversation (in German, English, French, Swedish, Italian, Latin, Spanish and Dutch) runs as follows:

Der gutter Herr Doctor! ick wil ihm die schlafre reiben.
Give him some drops of my Elixir.
I would, Lady, it could help him, but I fear!
Il faut voir.
Je n’en crois rien, Milady, c’en est fait: ‘Chantons, chantons sans cesse &c.\(^b\)
Was, Schwernöht! woll man denn, wenn der kränckte todt ist?
Iag lyfe [i.e. levar] emillan fruktan och hop.
Ich glaube, es ist eine Syncope.
Aber nimmen sie dieses opiat, das ist ein erstaunendlich mittel.
Mais, Madame, on ne peut pas assomer les gens par ces niaiseries qua voilâ.\(^c\)
Il povero Dottore, egli e morto: per certo il [i.e. io] credo, e tutto questo e in vano.\(^d\)
Il lui faudroit plutôt un De profundis.
Mettons le toujours au Lit, peut-être qu’il se rétablira.
Frustra est, decessit plane, nec reviviscet.\(^e\)
El buen Sennor cayo muerto de la sangre, que perdia.\(^f\)
Hij is aan het laten gewend, ik zou hem nog maar een lating doen.\(^g\)
Het is of de man hier maar te rug moest komen om te sterven.\(^h\)
Ja, ik docht het wel, dat hy te zwak was voor al die fatigue.\(^i\)
Comment, comment donc, er war nicht zwakch, er war freilich ganz sterk.
&c. &c. &c.

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77 *Briefwisseling 1795–1797*, 284, 289 (KWS, 19-1-1797, 21-1-1797); original English.
78 *Briefwisseling 1795–1797*, 291, 312–17 (KWS, 25-1-1797; MPEW, 8/9-3-1797).
79 *Brieven II*, 41 (JdV, 15-10-1805).
80 *Brieven IV*, 287 (IdC, 14-1-1827).
\(^b\)A reference to funeral liturgy.
\(^c\)I live between fear and hope.
\(^d\)Poor Doctor, he is dead; I certainly believe that, and this is all in vain.
\(^e\)It is in vain, apparently he is dead, and will not revive again.
\(^f\)The good gentleman has died from loss of blood.
\(^g\)He is used to being let, I would do another blood-letting on him.
\(^h\)It is as if the man had to come back here to die.
\(^i\)Yes, I thought he would be too weak to endure all that fatigue.
presented himself as such. Later, having been ‘outside all praxis medica’ for so long, he consulted the young physician, Abraham Capadose, on the use of mercurialia. His letters to Capadose are often larded with knowledgeable observations in medical Latin.\footnote{\textit{Brieven} V, 70 (AC, 31-10-1823). He was willing to try out Capadose’s powders after having used ipecacuana on his own prescription as a remedy against coughing; \textit{Brieven} V, 127 (AC, 7-5-1826). On the other hand, he believed that Capadose’s suggestion to use ‘Dover’s powder’ (containing ipecac and opium) would not do him any good; \textit{Brieven} V, 172 (AC, 22-2-1827).}

\textit{Melancholy Metaphysics}

Many of Bilderdijk’s medical observations are traceable to eighteenth-century traditions of hypochondria, the \textit{morbus eruditorum}. As a young man, he had made jokes about the professional indisposition of men of learning. In a rare instance of self-mockery, he observed that he must have an exceptionally strong body, since relentless tortures of the mind and severe attacks on his constitution had failed to break it down. It was clear to him that he possessed at least one of the three requisites of a \textit{juris studiosus}. He might lack the \textit{ferreum caput} and the \textit{aureum patrimonium}, but he certainly had a \textit{corpus plumbeum}.\footnote{\textit{Brieven} I, 99–100 (JV, 30-6-1782).} Such wit and self-mockery had disappeared by the later 1790s. An exile reduced to poverty, Bilderdijk believed himself incapable of any activity that demanded the ‘exertion of his mind, uninterrupted and concentrated reading, or even the slightest spark of genius’.\footnote{\textit{Briefwisseling 1795–1797}, 19 (PJU, 11-2-1795).} In fact, he was surprised that he could endure ‘the extremest fatigues’ and a way of life so unsuited to his constitution.\footnote{\textit{Briefwisseling 1795–1797}, 75–6 (CR W, Hamburg, 4-6-1795). At other moments, he discussed the ‘iron constitution’ that had enabled him simply to survive for so long; \textit{Briefwisseling Tydeman I}, 38 (HWT, 27-1-1808).} By then, Bilderdijk had convinced himself that he suffered from severe hypochondria.

