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Doctors and Medical Practices in Ann Radcliffe's *The Romance of the Forest*

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Abstract

Medical practice and the Gothic imagination within the context of medicine and literature in the late eighteenth century present fruitful intersections that have only recently been investigated, since they both transgress and test the limits of human knowledge. As a major representative of Gothic fiction, Ann Radcliffe frequently includes surgeons and physicians in her romances, who experiment with several methods of alleviating and curing mental as well as bodily diseases. Even though their marginal role in Radcliffe's works is often overlooked by critical studies, this article offers a new and original enquiry on the dynamics of injuries, the methods of cure and the relationship between patients and doctors that Radcliffe employs in *The Romance of the Forest* (1791) in order to challenge traditional interpretations of Gothic medical issues as well as gender roles.

Keywords: Ann Radcliffe, Doctors, Gothic, Illness, *The Romance of the Forest*

The link between literature and science has been a subject of study in recent decades from various perspectives: from the influence of natural history on the philosophy of thought, to the relationship between science and medicine expressed in literature and more generally the role of scientific-technological discoveries in the humanities (Hilger 2017). Even though the majority of critical studies has been dedicated to the strong relation between medicine and literature during the Victorian period, when the medical scientific field of study about disease became a standard and recognised practice, medical Gothic in the late eighteenth century should not be simply considered an anticipation of the following age of "medical enlightenment" (Kremmel 2022, 13); rather it represents a moment of transition in which original instances of enquiry are disclosed through Gothic narratives. In particular, in between eighteenth- and early-nineteenth-century scientific discoveries and the Gothic within the context of medicine and literature present a unique intersection since they both transgress and test the limits of human knowledge.

The frequent occurrence of hallucinations, bodily suffering, fainting, hysteric crying and dejection affecting in particular

female characters are stereotypical conditions of illness encompassed in Gothic narratives that strike the attention of the reader not only as literary features associated with the Gothic, but as metaphors mirroring a turbulent state of society. As asserted by Andrew Smith "science had a potentially radical edge ascribed to it by a watchful reactionary culture that regarded scientific advantages with some suspicion, not least because science seemed to provide the age with powerful metaphors for radical social change" (2016, 307).

Manifestations of illness and their related medical treatments in Gothic fiction have attracted scholarly attention given to the connection between the history of medical science and literature (Caldwell 2004; Hilger 2017; Lawlor and Mangham 2021). In her useful survey on the "Intersections between Medical Humanities and Gothic Studies", Sara Wasson asserts that "medicine and Gothic have long been entangled" (2015, 1) referring to major Gothic classics such as Mary Shelley's *Frankenstein; or the Modern Prometheus* (1818) which epitomises the paradigm of human ambition and medical experimentation. Another pivotal reference is Robert Luis Stevenson's *The Strange Case of Dr Jekyll and Mr Hyde* (1886), associated with the apotheosis of pharmaceutical testing in the medical field. However, these canonical examples have important connections with the earlier Gothic narratives from the end of eighteenth century. The long tradition of Gothic narratives is based on influential examples such as Horace Walpole's *The Castle of Otranto* (1764); Clara Reeve's *The Old English Baron* (1778); Ann Radcliffe's romances (*The Romance of the Forest*, *The Mysteries of Udolpho* and *The Italian* published between 1791 and 1797); Matthew Lewis's *The Monk: A Romance* (1796); Mary Robinson's *Hubert de Sevrac: A Romance of the Eighteenth Century* (1796); Charlotte Dacre's *Zofloya; or, The Moor* (1806); to mention just a few. These are all evaluable sources of Gothic tales where we can find scenarios of despondence within a Gothic frame: more specifically they all include vicissitudes of tormented and vulnerable characters trapped in remote castles or monasteries subjected to bodily as well as psychological agonies. There is in fact a mutual inspiration between medical issues and the Gothic since "while medicine has influenced the drama and settings of the Gothic, so too have Gothic forms shaped medical writing" (Wasson 2015, 1).

