

JOSEPH CONRAD'S ILLNESS NARRATIVES: EVIDENCE FROM THE *COLLECTED LETTERS* AND A NEW DIAGNOSIS

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Abstract: Over 840 letters in the nine-volume 'Collected Letters' series refer to Joseph Conrad's health worries and symptoms. Conrad attributed his symptoms to gout. However, the letters suggest a recurring complex illness, probably Systemic Lupus Erythematosus (SLE). Later degenerative symptoms suggest Osteoarthritis rather than the destructive inflammatory arthritis typically associated with gout.

Keywords: Joseph Conrad's health, Joseph Conrad's letters, Joseph Conrad's medical history, new diagnosis, Systemic Lupus Erythematosus (SLE)

INTRODUCTION

Reading Conrad's letters is greatly revealing. Apart from improving our understanding of his relationships and anxieties over the publication of his works, one can read vivid accounts of the illnesses which impacted severely on his work, home and social life. This article derives evidence from his letters, significant life events and narrative from some of his works. Biographical material from Conrad and other first-hand witnesses, as well as major biographers, complete the picture. Some biographers have concluded that his illness was predominantly psychological in origin.^{1, 2, 3} Conrad himself acknowledged theories of psychosomatic illness, but rejected them in his own case.⁴ My interest was to explore whether his complex illness, so often de-

¹ Bernard C. Meyer. *Psychoanalytical Studies on Joseph Conrad* 111. *Aspects of Orality*. Reprint from the Journal of the American Psychoanalytical Association 1964, vol. XII, № 3 (July), pp. 574, 584.

² Bernard C. Meyer. *Joseph Conrad: A Psychoanalytical Biography*. Princeton: Princeton University Press, 1967, pp. 118, 126, 207.

³ Jocelyn Baines. *Joseph Conrad: A Critical Biography*. London: Weidenfeld & Nicolson (repr.), 1993, p. 97.

⁴ Joseph Conrad to J.B. Pinker, 15 April 1909. [In:] *The Collected Letters of Joseph Conrad*. Ed. Friedrich R. Karl et al. Cambridge: Cambridge University Press, vol. 4, p. 216.

scribed in the literature, could be reassessed from his letters and whether a new physical diagnosis could be made.

MEDICAL HISTORY

Making sense of the history of Conrad's illness is complicated by his use of language. Symptoms could have been exaggerated or played down, depending on the recipient. He wrote mostly to agents, publishers and close friends. Remarkably frank letters to infrequent correspondents^{5, 6, 7} lend a note of authenticity to those accounts through an absence of motive. There were also times when he wrote to Jessie Conrad during her admissions for treatment, providing continuous daily narratives which are of particular interest.⁸

Doctors who attended him include Drs Hackney (Hythe GPs), Dr Tebb (a London Physician), Dr Mackintosh (a GP in Barnes — an inventor and amateur playwright who was an admirer of Conrad's work and who provided his services free of charge) and Dr Fox, who was the medical officer at Ashford Cottage Hospital and whom Conrad consulted from 1918 (after a difference of opinion with Dr Mackintosh over a business investment) until his death in 1924.

Conrad struggled not only with his symptoms, but also with his understanding of his illness, questioning the diagnosis⁹ and indeed raging in himself with the existential frustration of having to suffer it at all.^{10, 11, 12, 13} A recurrent pattern of symptoms developed some years before his death.¹⁴ These symptoms have previously been attributed to concurrent stress; and, to his frustration, at times work pressures¹⁵ and anxieties over Jessie's illnesses¹⁶ did coincide with his own illness.

As a child, Conrad suffered from pneumonia¹⁷ (travelling in exile),¹⁸ a nervousness which was linked to a family history of epilepsy by family members¹⁹ and later

⁵ Joseph Conrad to H.-D. Davray. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 4, pp. 324–326.

⁶ Joseph Conrad to R.A. Scott-James, 13 March 1915. [In:] *ibid.*, vol. 5, pp. 455–456.

⁷ Joseph Conrad to H.L. Mencken, 11 November 1917. [In:] *ibid.*, vol. 6, pp. 144–145.

⁸ Joseph Conrad to Jessie Conrad, July 1918. [In:] *ibid.*, vol. 6, p. 238 ff.

⁹ Joseph Conrad to J.M. Barrie, 14 November 1903. [In:] *ibid.*, vol. 3, pp. 77–78.

¹⁰ Joseph Conrad to G. Jean-Aubrey, 17 September 1918. [In:] *ibid.*, vol. 6, pp. 267–268.

¹¹ Joseph Conrad to Sir Sidney Colvin, 14/21 May 1919. [In:] *ibid.*, vol. 6, p. 421–422.

