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Review of Peter Fifield, *Modernism and Physical Illness: Sick Books*, Oxford, Oxford University Press, 2020, 272pp., £80 hardback, 9780198825425

Rachel Murray

Towards the end of *Modernism and Physical Illness*, Peter Fifield sketches out an early plan for the book: each chapter would be structured around a specific illness or disease in modernist literature, beginning with depictions of cancer, and moving through consumption and venereal disease before concluding, somewhat bathetically, with colds. Fifield's outline of the book he didn't write is key to understanding the one he did, for this is a study that seeks to resist the lure of a medicalized account of illness, where physical symptoms are sorted into specific pathologies, and where bodily experiences that do not fit existing categories tend to be overlooked or dismissed. Focusing on the work of five canonical and lesser-known British writers – Virginia Woolf, D. H. Lawrence, T. S. Eliot, Dorothy Richardson, and Winnifred Holtby – Fifield's compelling and highly readable study uncovers a more varied and 'generatively textured' (3) account of ill health in the early twentieth century that is brought to the fore by modernism's emphasis on embodied subjectivity, relationality, and non-normative experience.

Fifield's book joins a number of recent studies – including Maren Tova Linett's *Bodies of Modernism* (2016) and Elizabeth Outka's *Viral Modernism* (2019) – in seeking to counteract the dominant emphasis in modernist studies on mental as opposed to physical illness. Yet while the former text is focused on particular disabilities – blindness, deafness, mobility impairments – and the latter explores the cultural, social, and aesthetic aftermath of a particular illness event, the 1918 influenza pandemic, *Modernism and Physical Illness* is concerned with 'small stories of fictional and actual individuals laid-up and struck down' (26) with fevers and coughs, toothaches and skin conditions. Indeed, Fifield's study begins, rather than ends, with a cold, the famous snuffle experienced by Madame Sosostriis in *The*

Waste Land – a detail that not only highlights ‘the mundane grubbiness of everyday modernity’ (1), but which also exemplifies modernism’s mixing of the high and the low, the sacred and the profane, the intellect and the body. This is not to say that the study is concerned only with minor ailments (typhoid and tuberculosis are dealt with at length), nor that it seeks to trivialise its subject matter, though, like Eliot, it remains attuned to its lighter moments. Rather, it develops an understanding of physical illness that is at once exceptional and everyday, impossible to see clearly or render faithfully, yet right in front of our (sniffly) noses. Moving from well-known literary works, such as Lawrence’s *Lady Chatterley’s Lover*, and Woolf’s *Mrs Dalloway*, to more overlooked novels by Dorothy Richardson and Winnifred Holtby, the study shifts gradually from an individual to a social perspective on illness, telescoping out from the suffering bodies of characters and authors to larger, female-dominated networks of care, loyalty, and obligation that extend from the family to the nation state.

Modernism and Physical Illness takes as its starting point Virginia Woolf’s suggestion in ‘On Being Ill’ (1926) that bodily sickness might not necessarily be an impediment to creativity and may instead result in moments of ‘heightened mental acuity’ (11). The notion of physical illness as potentially enabling for modernist writers, rather than merely disabling, is developed in the first chapter on D. H. Lawrence, a ‘famously unwell man’ (31). Here, Fifield identifies an important tension between Lawrence’s letters, in which illness is often presented in starkly negative terms as symptoms of a wider social and moral decay, and his fiction, which frequently ‘connects the failure of the body with moments of insight or rapture’ (32). In both cases, illness is presented as an intensifier, whether positive or negative, for embodied sensory experience: though it often takes on a contradictory significance, Lawrence’s writing continually invests the body and its sufferings with meaning. In the next chapter, Fifield’s argument really hits its stride during its analysis of