As noted above, narratives of disease, temporary or permanent, when associated to phycological discomfort are commonplace in Gothic fiction. They are, however, often depicted in a very broad and general sense and are typically related to violent deaths, resurrections, mental illness and strong manifestations of discomfort, whose path to recovery is often difficult if not impossible to achieve. In this article I will focus on the representation of illness in the work of Ann Radcliffe, where she includes different kinds of diseases which constantly distress her characters, who live in relentless physical and psychological conditions until the very end of the novel when the supernatural is explained and the cure is found. For this purpose, I will focus on *The Romance of the Forest* in which Radcliffe stages scenarios where her characters, both female and male, suffer from diseases and illnesses not derived or connected to archetypal supernatural events from Gothic narratives, but from physical injuries derived from motivated actions or occurrences such as armed conflicts or personal diseases. These can be defined as more true-to-life, if not properly common (at least for the epoch of the story). In other words, the kinds of distress I am interested in do not result from acts of necromancy or from the involvement of evil spirits, rather they are the express consequences of personal behaviour that cause temporary disabilities to the body. In other words, illnesses are due to misfortunes that are not properly incidental, but strictly associated to the actions or misfortunes of the character, who is the very cause of their distress. Radcliffe includes in her Gothic tales episodes of body tribulations provoked by the personal behaviour, and not from undetected reasons. This narrative strategy is in line with Radcliffe's Gothic aesthetic of the supernatural explained, that she convincingly experiments in her romances (Baiesi 2020).

Moreover, another aspect of this reading involves a close analysis of the role of doctors and physicians in Radcliffe's narratives. Illnesses, diseases and injuries required the innervation of medical practitioners who had different kinds of specialization, and they all played pivotal roles in Radcliffe's works as major points of reference for medical advice and treatment. Due to the fact that medical cares in the eighteenth and nineteenth centuries were highly experimental and practice-based, the methods and cures implemented by doctors could fail or amend situations of discomfort, establishing a dialogue with the medical discourse of the time. Even though the role of the nineteenth-century's man of science is pivotal in Gothic novels as a representative of scientific advancement and its mixed consequences (Budge 2012), it is worthwhile to investigate the recurrence of medical practices applied to everyday reality, especially when associated with context. Illnesses, injuries and medical treatments are entangled in Radcliffe's texts and are thus used to disclose a new interpretation of the relationship between reality and mystery, illness and cure, patient and doctor. These literary dichotomies challenge the reader in finding new metaphorical interpretations of illness and therapy, especially when representing conflicts between gender roles and medical tropes withing the Gothic.

Ann Radcliffe's *The Romance of the Forest* can be considered a canonical work of Gothic fiction, but it also has strong ties to the broader literary aesthetic of the Romantic period. It not only achieved great popularity in Britain when it was published (1791), it also acquired international acclaim thanks to the vast circulation of theatrical adaptations and translations across Europe. Not by chance, Sir Walter Scott declared that the work "placed the authoress at once in that rank, and pre-eminence in her own particular style of composition, which her works have ever since maintained" (King and Pierce 2023, 9). As a matter of fact, after the anonymous publication and mixed reception of her first two works (*The Castle of Athlin and Dunbayne* and *A Sicilian Romance*) in 1789 and 1790, it was *The Romance of the Forest* that made her famous (Miles 1995, 3) as it became an immediate and significant success.

As King and Pierce observe in their introduction to the novel, Radcliffe's third romance comprises Gothic tropes such as the ruined abbey, supposed ghost, the hidden skeleton of a man secretly murdered and "all the horrid train of images which such scenes and such circumstances may be supposed to produce", together with a "remarkable ability to affect the emotions of her readers directly and powerfully" (2023, 9). Moreover, the importance of this novel can be located in the author's skilful experimentation with the Gothic genre and several forms: the ancient romance, the eighteenth-century novel – sentimental in particular –, the melodrama – for the extravagant dramatization of various forms of excess – and the detective/fantastic form. Thus, she created a new and original type of Gothic fiction, as acknowledged by her contemporaries. Besides Scott's encomium of Radcliffe's innovative talent, Anna Laetitia Barbauld asserted in *The British Novelists* (1810) that Radcliffe's works "exhibit[s] a genius of no common stamp" and that *The Romance of the Forest* was a novel "in which her peculiar genius was strikingly developed" and that it was "perhaps the best" of her works (1810, i-ii). Sophistication and innovation are two of the more appropriate qualities of *The Romance of the Forest*, together with "the construction of the plot and its ability to affect readers strongly, and the way in which the author balanced probability and improbability by invoking fear of the supernatural without indulging in unbridled portraits of preternatural actors or events" (King and Pierce 2023, 14). This balance between real and imaginary, together with the use of the picturesque and sublime as aesthetic categories applied to a written text in order to give relevance to the power of creation through the connection of the natural world, made Radcliffe pivotal in the defining of Gothic poetics and British Romanticism.