¹² Joseph Conrad to Hugh Walpole, 14 June 1920. [In:] *ibid.*, vol. 7, pp. 111–112.

¹³ Joseph Conrad to Ernest Dawson, 3/4 July 1924. [In:] *ibid.*, vol. 8, p. 399.

¹⁴ Joseph Conrad to J.B. Pinker, 1 June 1907. [In:] *ibid.*, vol. 3, pp. 445–446.

¹⁵ Joseph Conrad to John Galsworthy, 24 March 1901. [In:] *ibid.*, vol. 2, p. 325.

¹⁶ Joseph Conrad to John Galsworthy, 5 April 1904. [In:] *ibid.*, vol. 3, pp. 127–128.

¹⁷ Joseph Conrad to Ford Madox Ford, 9 March 1902. [In:] *ibid.*, vol. 2, pp. 387–389.

¹⁸ Zdzisław Najder. *Conrad's Polish Background: Letters to and from Polish Friends*. London: Oxford University Press, 1964, p. 7.

¹⁹ Tadeusz Bobrowski to Joseph Conrad 26 December 1891/7 January 1892. [In:] Najder. *Conrad's Polish Background*, ed. cit., p. 159–160.

biographers,^{20, 21} migraine,²² and 'gravel in the bladder' (small calculi).²³ Depressed about financial ruin in 1879, he sustained a self-inflicted gunshot wound in the chest (passed off as a duelling wound),²⁴ the details of which are remarkably preserved in a letter from his uncle and second guardian to his former guardian.²⁵ Following his return from the Congo in 1891 with malaria, he was admitted to hospital in London²⁶ and later to a sanatorium in Geneva, where he was treated for inflammation of the legs.²⁷ Both parents had tuberculosis,²⁸ which Conrad did not contract from them. He often missed regular schooling because of illness and was taught privately.²⁹ Soon after entering service, a spar fell on his back on the *Highland Forest* in 1887³⁰ and he was admitted to Singapore Hospital. The incident is described in *The Mirror of the Sea*:

A piece of one of the minor spars that did carry away flew against the chief mate's back, and sent him sliding on his face for quite a considerable distance along the main deck.³¹

Conrad incorporates this into *Lord Jim*, in which Marlow narrates the incident and the later hospitalisation in tortured terms:

Jim, disabled by a falling spar ... spent many days stretched on his back, dazed, battered, hopeless, and tormented as if at the bottom of an abyss of unrest. He did not care what the end would be ... The fear grows shadowy; and Imagination, the enemy of men, the father of all horrors, unstimulated, sinks to rest in the dullness of exhausted emotion.³²

Interpreted psychologically, Jim clearly reacts to this injury,³³ as he does to the later accusation of dereliction of duty,³⁴ in extreme terms; however, this cannot be used to discount a physical basis for Conrad's injury. Similarly, Conrad's visits to

²⁰ Najder. *Conrad's Polish Background*, ed. cit., p. 9.

²¹ Friedrich R. Karl. *Joseph Conrad: The Three Lives*. London: Faber and Faber, 1979, p. 70.

²² Najder. *Conrad's Polish Background*, ed. cit., p. 13.

²³ *Ibid.*, p. 9.

²⁴ Karl. *Joseph Conrad: The Three Lives*, ed. cit., p. 157.

²⁵ Tadeusz Bobrowski to Stefan Buszczyński, 12/24 March 1879. [In:] Najder. *Conrad's Polish Background*, ed. cit., p. 175–179.

²⁶ Joseph Conrad to Marguerite Poradowska, 1 May 1891. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 1, p. 77–78.

²⁷ Tadeusz Bobrowski to Joseph Conrad, 26 February/10 March 1891. [In:] Najder. *Conrad's Polish Background*, ed. cit., p. 136–137.

²⁸ Najder. *Conrad's Polish Background*, ed. cit., p. 8.

²⁹ *Ibid.*, p. 10.

³⁰ *Ibid.*, p. 239.

³¹ Joseph Conrad. *The Mirror of the Sea: Memories and Impressions*. London: Methuen, 1906, p. 83.

³² Joseph Conrad. *Lord Jim*. Edinburgh and London: Blackwood, 1903, p. 10.

³³ Bernard J. Paris. *A Psychological Approach to Fiction: Studies in Thackeray, Stendhal, George, Eliot, Dostoevsky, and Conrad*. Bloomington and London: Indiana University Press, 1974, p. 247.

³⁴ Joanna Skolik. *The Ideal of Fidelity in Conrad's Works*. Toruń: Marszałek, 2009, p. 72.