Explicit mention of melancholy or hypochondria in Bilderdijk’s letters stems from 1797, at a time when frustration over his beloved’s irresolution ran high. Katharina could not decide whether she should elope or consummate her bond with him. He complained bitterly: ‘I am stupefied, in a state of numbedness, of insensitivity, which differs not from death.’\footnote{Briefwisseling 1795–1797, 275 (KWS, 11-1-1797); original English. On his ‘melancholy affliction’ and ‘mortal melancholy’, see also Briefwisseling 1795–1797, 310, 325, 358 (KWS, 6-3-1797, 17-3-1797; SE, 6-5-1797).} Her indecisiveness wrought havoc on his ‘weak sensible frame’.\footnote{Briefwisseling 1795–1797, 303 (KWS, 13-2-1797).} However, such symptoms of melancholy were not only the consequence of love-sickness; similar descriptions of Bilderdijk’s mental state recur time and again in the letters. If he suffered from hypochondria, he declared at one point, it was hypochondria in an extreme form. He had always wanted to be useful, and it was his sense of uselessness, his sense of being a ‘layabout’, which might be the main cause of his desolate condition.\footnote{Briefvisseling 1795–1797, 303 (KWS, 13-2-1797).} By 1805, he was calling his ‘nervous disease’ his ‘personal and constitutional
illness'. In these years he frequently complained of depression; one of his wife's miscarriages crushed body and spirit.

Bilderdijk's focus on ailments of the head and on melancholic maladies associated with a life of thought and study was connected to his views on the primacy of the soul. He had been outspoken on such issues since at least the 1790s. 'Our body is the instrument of the soul, and the soul's operations suffer by the defects of that instrument, and therefore, one ought to be attentive to conserve it in the utmost perfection.' The spirit (geest) itself restores the body, so long as the machine does not begin to be worn down. He wrote at length of his views on relations between body and soul, which he claimed had been most heavily influenced by Leibniz. The nature of the soul, explained Bilderdijk, is extension, which enables it to act on the body. If the soul's action on the body is physically frustrated, the result is illness. Consequently, the physical inertia of the sensual and visceral 'instruments' of the body signifies a decrease in life, or an increase in deadness. This is a natural process. However, in particularly 'fiery' constitutions such as his own, the experience of such illness is especially painful, something he, in contrast to most other people, had often experienced as a child. In particular, it seriously affected the head.

Here and there Bilderdijk offers remarkable insights into the way soul and body operate, at the same time employing metaphysics to enhance his own stature in the eyes of his correspondents. He provides an example of 'old Stahlianism', observing that as his wife gradually grew to be one with him in feeling and thought, her physical constitution began to increasingly resemble his own. In her sickness, his soul-mate now showed the same physical symptoms as her husband. Elsewhere, he observes that an effective doctor must possess the ability to sympathize. Without sympathy, a quality of the soul, all practical help is insufficient. In his eyes, which reflect his soul, a good physician is able to exert power over his patients; the physician's soul provides courage and trust, on which the efficacy of medication depends. Above all, it is the 'Christian Physician' who possesses such abilities. In Bilderdijk's view, this theory probably went a long way towards explaining his own perceived prowess as a doctor.

88 Brieven II, 3 (JdV, 10-3-1805).
89 Brieven II, 87, 93 (JdV, 20-7-1806, 18-8-1806).
90 Briefwisseling 1795–1797, 289 (KWS, 21-1-1797); original English.
91 Brieven IV, 18–19 (IdC, 11-8-1820).
92 Briefwisseling Tydeman I, 150–1, 175–6 (HWT, 16-10-1809, 5-1-1810).
93 Brieven V, 158 (AC, 18-12-1826).
95 Brieven V, 51 (AC, 8-8-1823). The reference is to the German professor in medicine, Georg Ernst Stahl (1660–1734), who was renowned for his views on the relations between body and soul, and thus paved the way for a 'psychosomatic' approach. See J. Geyer-Kordes, 'Georg Ernst Stahl's Radical Pietist Medicine and its Influence on the German Enlightenment', in A. Cunningham and R. French (eds), The Medical Enlightenment of the Eighteenth Century (Cambridge, 1990), 67–87.
96 Brieven IV, 45–6 (IdC, 28-11-1822); Brieven V, 128 (AC, 7-5-1826).
Yet another interesting account—there are more—of the central role of the soul appears in letters written in 1815. Developing contemporary theories of the magnetic touch, Bilderdijk distinguished between people who have a tendency to exude their own personal ‘atmosphere’ and those who are predisposed to receive the atmosphere of others. He himself belonged to the first category. His soul was stimulated continually to yield up its ideas. Whereas receptive people are amenable to enjoyment, outwardly radiating souls such as his own are incapable of pleasure. The latter kind of soul lacks tranquillity, and therefore finds it difficult to follow the train of thought in the discourse of others. Instead, ideas well up spontaneously, creating their own worlds. ‘Hence in virtually all things I think and feel altogether differently than others: hence I have had to find out everything by myself, because I could not follow, await, keep up with the directions of others.’ It is from this spontaneous generation of ideas that he derived, among other things, his poetic gift of prophecy.97 Elsewhere, he identified this inner aesthetic organ with ‘Reason’, a faculty that enabled him to contact the spirit world.98