Rachel Vinrace's tropical fever in *The Voyage Out* (1915). Here, the demands of a disease that 'refuses incorporation into a human-scaled and shaped narrative' forces the author to slough the conventions of the bildungsroman-cum-marriage-plot, adding that 'sickness is where Woolf's modernism emerges' (87). The latter half of the chapter, which focuses on the treatment of influenza in *Mrs Dalloway* (1925) suffers slightly from unfortunate timing: though this had been a neglected topic when Fifield was writing the book, since the outbreak of the coronavirus pandemic Clarissa's illness has been the subject of numerous articles and think-pieces, as well as a wave of witty tweets ('Mrs Dalloway said she would buy the sanitiser herself').¹ Still, this is no fault of the author, and the chapter breaks new ground in examining the depiction of illness from the perspective of onlookers. In a strikingly prescient observation, Fifield notes that the influenza pandemic 'was an uncanny mix of the most vivid bodily suffering and straightforward disappearance', with Woolf's novel evoking the ill subject's 'combination of hyper-visibility and obscurity' (103).

The third chapter focuses on skin conditions in T. S. Eliot's writing with a particular focus on the young man carbuncular in *The Waste Land* (1922). As well as uncovering evidence that the poem's preoccupation with states of epidermic irritation were informed by Vivien Eliot's treatment for a skin condition, the chapter identifies a significant reversal of the 'flow of contagion usually associated with prostitution' (136) in Eliot's figuring of the epidemiological danger posed by the possibly syphilitic young man towards the female typist. The fourth chapter examines Dorothy Richardson's *Pilgrimage* alongside her writing for the *Dental Record*. Reading the novel against the grain of its reputation as the prototypical stream-of-consciousness text, Fifield suggests that Richardson tends not to linger on personal experiences of illness or bodily suffering, preferring instead to 'enmesh it with professional

¹ Evan Kindley, 'Why Anxious Readers Turn to *Mrs Dalloway*', *The New Yorker*, 10 April 2020, at www.newyorker.com/books/page-turner/why-anxious-readers-under-quarantine-turn-to-virginia-woolfs-mrs-dalloway (accessed 4 May 2021).

expertise and extended experience of social networks' (148). As well as foregrounding the individual's entanglement in wider networks of care, Fifield shows how Richardson's novel examines the difficulty of accommodating personal experience and registering individual suffering within the collectivist framework of state care.

The final chapter, on the English novelist and journalist Winifred Holtby, consolidates the gradual shift from individual to social explorations of illness; it also makes explicit a strand of thinking that has begun to emerge throughout the preceding sections: that a history of modernist illness cannot be thought apart from a wider account of female experience during this period (186). Examining Holtby's fiction – in particular her 1936 novel *South Riding* – Fifield demonstrates how a fuller picture of modernist illness is able to emerge when so-called 'high' and 'middlebrow' texts are examined alongside one another. The chapter also examines Holtby's 'light touch' (205) writing for non-literary magazines on the subject of illness, which includes fabulously titled articles such as 'First Catch Your Cold; And Then Enjoy It', and 'Crumbs in a Bed: The Irritant as Stimulant'. Fifield's late return to the subject of the sniffle harks back to the study's opening example of the clairvoyant's cold in *The Waste Land*, but here too there is a serious point to be made. Just as the nuisance of toast crumbs can stimulate the ill subject to action, for Holtby, as for all of the writers of the study, 'the discomforts of illness ... are the source of human qualities of effortful amelioration, upon which modernity itself rests' (213). Here, as elsewhere, sickness is revealed to be fundamental rather than incidental to the writing of this period, with the discomforts of ill health stimulating the creative responses of a host of modern literary figures.

Modernism and Physical Illness wears its scholarship lightly, but it is like to be of interest to a wide range of readers, including but not limited to those who are working on modernist women writers, disability studies, middle-brow fiction, and literature and medicine. Combining archival research with a wealth of historical information on everything

from anti-vaccination movements to Austro-Hungarian dentistry, the study moves seemingly effortlessly between large-scale social and political considerations to detailed close readings of carbuncles and crumbs. Shifting its attention outwards from the canon to the margins of modernism, it suggests that there is still much ground to be covered before the subject of physical illness has been exhausted.