The Romance of the Forest opens *in media res* with the heroine, Adeline, whose identity is initially unknown. She is introduced through Monsieur La Motte's gaze as an object of pity left

by dangerous ruffians at the mercy of strangers. She is described as "a beautiful girl", "bathed in tears", trembling and imploring for pity (Radcliffe 1999, 5). As asserted by Diane Long Hoeveler, Adeline represents the sentimental heroine in distress, disinherited and dispossessed. Yet we also discover that she is a modern kind of "female Gothic detective" (Hoeveler 2014, 101) endowed with sparking intelligence, who over the course of the novel would solve the mysteries related to her identity as well as her father's murder. This is because the more Adeline acquires independence of mind on the journey to the south of France, the more she elevates her intellectual status: "The observations and general behaviour of Adeline already bespoke a good understanding and an amiable heart, but she had yet more – she had genius" (Radcliffe 1999, 29). She is a victim of the events representing an "exchange commodity between powerful men who use her as a pawn in their own vaguely homosocial schemes" in a male-dominated society (Hoeveler 2014, 101). Nevertheless, she dismisses personifying such a role and instead becomes a leading figure thanks to her intellect. Radcliffe's heroine complies with the feminine Gothic stereotype and simultaneously challenges patriarchal dominance, gender boundaries and social discrimination. As asserted by E.J. Clery, Radcliffe "follows the type of Gothic heroine who actively rebels against confinement, and claims her right to life, liberty, and the free play of imagination in spite of the dangers of the world at large" (2000, 71).

Radcliffe's Gothic romance is a fascinating novel of real life, ideas and ethical philosophy. Travel and nature are two major components of *The Romance of the Forest*, since they provide a counter narration for the frequent episodes of terror and horror. Supernatural writing in Radcliffe is always balanced by the narration of the natural and real world, even though daydreams, nightmares and false impressions are intermingled in the everyday. The power of the imagination endows Adeline to create and re-create the world that surrounds her in line with the aesthetic of Romantic poets. Such a balance between adventures of imagination and everyday occurrences, together with the constant overlapping of dream and reality make the novel a unique example of experimental fiction that can be read as revolutionary.

Following Adeline's adventures, the alternating state of illness and health could acquire new meaning. Adeline's dependence on the kindness of strangers "raises issues about ethic and human nature" (70) and, I would add, of human care. When diseases are not caused by supernatural or mysterious events in Radcliffe's novel, they are treated by human intervention that employ contemporary scientific knowledge and training. This is evident in *The Romance of the Forest* as Adeline, despite her role as the heroine in distress, soon discloses a courageous spirit, a vivid wit and humour, accompanied by a strong commitment for her safety, her own health and well-being, and that of others. In such spirt of survival we can read the dynamic of illness and cure discussed above, and analyse the meaning and role of the doctors in Radcliffe's re-elaboration of the Gothic genre.

After the opening expositionary material Adeline falls ill. Her fever is not due to a supernatural or mysterious causes, rather from physical distress provoked by the psychological shock of her capture, subsequent release and exhausting journey with strangers. The narrator describes a disease not only associated with the Gothic, but one more linked to common distress: "She had passed a restless night, and, as she now attempted to rise, her head, which beat with intense pain, grew giddy, her strength failed, and she sunk back" (Radcliffe 1999, 11). Not surprisingly, the consequences of the fever are that Madame La Motte is very alarmed and that Adeline cannot travel. The third outcome is the necessity to consult a physician.

At the end of eighteenth century regular medical practice in Britain was divided between physicians on one hand and surgeons and apothecaries on the other. Physicians held a medical degree or belonged to the Royal College of Physicians, and most graduated from Cambridge,

Oxford or Edinburgh. Normally physicians were concerned with internal medicine, which ranged from attention to the nervous system, contagious diseases, respiratory disorders, dental disorders and affections of the intestinal tract. Most medical research at the time was conducted by physicians. Surgeons, on the other hand, were the manual workers in the medical field. They were responsible for dressing wounds and setting broken bones, as well as performing surgery on the body. They sometimes also practised the trade of apothecaries, who procured and dispensed drugs as a means of earning extra money. In the early Romantic period, anyone who sold drugs could call themself an apothecary. It was not until the Apothecaries Act of 1815 that formal apprenticeship programs and educational requirements for apothecaries were established, marking the first substantial effort to regulate general medical practice in Britain. Until the Medical Act of 1858, physicians claimed a higher status in the traditional tripartite division of their profession. Unlike surgeons and apothecaries, who were trained by apprenticeship, physicians received a liberal education and degree, being considered the gentlemen of the medical profession. However, according to critics, their training, with its emphasis on classical and theoretical learning, did not adequately prepare them for general practice, where practical skills and broad knowledge of common diseases were required. Physicians generally practised among the wealthier class of the population, but with the advent of hospital and charitable movements in the late eighteenth century, the variety of patients expanded, as did the practical base of their medical knowledge. Physicians, or more commonly doctors, during the Regency period occupied the higher levels of the social ladder. Due to their additional schooling and lack of apprenticeships, they were considered gentlemen because they tended to avoid manual labour. Physicians limited themselves to diagnosing patients and writing prescriptions, but they did not dispense drugs. As said, they rarely performed surgery, but could be considered general practitioners. In rural areas, where few physicians lived, apothecaries often also acted as surgeons, making house calls and treating patients. But mostly they mixed medicines, dispensed them and trained apprentices (Vickers 2004).