Increasingly, as he grew older, Bilderdijk referred to God’s role in the realm of sickness and health. Illness is a gift of God, he insisted in 1823. Every physical evil has its origin in the spirit, and there is no healing but through the spirit, as Stahl had rightly seen. Ultimately, pain is the consequence of sin.99 Sincere prayer is therefore the best remedy for all affliction, and the reason why medications work in the first place.100 Pray, and it will be given you, was the theme of much of Bilderdddijk’s later correspondence.

**Fashioning the Self**

Bilderdijk, in short, considered his ailments as highly individual. He recognized that others suffered; but ‘the particular nature of my physical and spiritual experiences is (probably) without parallel’. ‘In my constitution everything that is destructive converged, wrestled, agitated to ruin, disrupt, [and] corrupt.’101 His meta-medical interpretations of his physical and mental environment helped him to come to terms with his own life’s failings. It is difficult to say whether he was serious when, at the age of twenty-five, Bilderdijk claimed that he detested a being as insignificant as himself, a burden to himself and to others, worthless in relation to the happiness of his neighbours, and ‘idle in the general cohesion of the well-ordered universe’.102 Slightly later, however, he began to write seriously about the absent-mindedness and insensitivity caused by prolonged suffering. His hard work as a lawyer made him chronically ill. In 1786, he claimed that his memory had been destroyed.103

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97 *Briefwisseling Tydeman* II, 93–5 (HWT, 8–9-1815).
99 *Brieven* IV, 147 (IdC, 16–10–1823).
100 *Brieven* V, 59 (AC, 27–9–1823).
102 *Brieven* I, 100, 108 (IV, 30–6–1782).
By 1790, he had firmly established the link between self-perceived failure as a man of social and professional standing, his restless drive as an intellectual, and his suffering as a hypochondriac. He resolved the flaws in his spiritual and social life by constructing an image of unshakeable self-hood, creating a self that did not—because it could and would not—conform to the outside world, but which resignedly accepted the consequences of being what it was. Bilderdijk’s mature view of his own self is perhaps best summarized in his life’s motto, *semper idem*, which he attributed to himself in the 1780s or 1790s. The following complaint is from a letter written in 1790:

Against all direct and oblique opposition, against all attempts to resist me, keep me down, and continuously hold me back, I obtained through immeasurable labour a knowledge and experience of the practice of law, held my own ground therein and established myself in such a way that not only was I able to remain independent from all offices (which I have always opposed), but also to practise law most efficiently, and thus also most vigorously. I therefore work day and night, and my diversions occupy those times of fatigue and exhaustion that are better devoted to sleep than to study.\(^{104}\)

Complaints about ‘fatigues that exhausted both mind and body without pause’ continued until he left the profession that had disappointed him, and his ‘nagging’ wife, and went into exile.\(^{105}\)

Bilderdijk’s devotion to hard work was not merely a matter of ambitious self-exertion or the will to triumph against all odds. His addiction to mental labour was a physical, brain-related condition from which he could not escape. He wrote out of necessity, ‘because my mind has to work and relieve itself’.\(^{106}\) His head and its aches played an ever-increasing role in his reflections on his own life. He noted as a seventy-year-old that in his early childhood ‘a special sensitivity of the brain’ had already manifested itself. This development exemplified the ‘wondrous and wholly unique’ way in which divine providence had guided his life.\(^{107}\) For in contrast to most people, the main cause of Bilderdijk’s ailments was:

an excessive rush to the head. How could it be otherwise? Raised in my bed and closed room, without physical movement, I was able to exercise only my brain; no fluid or spirit [animia, geest] was determined or spilt in any other way; there was no wholesome sweat, no perspiration other than the insensible; and in addition my blood has always been diluted by repeated bloodletting and other pertinent medications, and as it were suppressed in the system of the brain by thought, study and heartaches without end.\(^{108}\)