Champel for recuperation and his later catalogue of symptoms have been seen as evidence for psychological instability.³⁵

Taking a medical history from Conrad can be frustrated by his use of vague, defensive or colloquial language. He uses words derived from ‘seedy’ in 64 of the 841 letters identified. ‘Seedy’ is an archaic word, but implies being tired, sick, unwell or off colour. Used socially at the time, in meaning it can be approximated to ‘malaise’. He uses this both in mild illness and in convalescence from acute attacks. In 16 of the letters he uses the word ‘shaky’ (also meaning malaise, with lack of confidence); and in 40 he describes himself as ‘laid up’ — immobile perhaps, but not necessarily in bed, though he often had to spend many days in bed when he was most ill. At other times his language is helpfully specific. In 143 letters he refers to limb joint or back pain and in 181 to gout. He also reports ‘influenza’ or other respiratory symptoms in 73 of the letters, often associated with joint pain. He describes facial symptoms (either inflammation or neuralgia) in 8 letters.

There were periods in his life when he was free from significant illness for months at a time. I have noted that as late as 1921 he was free of severe attacks of illness for 3 months between January and April and in 1922 for 4 months (apart from persistent wrist pain). However, through 1923 and until his death in 1924 he suffered a continuous deterioration and loss of energy and morale while completing correspondence over the publication of collected works and other writings.

There were several episodes of acute inflammatory joint disease, accompanied by other symptoms not normally associated with gout. For him, these generally included temperature or cold symptoms,³⁶ a cough³⁷ and some cognitive disturbance with extreme tiredness. At other times he suffered facial pain and inflammation^{38, 39} and in one case described ‘gout in the gums’.⁴⁰ He also had several episodes of dental treatment — “every long novel has cost me a tooth”⁴¹ — but this could have been lack of oral hygiene, as suggested in the recently published dramatised account of Conrad’s death in David Miller’s *Today*.⁴² In many letters he refers to ‘gouty eczema’, ‘gouty throat’ and ‘gouty dyspepsia’ — terms not recognised in modern medicine, but of which Conrad seems to have been made aware by doctors.⁴³ He had several episodes that started with fever, progressed to acute joint pain and then resulted in a persistent and chronic cough. He writes: “[...] the monotony of that thing is intolerable. The

³⁵ Martin Bock. *Joseph Conrad and Psychological Medicine*. Texas: Texas Tech University, 2002, pp. 29 ff.

³⁶ Joseph Conrad to J.B. Pinker, (30 April) 1917. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 6, p. 79–80.

³⁷ Joseph Conrad to J.B. Pinker, 16 July 1918. [In:] *ibid.*, vol. 6, p. 246.

³⁸ Joseph Conrad to J.B. Pinker, 20 February 1913. [In:] *ibid.*, vol. 5, p. 180–182.

³⁹ Joseph Conrad to J.B. Pinker, 21 September 1920. [In:] *ibid.*, vol. 7, p. 179–180.

⁴⁰ Joseph Conrad to J.B. Pinker, 5 May 1913. [In:] *ibid.*, vol. 5, p. 220.

⁴¹ Joseph Conrad to J.B. Pinker, 12 December 1911. [In:] *ibid.*, vol. 4, p. 522–523.

⁴² David Miller. *Today*. London: Atlantic, 2011, pp. 34, 125.

⁴³ Joseph Conrad to Eric Pinker, 9 January 1924. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 8, p. 264–266.

same odious sensations, in the same order and ending in the same period of depression!”⁴⁴

He first gives the sequence as “a severe fit of malaria ... continued with bronchitis and an attack of gout” (malaria being given twice in 1900 as an explanation for fever, but not after this time).^{45, 46} Nine years later, he complains that of fourteen years, “a full third must be taken off for illness alone.”⁴⁷ In mid 1920 he described his latest episode as a “most horrible nightmare ... robbed of the last shred of my confidence in the universe ... I wish I could get someone to cut my liver out ... because I believe that nothing but an operation of that sort will do away with this horrible depression.”⁴⁸ This pattern continued to the end of his life. He did, however, frequently make a good enough recovery between his attacks to be able to complete holidays in Poland and Italy, make visits to New York and Boston — and also to serve on a U-boat-seeking merchant ship in the Great War. Conrad wrote of gout sufferers that they “hang on” and “go out suddenly”⁴⁹ — an interesting premonition of his rapid decline and death after weeks of relative freedom from major symptoms.⁵⁰ The last recorded letter referring to his health, addressed to his eldest son, expressed in simple terms some fears about his health: “I am better, but what with occasional twinges and chokes I do not ‘feel safe’ as it were.”⁵¹

EXAMINATION

Sadly, it is not now possible to examine Joseph Conrad. However, he was examined by doctors many times. During an episode of typical symptoms including joint pain, cough, fatigue, shivers and depression in November 1923, Dr Fox examined Conrad and found a “flabby heart ... fluttering and missing about every fourth beat.”⁵² A further examination in December 1923 pronounced his lungs and heart to be clear and found that Conrad had the “arteries of a much younger man.”⁵³ This is related in a second letter⁵⁴ at the time in very similar language and suggests a temporary illness such as pericarditis, heralding the heart failure from which Conrad was to die the fol-

⁴⁴ Joseph Conrad to Sydney Cockerell, 21 November 1923. [In:] *ibid.*, vol. 8, p. 227–228.