Radcliffe's references to physicians and surgeons in the novel follow this distinction of profession, together with their metaphorical and social meanings. Portrayed with irony in *The Romance of the Forest*, the physician that is called for Adeline's condition pronounces a quite obvious diagnosis: "He [Monsieur La Motte] sent immediately for a physician, who pronounced her [Adeline] to be in a high fever, and said, a removal in her present state must be fatal" (Radcliffe 1999, 12). However, even though the consultation gave an expected verdict, such intervention helped La Motte "to calm the transports of terror" (*ibidem*) that always invade the life of Gothic protagonists. In fact, "Adeline's fever continued to increase during the whole day, and at night, when the physician took his leave, he told La Motte, the event would very soon be decided" (11). The man of science foresees a possible output of the patient's health according to his judgment and experience. However, his knowledge is always limited due to the constant advancement of scientific discoveries and his own personal perspective. However, Adeline's physician is prone to taking care of his patient, since he has been watching Adeline all day before going home and he appears again the following morning. The fact that Adeline's distress requires the constant assistance of the physician means that Radcliffe is not dismissive of his role in society and the benefits of his work. In this specific case, Adeline is not suffering, as we said, from a dangerous illness, but the intervention of the physician is still essential. And even though his medical advice is irrelevant, the final judgment is quite definitive: "he gave orders that she should be indulged with whatever she liked, and answered the inquiries of La Motte with a frankness that left nothing to hope" (*ibidem*). Despite this frightening prognosis, Adeline recovers fast and well:

In the mean time, his patient, after drinking profusely of some mild liquids, fell asleep, in which she continued for several hours, and so profound was her repose, that her breath alone gave sign of existence. She awoke free from fever, and with no other disorder than weakness, which, in a few days, she overcame so well, as to be able to set out with La Motte for B– a village out of the great road, which he thought it prudent to quit. (13)

In this passage, the physician does not play a crucial role in healing Adeline's distress, who recovers quite effortlessly and without any drugs or operations that a physician at the time was not able to perform. But Radcliffe includes the mediation of a specialized man of science into the plot because the literary structure of her Gothic romance follows an alternating trend between moments of suspense and mystery related to the unknown and others of real life. Doctors are thus included for the sake of the novel's credibility, and the connection between disease and cure allows Radcliffe to comment on British society.

After Adeline has recovered, the company resumes the journey in great haste and finds a peculiar adobe to pass the night in the form of a ruined abbey of St. Clair in Fontangville, near Lyon. Here, after an initially frightening experience while exploring the abbey during the night, they find the abbey a suitable place to live since it is a recluse spot hidden from society. Even though this is a Gothic building – signified by its historical past and architecture – it provides the characters with freedom as they respectively desire to withdraw from society (La Motte for his debts, and Adeline from her persecutors). La Motte acknowledges that: "the desolation of the spot was repulsive to his wishes; but he had only a choice of evils – a forest with liberty was not a bad home for one, who had too much reason to expect a prison" (23). On the contrary Adeline, surrounded by natural beauty and picturesque scenes, enters into a spiritual relation with the ruined Abbey and the forest, giving voice to a deep religious connection with the non-human surroundings:

The scene before her soothed her mind, and exalted her thoughts to the great Author of Nature; she uttered an involuntary prayer: "Father of good, who made this glorious scene! I resign myself to thy hands: thou wilt support me under my present sorrows, and protect me from future evil". Thus confiding in the benevolence of God, she wiped the tears from her eyes, while the sweet union of conscience and reflection rewarded her trust; and her mind, losing the feelings which had lately oppressed it, became tranquil and composed. (22)

Moreover, the ruined abbey is where Adeline expresses her poetical genius, relating her perception, description and interiorisation of the natural world through the aesthetic categories of the picturesque, sublime and beautiful as they are formulated by Gilpin and Burke.[1] Her creative talent is mostly praised by an unknown admirer, Theodore, a young chevalier, who listens to her performances and falls immediately in love with the poetess (only later on in the story does she reciprocate his feelings). He embodies the archetype of the hero in the romance tradition, but, contrary to his stereotypical function, he does not take the lead in solving the mysteries related to the fate of the persecuted heroine. Eventually, he assists Adeline fly from the villain.

