

Unsullied Wilde

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The biography of Oscar Wilde by the late Professor Richard Ellmann has justly received enormous critical acclaim [1]. There is, however, an important medical matter raised by Ellmann that is difficult to support. Although he admits in a footnote, that medical opinion is 'divided' [1, p 88], central to Ellmann's conception of Wilde's character is his belief that the great author suffered from tertiary neurosyphilis and that the disease not only caused Wilde's death but severely influenced his conduct and behaviour during his years of decline and 'exile' [1, pp 88, 89, 99, 262, 546-7].

It is possible that Wilde contracted syphilis but the disease failed to progress. Ellmann states that Wilde contracted a primary infection from a prostitute in Oxford in 1878. He received a course of mercury which allegedly turned his teeth black and afterwards Wilde usually covered his teeth while talking. Later his front teeth would fall out (more likely a symptom of chronic gingivitis than of mercurialism). There is no mention of recurrent secondary syphilis or, indeed, clear evidence of any type of recurrence. The 'Oslo study' [2] would demonstrate that not all cases of primary syphilis would progress. Moreover, mercury had a mild spirillicidal action (it could elicit a Herxheimer reaction) and it is possible that it could abort syphilis in the early stages [3]. The Oslo study is unclear on this issue since it was not a double-blind trial.

Even this account of primary syphilis is dubious since it comes from early biographies by Ransome and Harris in which Robert Ross uses 'syphilis' as an excuse for both Wilde's homosexuality and the 'abandonment of his family' [4, p 88].

Wilde's death, from suppurative meningoencephalitis or a brain abscess, actually resulted from a chronic suppurative otitis media involving the right ear. He mentions this indisposition in a petition for parole, addressed to the Home Secretary and dating from 1896 [4, pp 144-7]:

The petitioner would also point out that while his bodily health is better in many respects here than it was at Wandsworth, where he was for two months in the hospital for absolute physical and mental collapse caused by hunger and insomnia, he has, since he has been in prison, almost entirely lost the hearing of his right ear through an abscess that has

caused a perforation of the drum. The medical officer here has stated that he is unable to offer any assistance, and that the hearing must go entirely. The petitioner, however, feels sure that under the care of a specialist abroad his hearing might be preserved to him. He was assured by Sir William Dalby, the great aurist, that with proper care there was no reason at all why he should lose his hearing. But though the abscess has been running now for the entire time of his imprisonment, and the hearing getting worse every week, nothing has been done in the way even of an attempted cure. The ear has been syringed on three occasions with plain water for the purpose of examination, that is all. The petitioner is naturally apprehensive lest, as often happens, the other ear may be attacked in a similar way, and to the misery of a shattered and debilitated mind be added the horrors of complete deafness.

The ultimate source of the complaint was a ruptured ear drum acquired in prison [1, p 465]. Ellmann states that the injury came about when Wilde was forced to attend chapel and 'fainted'. One would certainly wish to know more about the immediate circumstances of the injury.

Wilde underwent a series of operations (actually debridements of devitalised debris) but the condition failed to disappear. It grew progressively more painful and Wilde's ear continued to discharge. By October 1900 it threatened his life. Wilde was treated by Dr Maurice Tucker who referred him to Dr Paul Cliess, an otolaryngologist, who performed further debridements and employed a panseur to dress the discharging and infected ear each day [1; 4, pp 365-71].

Robert Ross tells of Wilde's last hours which culminated in his death on 30th November 1900 in Paris [4, p 371]:

About 5.30 in the morning a complete change came over him, the lines of the face altered, and I believe what is called the death rattle began, but I had never heard anything like it before; it sounded like the horrible turning of a crank, and it never ceased until the end. His eyes did not respond to the light test any longer. Foam and blood came from his mouth, and had to be wiped away by someone standing by him all the time ... the painful noise from the throat became louder and louder ... at 1.45 the time of his breathing altered. I

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went to the bedside and held his hand, his pulse began to flutter. He heaved a deep sigh, the only natural one I had heard since I arrived, the limbs seemed to stretch involuntarily, the breathing came fainter; he passed at 10 minutes to 2 pm exactly.

After Wilde's death Robert Ross and Reginald Turner removed 'debris' (probably an involucrum of devitalised bone) from Wilde's right ear [1, 4].

Wilde's physician's accurate report holds that suppurative meningo-encephalitis was responsible for his death [1, p 547; 4].

The undersigned doctors, having examined Mr. Oscar Wilde on Sunday, 25th November determined that there were significant cerebral disturbances following a right ear suppuration of many years standing.

On the 27th the symptoms became graver and the diagnosis of meningo-encephalitis is without contest. In the absence of any localising signs trepanning would be of no avail. The treatment advised is therefore purely medicinal ...

Wilde's death was undoubtedly due to suppurative disease of the brain, either meningo-encephalitis as Tucker and Clein suggest, or possibly due to a deep right temporal lobe abscess without any localising signs. No autopsy was performed. Wilde was only 41 years old when he died.

Wilde had an itchy rash present for many months before he died. He wrote that 'When one has one's bath one looks like a leopard' [1, p 545]. This rash was not thought to be syphilis. Contemporary physicians

were well aware of the protean dermatological manifestations of this disease [5] even though it was not until 1905 that the causative agent was found by Schaudinn and Hoffman [6].

Wilde's mental faculties were unimpaired—this is inconsistent with Ellmann's diagnosis of neurosyphilis. From his last years come *De Profundis*, *The Ballad of Reading Gaol* and much important correspondence. Perhaps the bitterest irony concerning Wilde's untimely death was that his father, Sir William Wilde (1815–1876), was a famous aural surgeon who described and forecast the condition which was to claim his son's life in his pioneering monograph of 1851 [7].

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References

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