⁴⁵ Joseph Conrad to Blackwood, 12 February 1900. [In:] *ibid.*, vol. 2, p. 248.

⁴⁶ Joseph Conrad to R.B. Cunningham Graham, 13 February. 1900. [In:] *ibid.*, vol. 2, p. 248–249.

⁴⁷ Joseph Conrad to Rothenstein, 15 November 1909. [In:] *ibid.*, vol. 4, p. 290–291.

⁴⁸ Joseph Conrad to Hugh Walpole, 14 June 1920. [In:] *ibid.*, vol. 7, p. 111–112.

⁴⁹ Joseph Conrad to J.B. Pinker, 25 February 1902. [In:] *ibid.*, vol. 2, p. 382–384.

⁵⁰ Leo Gurko. *Joseph Conrad: Giant in Exile*. London: Muller, 1965, p. 271.

⁵¹ Joseph Conrad to Borys Conrad, 25 July 1924. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 8, p. 408.

⁵² Joseph Conrad to Richard Curle, 12 November 1923. [In:] *ibid.*, vol. 8, p. 217–218.

⁵³ Joseph Conrad to Eric Pinker, 16 December 1923. [In:] *ibid.*, vol. 8, p. 248.

⁵⁴ Joseph Conrad to Richard Curle, 17 December 1923. [In:] *ibid.*, vol. 8, p. 248–249.

lowing year. Karl refers to Conrad suffering “minor heart attacks;”⁵⁵ he certainly smoked, but my reading finds that any such references in the letters apply to Jessie.⁵⁶

Conrad frequently describes swelling and immobility of joints, as well as wearing Jaeger⁵⁷ or ‘gout-boots’, which were unsightly and prevented him from making social visits.⁵⁸ His arthritis was acute and episodic for most of his life until he developed chronic pain⁵⁹ — most likely due to Osteoarthritis — later in life. When he writes in *The Secret Agent*:

The terrorist, as he called himself, was old and bald, with a narrow, snow-white wisp of a goatee hanging limply from his chin ... When he rose painfully the thrusting forward of a skinny groping hand deformed by gouty swellings suggested the effort of a moribund murderer summoning all his remaining strength for a last stab.⁶⁰

— he may be describing anxieties about his own hands. Such swellings occur in gout (tophi) but also with severe deformity in Rheumatoid Arthritis (Rheumatoid nodules) and in Osteoarthritis (Heberden’s nodes). Conrad himself refers to “ageing bones”⁶¹ in 1922 and later letters continue to suggest persisting wrist pain without attacks of inflammation. A sole X-ray of Conrad’s hand⁶² taken in Glasgow in 1898 by Dr John McIntyre, whom Conrad visited with Neil Munro,⁶³ shows no evidence of joint destruction. However, a photograph of Conrad wearing a supportive bandage on his right wrist and arm, taken shortly before his death,⁶⁴ seems to show osteoarthritis of the left hand.

Conrad also describes flare-ups of facial pain and inflammation and almost body-wide inflammation of the skin, treated as eczema by his doctors.⁶⁵ Speaking of the early history of the inflammation of the lower legs, he remarks that he “used to have swollen veins”⁶⁶ — varicose veins, also mentioned in 1908.⁶⁷ Varicose veins do not improve, so a recurrent inflammatory skin condition seems more likely. Photographs of Conrad taken at various points in his life show a facial flushing of the malar or ‘butterfly’ type which is seen in Acne Rosacea, narrowing of the Mitral Valve of the heart, and in Systemic Lupus Erythematosus (SLE). The facial inflammation de-

⁵⁵ Karl. *Joseph Conrad: The Three Lives*, ed. cit., p. 909.

⁵⁶ Joseph Conrad to John Galsworthy, 5 April 1904. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 3, p. 127.

⁵⁷ Joseph Conrad to Jessie Conrad, 23 November 1920. [In:] *ibid.*, vol. 7, p. 209–210.

⁵⁸ Joseph Conrad to John Galsworthy, 18 December 1908. [In:] *ibid.*, vol. 4, p. 170–171.