After a month at the abbey, La Motte receives a visit from the Marquis de Montalt and his adjutant. He is Adeline's persecutor, initially a pretender and later an assassin. Theodore, by contrast, helps Adeline to escape from the abbey that transforms from a refuge of voluntary seclusion into a dangerous prison. Theodore is ready to compromise his military reputation as well as his life for Adeline. They flee together and, as soon as they are far from the abbey, they enjoy the elation of liberty and mutual attachment:

[1] For further reading on the role of Edmund Burke's aesthetic categories of the sublime and beautiful and William Gilpin's rules of the picturesque in Radcliffe see Townshed and Wright 2014; Bohls 1995.

Never, till the present hour, had he ventured to believe she was in safety. Now the distance they had gained from the chateau, without perceiving any pursuit, increased his best hopes. It was impossible he could sit by the side of his beloved Adeline, and receive assurances of her gratitude and esteem, without venturing to hope for her love. He congratulated himself as her preserver, and anticipated scenes of happiness when she should be under the protection of his family. The clouds of misery and apprehension disappeared from his mind, and left it to the sunshine of joy. When a shadow of fear would sometimes return, or when he recollected, with compunction, the circumstances under which he had left his regiment, stationed, as it was, upon the frontiers, and in a time of war, he looked at Adeline, and her countenance, with instantaneous magic, beamed peace upon his heart. (173)

However, their happiness is swiftly disrupted by the arrival of two officers with a warrant to arrest Theodore for treachery in the King's name. A fight follows and Theodore receives a stroke to the head. This is the second injury that requires doctoral intervention since "the blood gushed furiously from the wound; Theodore, staggering to a chair, sunk into it, just as the remainder of the party entered the room, and Adeline unclosed her eyes to see him ghastly pale, and covered with blood" (176). Adeline, who fainted a few passages before on hearing the dispute between the officers and Theodore, must now quickly recover in order to assist Theodore. This is a good example of how Radcliffe challenges gender roles baked into traditional medieval romance as Adeline inverts of role of the female character by taking charge and saving the male hero. The two protagonists suffer, simultaneously, from different kind of diseases: Adeline for despondency on seeing Theodore in danger, and Theodore from a stroke to the head. The imbalance of such states of illness is ironic, as well as the dialogue between the two: "She uttered an involuntary scream, and exclaiming, 'they have murdered him,' nearly relapsed. At the sound of her voice he raised his head, and smiling held out his hand to her. 'I am not much hurt', said he faintly, 'and shall soon be better, if indeed you are recovered' " (*ibidem*).

A surgeon is sent for to cure Theodore as this emergency requires the practical expertise of a medical figure. Meanwhile, in the room a small crowd assemble "whom the report of the affray had brought together; among these was a man, who acted as physician, apothecary, and surgeon to the village, and who now stepped forward to the assistance of Theodore" (177). The tripartition of the medical profession referred to here is quite in line of the different kinds of doctors in late-eighteenth-century British society. In this specific case, even though the story is set in France during an undefined past age, Radcliffe draws on contemporary medical practice, stepping away from the geographical and historical displacement of medieval romance. Entering everyday reality, such as that of the doctors during the eighteenth century, Radcliffe portrays a common situation in villages where one person pretends to embody the role of three different medical professions without ability or experience. As a matter of fact, in this passage of *The Romance of the Forest*, the voluntary doctor who exams Theodore's injury follows the standard medical procedure without any particular accuracy: "Having examined the wound, he declined giving his opinion, but ordered the patient to be immediately put to bed, to which the officers objected, alleging that it was their duty to carry him to the regiment. 'That cannot be done without great danger to his life', replied the doctor" (*ibidem*).