My whole life was always concentrated in the working of my brain.\(^{109}\)

Hence the involuntary, hyperactive state into which Bilderdijk’s mind sometimes moved. The ‘paroxysms’ he experienced at such moments—we have discussed them above—in his view resembled the uncontrolled dancing of the *chorea* St. Viti.\(^{110}\) He would be swept away, writing verse in a whirlwind. He seemed to

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\(^{104}\) *Brieven* I, 226 (AL, 12-1-1790).

\(^{105}\) *Brieven* I, 188 (PJU, 23-5-1792).

\(^{106}\) *Brieven* II, 32 (JdV, 7-7-1805).

\(^{107}\) *Brieven* IV, 250 (IdC, 2-8-1826).

\(^{108}\) *Brieven* V, 161 (AC, 26-12-1826).

\(^{109}\) *Brieven* IV, 317 (IdC, 10-12-1828).

\(^{110}\) Also known as Sydenham’s disease.
become a ‘double being’, one buzzing around in a daze without being able to stop, the other sitting tranquilly in the centre, observing heaven and earth below.\textsuperscript{111}

Such fits diminished later in life. In 1816 he writes about ‘an attack as I used to have in the past’. This time he spent 24 hours in a spontaneous overflow of verse. This cerebral ‘ejaculation’ (uitstorting) relieved him for several days. When it started to rain, he again entered into a state of apathy.\textsuperscript{112}

The mature Bilderdijk re-created his own past, magnifying in particular the troubles of childhood. He constantly returned to the period in which his precocity had corrupted his mind. Barely three years old, his head had started to throb towards evening. These pulsations, often accompanied by dizziness, were caused by the extreme fatigue of thinking that later in life would prove to be one of his ‘general torments’, and which signalled a definitive ‘weakening of the brain’.\textsuperscript{113}

Oh, my head has suffered indescribably; suffered since early childhood, or rather, before I even had knowledge of my existence. I do not speak of physical pains; I have endured these more than people think, especially since my fifth year, but of moral afflictions, the suffering of the soul. I cannot think about my youth without horror, and now one of the most terrible torments brought about by my illness is that almost every delirium recalls the scenes of my earliest age, before my third year etc. This cannot be explained.\textsuperscript{114}

Erroneous medical notions had contributed to undermining his health as a child.\textsuperscript{115} But it was, above all, his natural precocity in combination with an accident that had triggered the development of his tormented personality. Brought up in solitude—‘always in pain, sick, without contact, companionship, relaxation, pleasure or enjoyment’—he lost the ability to relate to people and trembled at the idea of amusing himself. Labour was the only way to diminish his suffering. His consciousness turned inward—hence the ‘metaphysical turn of my mind’. Meanwhile, in the outside world, Bilderdijk could see nothing but the corruption of God’s creation, a prospect that filled him with ‘deepest melancholy’.\textsuperscript{116}

Bilderdijk regarded it as his inescapable fate to suffer more than any man had ever suffered. If this was a ‘severe case of hypochondria’, he wrote, ‘so be it’.\textsuperscript{117} In 1812, suffering indescribably from grief, hunger and destitution, he was emaciated and close to ‘phrenesia’ (insanity).\textsuperscript{118} The cure for such melancholy could either be the absolute indolence of the native in his hammock, he observed, or a ‘bold and valiant elevation of the self, through which we determine our own fate, isolated from all external influences, [which is] a difficult option for sensitive hearts’.\textsuperscript{119} Needless to say, Bilderdijk chose the latter.