⁵⁹ Joseph Conrad to Bertrand Russell, 24 May 1922. [In:] *ibid.*, vol. 7, p. 472.

⁶⁰ Joseph Conrad. *The Secret Agent*. London: Methuen, 1907, p. 58.

⁶¹ Joseph Conrad to John Galsworthy, 7 August 1922. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 7, p. 505–506.

⁶² *The Collected Letters of Joseph Conrad*, ed. cit., vol. 2, plate 1.

⁶³ Cedric T. Watts. *Joseph Conrad's Letters to R.B. Cunningham Graham*. Cambridge: Cambridge University Press, 1969, p. 107.

⁶⁴ Norman Sherry. *Conrad*. London: Thames and Hudson (repr.), 1988, p. 113.

⁶⁵ Joseph Conrad to Dr Mackintosh, 26 March 1909. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 4, p. 208–209.

⁶⁶ Joseph Conrad to Edward Garnett, 6 June 1896. [In:] *ibid.*, vol. 1, p. 286–287.

⁶⁷ Joseph Conrad to John Galsworthy, 17 February 1908. [In:] *ibid.*, vol. 4, p. 42.

scribed in his letters seems to have resulted in sunken cheeks, which are permanently scarred in later photographs.⁶⁸ Conrad writes as Marlow in *Youth*:

Captain Beard had hollow eyes and sunken cheeks. I had never noticed so much before how twisted and bowed he was.⁶⁹

Conrad was often under stress, working through the night to complete novels. He had dramatic episodes of serious delirium with confused rambling in Polish (described by Jessie)⁷⁰ while on his honeymoon in 1896 — and also in 1910, when he was nursed by his family through two days of confusion, followed by weeks of convalescence. The later episode of confusion was diagnosed as a complete nervous breakdown,⁷¹ but was also accompanied by his familiar physical symptoms.⁷² In 1904 he fell unconscious for almost two hours when he was alone at home⁷³ and he describes other intriguing periods of cognitive disturbance at various times in his illness.

TREATMENT

No treatment details survive for Conrad's childhood illnesses. He was treated for dysentery and weakness in 1890,⁷⁴ as well as the severe episode of malaria which informs Marlow's narrative on the subject of Kurtz in *Heart of Darkness*:

He was an impenetrable darkness. I looked at him as you peer down at a man who is lying at the bottom of a precipice where the sun never shines ... I was startled to hear him say a little tremulously, 'I am lying here in the dark waiting for death' ... He cried in a whisper at some image, at some vision, — he cried out twice, a cry that was no more than a breath — "The horror! The horror!"⁷⁵

In 1891 he was admitted to the German Hospital in Dalston, London, for rheumatism in the left leg and neuralgia in the right arm.⁷⁶ The first doctor's consultation mentioned in the letters of 1899 recommended hydropathic treatment.⁷⁷ An examina-

⁶⁸ Sherry. *Conrad, ed. cit.*, pp. 16, 28, 65, 86, 93, 105, 107, 111.

⁶⁹ Joseph Conrad. *Youth in Youth: A Narrative and Two Other Stories*. Edinburgh and London: Blackwood, 1903, p. 24.

⁷⁰ Jessie Conrad. *Joseph Conrad as I Knew Him*. London: Heineman, 1926, pp. 35, 135–138.

⁷¹ Meyer. *Joseph Conrad: A Psychoanalytical Biography*, pp. 118, 207.

⁷² Joseph Conrad to John Galsworthy, mid-March 1910. [In:] *The Collected Letters of Joseph Conrad, ed. cit.*, vol. 4, p. 321–322.

⁷³ Joseph Conrad to John Galsworthy, 1 September 1904. [In:] *ibid.*, vol. 3, p. 158–159.

⁷⁴ Joseph Conrad to Marguerite Poradowski, 26 September 1890. [In:] *ibid.*, vol. 1, p. 58–63.

⁷⁵ Joseph Conrad. *Heart of Darkness*. [In:] *idem. Youth in Youth: A Narrative and Two Other Stories, ed. cit.*, p. 168.

⁷⁶ Joseph Conrad to Marguerite Poradowski, 27 February 1891. [In:] *The Collected Letters of Joseph Conrad, ed. cit.*, vol. 1, p. 72.