At this moment Adeline takes the lead, suppressing her fainting mood and "the anguish of her heart", she decides what course of action is in the best interest of the patient. She thus speaks out: "Adeline, who had hitherto stood in trembling anxiety, could now no longer be silent. 'Since the surgeon,' said she, 'has declared it his opinion, that this gentleman cannot be removed in his present condition, without endangering his life, you will remember, that if he dies, yours will probably answer it' " (*ibidem*). Then the doctor immediately reiterates the same order: " 'Yes,' rejoined the surgeon, who was unwilling to relinquish his patient, 'I declare before

these witnesses, that he cannot be removed with safety: you will do well, therefore, to consider the consequences. He has received a very dangerous wound, which requires the most careful treatment, and the event is even then doubtful; but, if he travels, a fever may ensue, and the wound will then be mortal' " (*ibidem*). Consequentially, and thanks to the persuasive manners of the pressing mob who call for Theodore's recovery, the officers allow the patient to rest and be examined by the surgeon. It is in the interval of this visit when patient and doctor are left alone in an adjoining room, that Adeline becomes aware of her own feelings for Theodore:

> She waited in an adjoining room the sentence of the surgeon, who was now engaged in examining the wound; and though the accident would in any other circumstances have severely afflicted her, she now lamented it the more, because she considered herself as the cause of it, and because the misfortune, by illustrating more fully the affection of her lover, drew him closer to her heart, and seemed, therefore, to sharpen the poignancy of her affliction. The dreadful assertion that Theodore, should he recover, would be punished with death, she scarcely dared to consider, but endeavoured to believe that it was no more than a cruel exaggeration of his antagonist. Upon the whole, Theodore's present danger, together with the attendant circumstances, awakened all her tenderness, and discovered to her the true state of her affections. The graceful form, the noble, intelligent countenance, and the engaging manners which she had at first admired in Theodore, became afterwards more interesting by that strength of thought, and elegance of sentiment, exhibited in his conversation. His conduct, since her escape, had excited her warmest gratitude, and the danger which he had now encountered in her behalf, called forth her tenderness, and heightened it into love. The veil was removed from her heart, and she saw, for the first time, its genuine emotions. (178)

It is significant that Radcliffe's heroine does not fall in love with the chevalier immediately after a moment of conflict. Rather Adeline becomes cognisant of her love for Theodore during a moment of common distress while he is treated by a doctor for an injury that initially does not even seem fatal. This is not in line with the traditional romance and testifies to Radcliffe's engagement social and domestic events of real life. Re-considering a relationship while a beloved is in danger is a reaction that pertains to a sensible woman of a romance, as well any person of sensibility, now and then.

As soon as the visit is over, Adeline enquires into the state of patient's wound. The doctor, before replying to the specific request, deviates his speech and speculates on the nature of Adeline's and Theodore's relationship. Such an intrusion into her private concerns is very upsetting for Adeline and she does not tolerate this digression, prompting an answer to her medical queries: "Now, Sir, that you have concluded your compliment, you will, perhaps, attend to my question; I have inquired how you left your patient" (179). Unfortunately, the surgeon is quite drastic in his judgment: " 'That, Madam, is, perhaps, a question very difficult to be resolved; and it is likewise a very disagreeable office to pronounce ill news—I fear he will die.' The surgeon opened his snuff-box and presented it to Adeline. 'Die!' she exclaimed in a faint voice, 'Die!' " (*ibidem*). Despite this upsetting verdict, the dialogue between the doctor and Adeline is carried out with irony, revelling in the surgeon's incompetence and insecurity when dealing with personal and medical subjects:

> 'Do not be alarmed, Madam', resumed the surgeon, observing her grow pale, 'do not be alarmed. It is possible that the wound may not have reached the—' he stammered; 'in that case the—' stammering again, 'is not affected; and if so, the interior membranes of the brain are not touched: in this case the wound may, perhaps, escape inflammation, and the patient may possibly recover. But if, on the other hand,— '. (*Ibidem*)

Adeline grows more and more dissatisfied with the performance of the surgeon as he is evidently unable to deliver a convincing opinion about the state of his patient. Feeling Adeline's mistrust, the doctor is unable to maintain a professional composure:

> 'I beseech you, Sir, to speak intelligibly', interrupted Adeline, 'and not to trifle with my anxiety. Do you really believe him in danger?' 'In danger, Madam', exclaimed the surgeon, 'in danger! yes, certainly, in very great danger'. Saying this, he walked away with an air of chagrin and displeasure. (*Ibidem*)

We are left to question if the doctor's diagnosis is delivered in light of his expertise as a qualified physician, as an expert surgeon in bodily injuries, or as an apothecary who dispenses drugs, or even neither of the three practices. Adeline openly doubts his medical opinions due to her small faith on the doctor's judgment and her own anxiety for Theodore's possible death. Unable to accept such a state of uncertainty about Theodore's medical condition, Adeline enquires, quite comprehensibly, "whether there was another medical person in the town that the surgeon whom she had seen" (180). But, alas, the landlady replies that "this is a rare healthy place; we have little need of *medicine* here; such an accident never happened in it before. The doctor has been here ten years, but there's very bad encouragement for his trade, and I believe he's poor enough himself. One of the sort's quite enough for us" (*ibidem*). This description highlights a common situation for doctors in the late eighteenth century, arousing more sympathy for the unfortunate specialist, who lack medical experience, skills and practice due to the necessity of money and the small village in which he is confined to perform his activity.