\textsuperscript{111} Brieven II, 70 (JdV, 15-10-1805).
\textsuperscript{112} Briefwisseling Tydeman II, 165 (HWT, 6-6-1816). Another ‘paroxysm’ lasted 14 days: Brieven IV, 152 (IdC, 19-1-1824). A month later he underwent one again: Brieven II, 226 (JdV, 20-2-1824).
\textsuperscript{113} Brieven II, 104 (JdV, 3-9-1806); Brieven V, 172 (AC, 22-2-1827).
\textsuperscript{114} Brieven II, 71 (JdV, 15-10-1805).
\textsuperscript{115} Brieven IV, 245 (IdC, 1-6-1826).
\textsuperscript{116} Briefwisseling Tydeman II, 94–5 (HWT, 8-9-1815).
\textsuperscript{117} Brieven II, 78 (JdV, 17-11-1805).
\textsuperscript{118} Briefwisseling Tydeman I, 363 (HWT, 4-9-1812).
\textsuperscript{119} Brieven IV, 19 (IdC, Leiden, 11-8-1820).
Conclusion

Bilderdijk’s comments on sickness and health range from the mundane to the metaphysical. It will be clear, however, that he focused on his head as the main locus and source of his many afflictions. That this septuagenarian did not in fact seem to have had an unduly troubling medical record makes his claim to have suffered so intensely from head-related problems all the more intriguing. Whence this fixation on the head? The answer draws together the various strands—medical, cultural, biographical, psychological, religious, philosophical, aesthetic—in Bilderdijk’s meta-medical reflections on illness, identity, and poetry.

The medical and cultural component in Bilderdijk’s self-diagnosis as a brain-sufferer undoubtedly originated in the eighteenth-century tradition of the scholars’ illness, morbus eruditorum, with which he was familiar and on which he wrote a lengthy, didactic poem. Yet, of the six songs of his Scholars’ Illness, only one is devoted to headaches, in combination with cramps and heart problems (stenocardia). They are the side-effects of the recuperation process he describes in horrific detail. Probably both for commercial and quasi-professional reasons, Bilderdijk’s didactic poetry conforms more to the morbus eruditorum tradition than do his letters. On the other hand, he evidently believed that he owed it to his standing as a man of learning to suffer from ailments caused by an over-worked brain. If he had to be afflicted by something, it suited a man of his social and intellectual stature to be tormented, above all, by his head.

The head, then, must be the part of Bilderdijk’s body that mirrored his identity. His attempts to put his difficult—if not downright unsuccessful—career as a jurist and scholar into meta-medical perspective logically focused on the brain. In retrospect, many elements in his environment, from the weather and the climate to places, events, and people, seemed to derive their meaning not from their own place or role in the order of things, but from Bilderdijk’s allotted role in the world. His head-related afflictions appeared to prove the subservience of his environment—or, conversely, its opposition—to the divinely ordained purpose of his life. In short, he construed his unhappy life as the result of an ongoing conspiracy against his head.

His uniquely unlucky childhood was pivotal to self-understanding. By causing him to be kept indoors, the injury he had then sustained led to an excessive stimulation of natural precocity, which in turn resulted in an extreme vulnerability to head-related complaints. This self-interpretation, while surely indebted to the eighteenth-century, or Lockean, belief that man is malleable, does not presage or predict the nineteenth-century view of individual development as a life-long process. As far as Bilderdijk was concerned, the core of his personality underwent little or no change after the age of five or six. His individuality having been fixed at a very early age, he firmly remained semper idem. His self-centred claim to uniqueness is perhaps reminiscent of Rousseau, but there is no evidence that Bilderdijk ever read The Confessions.

Perhaps Bilderdijk reminds us most of Leibniz, of man’s soul as a monad that possesses impressions of the past and presentiments of the future, though in
essence remaining itself. As we have seen, his head constituted his identity ‘before I even had knowledge of my existence’. Leibniz also points to the theosophical element in Bilderdijk’s thought. Bilderdijk rarely commented in positive vein on the ailments associated with his head. But they did paradoxically contribute to his physical/mental ability to ‘ejaculate’ the poetry that made him famous. To him, the head was not just the focal point of adversity; it was the seat of the soul, the mirror-image of God, and the part of his body that enabled him to contact the metaphysical world.

If it is difficult to classify Bilderdijk’s ruminations on sickness and selfhood, it should be clear that his meta-medical reflections afforded him an opportunity to come to terms with the faults in his life, and to connect his medical biography to his religious views and his poetical gifts. His letters offer an insight into the way in which, on the eve of the development of medicine as an independent scientific discipline, meta-medical notions were still amply viable in relation to the construction of personal identity. Bilderdijk used his experience of sickness and health to establish himself, in his own eyes as well as those of his correspondents, as a pained and misunderstood human being, whose superior strength and morality enabled him to stand up for the truth. Illness, identity, and genius seem inextricably intertwined. Fortunately for us, it is to the providentially ordained ailments of his head that Bilderdijk owed the ability that allowed him to become the major Dutch poet of his age.

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