⁷⁷ Joseph Conrad to David Meldrum, 10 February 1899. [In:] *ibid.*, vol. 2, p. 163–164.

tion in 1900 found that “nothing’s radically wrong, but there is my wretched gout in the way.”⁷⁸

Being a ship’s captain, Conrad was used to self-medicating and at times chose not to consult over his illness.⁷⁹ According to John Conrad, his compliance with prescribed medication was sometimes poor and he often relapsed because he went back to his work too soon after an attack.⁸⁰ Drugs taken at various times included Strychnine (1904),⁸¹ Colchicine (1908)⁸² and ‘CBQ’ (1909) — also known as ‘Post’s Tablets’, which included Iodine, Salicylate (related to aspirin) and an unidentified alkaloid.⁸³ It is likely that medication contributed to his problems: Quinine, for instance, may cause a type of Lupus reaction.⁸⁴ Conrad put great faith in Quinine, as evidenced in *The Shadow-line* (which, as Conrad himself admits, has a strong autobiographical content).⁸⁵

I believed in it. I pinned my faith to it. It would save the men, the ship, break the spell by its medicinal virtue, make time of no account, the weather but a passing worry and, like a magic powder working against mysterious malefices, secure the first passage of my first command against the evil powers of calms and pestilence. I looked upon it as more precious than gold, and unlike gold, of which there ever hardly seems to be enough anywhere, the ship had a sufficient store of it ... There was the wrapper, the bottle, and the white powder inside, some sort of powder! But it wasn’t quinine.⁸⁶

The ship’s stock of Quinine had been removed by a former captain. If Conrad had taken excessive Quinine between 1890 and 1899, this could have been a factor in his illness. Conrad himself admitted that drugs caused side-effects for him. It is interesting to note that Colchicine (which is normally effective in gout within a few days) was taken by him for much longer periods, with only moderate benefit to his joints.⁸⁷

DIAGNOSIS

Making a diagnosis a hundred years later, even with the benefit of modern medicine, is difficult. Malaria, gout, recurrent chest problems and eczema — all compli-

⁷⁸ Joseph Conrad to David Meldrum, 27 November 1900. [In:] *ibid.*, vol. 2, p. 306–307.

⁷⁹ Joseph Conrad to John Galsworthy, 17 February 1908. [In:] *ibid.*, vol. 4, p. 42–43.

⁸⁰ John Conrad. *Joseph Conrad: Times Remembered*. Cambridge: Cambridge University Press, 1981, p. 80.

⁸¹ Joseph Conrad to J.B. Pinker, 23 February 1905. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 3, p. 218–219.

⁸² Joseph Conrad to J.B. Pinker, 27 January 1908. [In:] *ibid.*, vol. 4, p. 30.

⁸³ Joseph Conrad to Ada Galsworthy, 17 January 1909. [In:] *ibid.*, vol. 4, p. 186–188.

⁸⁴ Dennis Rosa-Re et al. “Quinine Induced Lupus-like Syndrome and Cardiolipin Antibodies”. *Annals of the Rheumatic Diseases* 1996, 55(8) (August), pp. 559–560.

⁸⁵ Joseph Conrad to Helen Sanderson, March–April 1917. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 6, p. 63–64.

⁸⁶ Joseph Conrad. *The Shadow-line: A Confession*. London and Toronto: Dent, 1917, p. 149.

⁸⁷ Joseph Conrad to J.B. Pinker, 12 February 1908. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 4, p. 39–40.

cated by unsatisfactory and unsanitary housing⁸⁸ — could explain Conrad's symptoms and these might still be the correct diagnoses.

There are four objections to the diagnosis of gout. Firstly, Conrad only once mentions inflammation of the great toe,⁸⁹ which is the primary joint affected by acute gout, large joints initially being affected less often. Secondly, gout is not accompanied by the other symptoms he describes. Thirdly, the response of his joints to Colchicine is poor. Fourthly, there is no good evidence of the destructive inflammatory arthritis that is characteristic of gout; the only evidence we have is of later degenerative joint disease. The recurrent pattern of his illness, which affected several body systems and caused his death from heart failure in 1924 (with a normal heart examination the previous year), suggests a systemic, episodic and progressive illness. Conrad was frustrated by the cyclical nature of his symptoms.^{90, 91, 92, 93} He sympathised with and advised fellow-sufferers: "I trust you are keeping our common enemy at arm's length. I never can really. He's like the *wolf* — always at the door."⁹⁴ Indeed, the most likely diagnosis seems to be SLE, commonly referred to as 'Lupus'. This Latin term translates as *wolf* and originally referred to inflammation and ulceration of the legs (thought to resemble wolf bites), described in the 13th century. Later, the 'malar' or 'butterfly' facial rash — mainly affecting the cheeks and resulting in scarring of the face — was described in the mid 19th century and has since to some extent been romantically associated with the were-wolf myth. Conrad was incorrectly diagnosed with gouty bronchitis, gouty dyspepsia and gouty eczema — terms published in 1869,⁹⁵ three years before Kaposi first detailed SLE as a systemic illness in 1872. SLE was therefore known and had been fully described at the time of Conrad's illness, though reliable tests only became available after Conrad's death.⁹⁶