Meanwhile, Theodore seems to be more positive about his condition, even though the doctor openly told him that he would soon die. For such unprofessional conduct, Adeline is very explicit in manifesting her discontent: "I do not like him", she says, and she wishes that Theodore would have "a more able surgeon" (182) for professional and reliable advice. For now, she has to wait for a second visit of the same doctor, who makes another appearance toward the evening: "Towards evening the surgeon again made his appearance, and, having passed some time with his patient, returned to the parlour, according to the desire of Adeline, to inform her of his condition. He answered Adeline's inquiries with great solemnity. 'It is impossible to determine positively, at present, Madam, but I have reason to adhere to the opinion I gave you this morning' " (183). After delivering his opinion, the doctor in a way feels Adeline's judgment and he narrates a long story to prove his capacity as an expert man of science:

> I am not apt, indeed, to form opinions upon uncertain grounds. I will give you a singular instance of this: 'It is not above a fortnight since I was sent for to a patient at some leagues distance. I was from home when the messenger arrived, and the case being urgent, before I could reach the patient, another physician was consulted, who had ordered such medicines as he thought proper, and the patient had been apparently relieved by them. His friends were congratulating themselves upon his improvement when I arrived, and had agreed in opinion with the physician, that there was no danger in his case. Depend upon it, said I, you are mistaken; these medicines cannot have relieved him; the patient is in the utmost danger. The patient groaned, but my brother physician persisted in affirming that the remedies he had prescribed would not only be certain, but speedy, some good effect having been already produced by them. Upon this I lost all patience, and adhering to my opinion, that these effects were fallacious and the case desperate, I assured the patient himself that his life was in the utmost danger. I am not one of those, Madam, who deceive their patients to the last moment; but you shall hear the conclusion. My brother physician was, I suppose, enraged by the firmness of my opposition, for he assumed a most angry look, which did not in the least affect me, and turning to the patient, desired he would decide, upon which of our opinions to rely, for he must decline acting with me. 'The patient did me the honour', pursued the surgeon, with a smile of complacency, and smoothing his ruffles, 'to think more highly of me than,

perhaps, I deserved, for he immediately dismissed my opponent. I could not have believed, said he, as the physician left the room, I could not have believed that a man, who has been so many years in the profession, could be so wholly ignorant of it. 'I could not have believed it either, said I.—I am astonished that he was not aware of my danger, resumed the patient.—I am astonished likewise, replied I—I was resolved to do what I could for the patient, for he was a man of understanding, as you perceive, and I had a regard for him. I, therefore, altered the prescriptions, and myself administered the medicines; but all would not do, my opinion was verified, and he died even before the next morning'.—Adeline, who had been compelled to listen to this long story, sighed at the conclusion of it. 'I don't wonder that you are affected, Madam', said the surgeon, 'the instance I have related is certainly a very affecting one. It distressed me so much, that it was some time before I could think, or even speak concerning it. But you must allow, Madam', continued he, lowering his voice and bowing with a look of self-congratulation, 'that this was a striking instance of the infallibility of my judgement'. (183-84)

This long passage is a very stimulating example of Radcliffe's awareness of the late-eighteenth-century's medical issues, and she is ironically exposing the difficulties and contradiction of medical procedures and social dynamics related to doctors, physicians and apothecaries. The central question here is the experimentation and uncertainty on which the medical profession was based – as it is today. Moreover, another aspect that I think must be considered after reading this passage is the complex relationship between patient and doctor based on trust, empathy and compassion.

As for Adeline, she further struggles with the surgeon, who prescribes medicines as an apothecary but does not trust "natural methods" as "Nature is the most improper guide of the world" (185). Such aversion to the natural world makes him the target of Radcliffe's critique as she finds in nature the solution to every kind of mystery and human suffering. Eventually, and with many great efforts, Adeline manages to summon another doctor. This time it is a real physician, a gentleman, who comes "with a great deal of practice" (*ibidem*), confidence and reputation. Despite the stubbornness of the first surgeon in treating Theodore with his rude manners and wrong methods that cause Theordore to get even worse, the new physician gives hope to Adeline "for a favourable issue" (189). The surgeon, "in surprise and anger" is dismissed and Theodore finally is finally cured by the new physician, who ordered a "composing draught", some "diluting liquids" (188) and gave hope to everybody.