SLE causes severe skin inflammation, joint pains, chest inflammation with chronic cough, pericarditis, heart failure and neuropsychiatric illness. Without treatment it can result in shortened life expectancy. Conrad's 'butterfly' facial inflammation, which is clearly visible in photographs, is likely to be SLE rather than Acne Rosacea (which usually occurs in summer; Conrad's episodes occurred mostly in winter) or severe Mitral Valve disease (he had normal heart examinations). His well-documented episodes of delirium and depression with physical symptoms might well have been neu-

⁸⁸ Joseph Conrad to Rothenstein, 24 June 1906. [In:] *ibid.*, vol. 3, p. 336–338.

⁸⁹ Joseph Conrad to J.B. Pinker, 26 November 1908. [In:] *ibid.*, vol. 4, p. 155.

⁹⁰ Joseph Conrad to J.M. Barrie, 14 November 1903. [In:] *ibid.*, vol. 3, p. 77–78.

⁹¹ Joseph Conrad to John Galsworthy, 30 November 1903. [In:] *ibid.*, vol. 3, p. 84.

⁹² Joseph Conrad to John Galsworthy, 19 March 1914. [In:] *ibid.*, vol. 5, p. 365–366.

⁹³ Joseph Conrad to Sir Sidney Colvin, 30 December 1917. [In:] *ibid.*, vol. 6, p. 158.

⁹⁴ Joseph Conrad to Wise, 7 March 1919. [In:] *ibid.*, vol. 6, p. 379.

⁹⁵ Edward Headlam Greenhow. *On Chronic Bronchitis Especially Connected with Gout, Emphysema, and Diseases of the Heart: (Being Clinical Lectures Delivered at the Middlesex Hospital)*. Philadelphia: Lindsay and Blakiston, 1869, pp. 82 ff.

⁹⁶ Joseph Earle Moore et al. *The Natural History of Systemic Lupus Erythematosus: Interim report Proceedings 69th Annual Meeting of the American Clinical and Climatological Association*, 2 November 1956, pp. 59–68.

ropsychiatric SLE. Conrad suffered permanent hoarseness after one attack⁹⁷ — a known complication of SLE which can be severe.⁹⁸ Kidney failure in SLE causes leg swelling, but not inflammation — and has a worse prognosis. In my view, Conrad had SLE for most of his life, evading the more serious form, but eventually dying of consequent heart failure.

Quinine and salicylates have since been shown to help symptoms of lupus.⁹⁹ Corticosteroids only became available in the 1950s and are still used. Remarkably, Colchicine is not very effective in joint inflammation in SLE, but can relieve pericarditis.¹⁰⁰ Modern drugs can make life almost normal for sufferers. It seems that Conrad's use of colchicine with aspirin and quinine (though it can cause a lupus-like illness) was effective, despite having the wrong diagnosis.

CONCLUSION

Conrad would have been very interested in an alternative diagnosis for his recurrent symptoms — and amused by the history of SLE, as well as by its romantic associations. He desperately craved an explanation of the incessant suffering he had to bear. He was quite aware of the contemporary interest in psychosomatic illness, which he rejected as a possible cause of his symptoms. He longed for a more effective treatment that would have allowed him to complete his work and socialise better.

Would effective treatment have changed his writing? The struggle of the artist is certainly a source of inspiration. However, I believe that most of his work derives from his experiences of work, life and relationships rather than illness; and that his accounts of suffering refer mainly to conflicts of a human rather than a medical nature. The malaria in the Congo, his self-inflicted chest wound from a gunshot and his anxieties over sea commands would not have been altered by a later diagnosis and treatment of SLE. In one case, admittedly, he “struck out whole pages recklessly” of the final typed manuscript of a novel while ill.¹⁰¹ He suffered intolerable delays in completing his works, though he may have had more time to compose his stories in his mind when bedridden; and he suffered financially and materially as a result. The genius of Conrad's writing was not significantly affected by his recurrent illness.

⁹⁷ Joseph Conrad to Granville Bantock, 11 March 1915. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 5, p. 454.

⁹⁸ A. Karin et al. “Severe Upper Airway Obstruction from Cricoarytenoiditis as the Sole Presenting Manifestation of a Systemic Lupus Erythematosus Flare”. *Chest* 2002, vol. 121, pp. 990–993.

⁹⁹ A.M. Davidson and A.R. Birt. “Quinine Bisulfate as a Desensitizing Agent in the Treatment of Lupus Erythematosus”. *Archives of Dermatology* 1938, 37, pp. 247–253.

¹⁰⁰ J. Guindo et al. “Recurrent Pericarditis: Relief with Colchicine”. *Circulation* 1990, 82, pp. 1117–1120.

¹⁰¹ Joseph Conrad to John Galsworthy, 15 October 1911. [In:] *The Collected Letters of Joseph Conrad*, ed. cit., vol. 4, p. 486–487.

As one who might also be said like Conrad to have “read not only every line ever written by me, but also a good many lines written about me,”¹⁰² it has been fascinating to read and re-read all the published letters and put forward an argument for an alternative diagnosis of Conrad's illness. He suffered for so many years and has contributed so much to literature that it simply seems unfair that his illness was not diagnosed at a time when the knowledge that was then available to his physicians could have suggested SLE. Some medical literature of the time details effects of gout that are no longer recognised by modern medicine and I feel sure that the cases described in such papers might also have been more correctly diagnosed as an autoimmune disease such as SLE.

Conrad frequently destroyed letters — including most of those that had been written to him¹⁰³ and an archive of family letters that he had inherited.¹⁰⁴ He might well have not wanted his own letters to survive! However, they have survived and continue to greatly illuminate our understanding of his life and work.

WORKS CITED

- Baines, Jocelyn. *Joseph Conrad: A Critical Biography*. London: Weidenfeld & Nicolson (repr.), 1993.
- Batchelor, John. *The Life of Joseph Conrad*. Oxford: Blackwell, 1994.
- Bock, Martin. *Joseph Conrad and Psychological Medicine*. Texas: Texas Tech University Press, 2002.
- Conrad, Jessie. *Joseph Conrad As I Knew Him*. London: Heineman, 1926.
- Conrad, John. *Joseph Conrad: Times Remembered*. Cambridge: Cambridge University Press, 1981.
- Conrad, Joseph. *Heart of Darkness*. [In:] *idem. Youth: A Narrative and Two Other Stories*. Edinburgh and London: Blackwood, 1903.
- Conrad, Joseph. *Lord Jim*. Edinburgh and London: Blackwood, 1900.
- Conrad, Joseph. *The Mirror of the Sea: Memories and Impressions*. London: Methuen, 1906.
- Conrad, Joseph. *The Secret Agent*. London: Methuen, 1907.
- Conrad, Joseph. *The Shadow-line: A Confession*. London and Toronto: Dent, 1917.
- Conrad, Joseph. *Youth*. [In:] *idem. Youth: A Narrative and Two Other Stories*. Edinburgh and London: Blackwood, 1903.
- Greenhow E. Headlam. *On Chronic Bronchitis Especially Connected with Gout, Emphysema, and Diseases of the Heart: (Being Clinical Lectures Delivered at the Middlesex Hospital)*. Philadelphia: Lindsay and Blakiston, 1869.
- Gurko, Leo. *Joseph Conrad: Giant in Exile*. London: Muller, 1965.
- Karl, Friedrich R. *Joseph Conrad: The Three Lives*. London: Faber and Faber, 1979.
- Meyer, Bernard C. *Joseph Conrad: A Psychoanalytic Biography*. Princeton: Princeton University Press, 1967.
- _____. *Psychoanalytical Studies on Joseph Conrad: III. Aspects of Orality*. Reprinted from the Journal of the American Psychoanalytical Association, vol. XII, № 3, July 1964.
- Miller, David. *Today*. London: Atlantic, 2011.

¹⁰² Joseph Conrad to Carlo Placci, 26 October 1911. [In:] *ibid.*, vol. 4, p. 494.

¹⁰³ *The Collected Letters of Joseph Conrad*, ed. cit., Introduction to vol. 1, pp. xlv–xlv.

¹⁰⁴ Joseph Conrad to Edward Garnett, 20 January 1900. [In:] *ibid.*, vol. 2, p. 243.

- Najder, Zdzisław. *Conrad's Polish Background: Letters to and from Polish Friends*. London: Oxford University Press, 1964.
- Paris, Bernard J. *A Psychological Approach to Fiction: Studies in Thackeray, Stendhal, George, Eliot, Dostoevsky, and Conrad*. Bloomington and London: Indiana University Press, 1974.
- Sherry, Norman. *Conrad*. London: Thames and Hudson (repr.), 1988.
- Skolik, Joanna. *The Ideal of Fidelity in Conrad's Works*. Toruń: Marszałek, 2009.
- The Collected Letters of Joseph Conrad*. Ed. Friedrich R. Karl et al. Cambridge: Cambridge University Press, 1983–2008 (dates cited in brackets in the footnotes are the editors' estimated dates as they are uncertain).
- Watts, Cedric T. *Joseph Conrad's Letters to R.B. Cunningham Graham*. Cambridge: Cambridge University Press, 1969.