Adeline, still in her flight from the villain Montalt, meets the benevolent minister Arnaud La Luc and his family. The daughter, Clara, is the sibling figure of Adeline, and Monsieur La Luc exemplifies a good and beloved father. Moreover, Theodore is soon identified as the son. They live in the village of Leloncourt, together with a small community, and they take care of Adeline as a daughter on her arrival. Monsieur La Luc's maiden sister, "a sensible, worthy woman" (246) who, at the death of her brother's wife, takes voluntary charge of the children's domestic care. At the chateau, Madame La Luc reserved a special room for her own exclusive use, where she attends to her studies in botany, chemistry and medicine. She is the prototype of the female doctor who follows a practice-based and experimental scientific training. In her laboratory she makes "various medicines and botanical distillations" using her "apparatus for preparing them" (248). She applies her remedies on the family as well as the people from the village: "From this room the whole village was liberally supplied with physical comfort; for it was the pride of Madame to believe herself skilful in relieving the disorders of her neighbours" (*ibidem*). Actually, she dispenses treatments from her laboratory, but she is always ready to visit suffering people in person.

A misfortune occurs involving Clara, who falls from a horse, and an unknown chevalier who sprains his shoulder attempting to save her. In this instance, like with Theodore before, the illness is not caused by a supernatural agency, but by everyday human action. Again, a surgeon

would be of some use "but there was none within several leagues of the village, neither were there any of the physical profession within the same distance" (267). Clara's and the chevalier's curing now falls to the family. Madame La Luc has some experience of medical care and so she "undertook to examine the wounds" (*ibidem*). Her diagnosis is that Clara:

> was much bruised, she had escaped material injury; a slight contusion on the forehead had occasioned the bloodshed which at first alarmed La Luc. Madame undertook to restore her niece in a few days with the assistance of a balsam composed by herself, on the virtues of which she descanted with great eloquence, till La Luc interrupted her by reminding her of the condition of her patient. (*Ibidem*)

As for the man who saved Clara, whose name is Monsier Verneuil, he is transported to La Luc's chateau to recover, and put under the care of Madame La Luc:

> Madame hastened to her closet, and it is perhaps difficult to determine whether she felt most concern for the sufferings of her guest or pleasure at the opportunity thus offered of displaying her physical skill. However this might be, she quitted the room with great alacrity, and very quickly returned with a phial containing her inestimable balsam, and having given the necessary directions for the application of it, she left the stranger to the care of his servant. (248)

Madame La Luc is proud of her work as an apothecary, a patriarchally dominated profession at the time. As well as all other doctors, she acquires medical knowledge through experience, and she is not always right in her remedies, as exemplified with Monsier Verneuil's case. She initially prescribes him a special balsam, "whose restorative qualities had for once failed" (271). She has to abandon her first treatment for the sake of the patient, substituting it with another kind, an "emollient fomentation" (*ibidem*). This new cure is successful, and the recovered guest is now able to rejoice in his health and the loving company of the family. Contrary to Theodore's surgeon and physician, in this scenario Radcliffe fully endorses the medical capacity of a woman, who is not improvising remedies out of magic, rather she is a practitioner and a woman of science. Still, she is ready to acknowledge her failures and is ready to try new therapy for the sake of her patient's recovery and well-being. She is not pretentious, unlike Theodor's first surgeon, and she does not apply to the profession for money. Madame La Luc has a personal curiosity and talent for medical experimentation, which she pursues with devotion and without social ambition. She dedicates her life to the care of others and it is her mission to share the benefits of her discoveries for the sake of the entire community.

There are other physicians consulted later in the novel and their verdicts and remedies more or less succeed in curing their patients. In *The Romance of the Forest* we find an original argument on the work and role of surgeons and physicians in curing illness and disease. Radcliffe gives voice to several different medical professions, from the physician to the surgeon, who approach the medical discourse in different ways. Such inclusion means that Radcliffe was aware to the debate on scientific improvement of her time and that she had opinions on it, especially when nature was involved. She is ready to acknowledge the important work doctors play in alleviating human illness, but unsurprisingly she gives space and importance to a woman who performs medical exercises in harmony with nature. She is able to combine all the fundamental aspect of the practice: science, experiments, judgment, knowledge, together with humility, compassion, empathy and benevolence. Despite the stereotypes of the Gothic romance, in *The Romance of the Forest* Radcliffe promotes a modern kind of medical profession, opening up the possibility of a female doctor. Such a male-dominated profession would benefit from the socially-constructed feminine characteristics of delicacy and sympathy that make up the eighteenth-century woman of feeling. Such an argument, I believe, is true even today.

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