“COMPLAINING SCROLLS”: COLERIDGE’S REPRESENTATIONS
OF ILLNESS, 1800-1803

A Thesis
submitted to the Faculty of the
Graduate School of Arts and Sciences
of Georgetown University
in partial fulfillment of the requirements for the
degree of
Master of Arts
in English

By

Alexis K. Chema, B.A.

Washington, DC
April 24, 2009
# Table of Contents

Introduction ..............................................................................................................................................1

Part I

1.1 “Child of Darkness & Discomfort”: Coleridge and his Disorders ..............................................7

Part II

2.1 “Startle this dull pain, and make it move and live!”: Performative “Dejection” ......................23

2.2 Illness Confessional in the Correspondence ...........................................................................45

Conclusion ...............................................................................................................................................66

Bibliography ..........................................................................................................................................69
All day, all night the body intervenes; blunts or sharpens, colors or
discolors, turns to wax in the warmth of June, hardens to tallow in the
murk of February. The creature within can only gaze through the pane [of
the body]—smudged or rosy; it cannot separate off from the body like the
sheath of a knife or the pod of a pea for a single instant; it must go through
the whole unending procession of changes, heat and cold, comfort and
discomfort, hunger and satisfaction, health and illness, until there comes
the inevitable catastrophes; the body smashes itself to smithereens, and the
soul (it is said) escapes.¹

-Virginia Woolf, “On Being Ill”

Virginia Woolf writes in “On Being Ill” that under normal conditions—that is,
those of health—we hardly notice the body. During illness, though, this illusion of
mind/body separateness becomes impossible to maintain. The experience of illness, it
would seem, challenges one’s ability to believe in this separate “creature within,” the soul
that can escape, at all. I begin with Woolf because her main point, that illness is central
and transformative to the individual who experiences it, will be one of this investigation’s
foundational claims. Woolf goes on to wonder at the absence of literary explorations of
the subject and encourages writers and critics to pay more attention to what she
characterizes as this heretofore unexplored dimension of human life: “it is not only a new
language that we need, more primitive, more sensual, more obscene,” she writes, “but a
new hierarchy of the passions; love must be deposed in favour of a temperature of 104;
jealousy give place to the pangs of sciatica; sleeplessness play the part of villain, and the
hero become a white liquid with a sweet taste—that mighty Prince with the moths’ eyes

¹193-194
and the feathered feet, one of whose names is Chloral” (194-195). I propose, though, that literary explorations of the subject do exist, and that these make it clear how illness is not only central to universal human experience, but culturally and historically specific in a way that does not figure into Woolf’s treatment of the topic.

Since Woolf published her essay in 1921, increasing numbers of critics have answered her appeal to delve into that “daily drama of the body” (194). Many who have done so have been motivated by an interest in the development of subjectivity from the Romantic period on, and have looked to the illness experience in relation to the so called “subjective turn” and its legacy. Dorthea von Mücke exemplifies one mainstream reading of romantic representations of illness by identifying them as part of a larger trend that she calls “an example of a hypochondriacal, melancholic, and suicidal obsession with the self” (7). This interpretation considers illness as a private inner experience, knowable to the sufferer only—the “creature within” to use Woolf’s term. Heightening cultural interest in representing or reading representations of individuals’ experiences of illness therefore corresponds with heightening attention to interiority, a large-scale intellectual shift often attributed to modernity in general. This project will bring this interpretation of literary representations of illness to bear on the autobiographical writing of Samuel Taylor Coleridge, poet, philosopher, and prolific chronicler of his own disorders. In doing so I hope to consider how Coleridge’s autobiographical writings on his disorders might

---

2 Porter and Porter comment on illness and individualism in the context of social class: “This coming out of the hypochondriac as a cultural type marks an important moment. It signals a stage in medicine itself, with lay desires generating a medical consumerism integral to the wider development of market society. But it also had deeper cultural affinities. Polite society encouraged social individualism. People in the fast lane were expected to be different, special, interesting, prima donna-ish, albeit within the permitted degrees of conventional polish…” (209).
complicate and enrich our understanding of both Coleridge as a thinker and the relationship between Romantic representations of illness experience and interiority more broadly.

The starting point to my investigation will be that Coleridge integrated his experiences of physical disorder into his construction of authorial identity in his poems as well as in his letters and journals. My project explores the ways that Coleridge adopted and adapted the “sick role,” typically imagined as destructive and disordered, with authority and in the service of his creative enterprise.

In some ways Coleridge was like many Georgians, authors and non-authors alike, who wrote accounts of their experiences of illness. The practice had many manifestations and many non-literary purposes, which include recording the effects of different treatments and home remedies, keeping track of telling changes in the trajectory of disease, seeking or offering consolation, etc. My primary texts, Coleridge’s verse and prose accounts of his experiences of illness, could be, and indeed have been, read in this light—that is, as case studies. They often include a level of medical specificity and detail that invite the reader to participate with Coleridge in diagnosing his disorders. He describes a condition in “The Pains of Sleep,” for example, that most critics diagnose as a bad opium trip; others speculate that these pains are actually most similar to classic symptoms of opium withdrawal. On a more literal level, Coleridge counted many medical men among his friends and correspondents, and his letters frequently detail his

---

3 Ashton 112
4 Holmes 354-355
afflictions with explicit requests that his reader write back with a medical opinion. His notebooks record recipes for home nostrums and detail health regimes to try in the future. This project will spend some time considering the nature of Coleridge’s sick body and the actual and undeniable impact of illness in his life, but will be ultimately more interested in investigating Coleridge’s authorial representations of his illness than the illness itself.

One of my fundamental claims will be that although the experience of illness might feel destructive or alienating—dissolving relationships, sundering identity, infantilizing the sufferer—once Coleridge takes on his physical disorders as subjects of public literary self-expression, his illness develops another dimension of signification. The difference between experience and representation is especially relevant to the subject of illness because the suffering body is so often characterized as inarticulate. Roy Porter and Dorothy Porter write that “Pain itself defies verbalization and analysis” (44). Elaine Scarry goes further, claiming that “Physical pain is not only itself resistant to language but also actively destroys language, deconstructing it into the pre-language of cries and groans” (172). Woolf, too, points out the impoverished vocabulary of illness: “The merest schoolgirl, when she falls in love, has Shakespeare or Keats to speak her mind for her; but let a sufferer try to describe a pain in his head to a doctor and language at once

---

5 Sometimes he would also ask for medical advice on behalf of friends, whose symptoms he would narrate. Wordsworth was a frequent subject of Coleridge’s interested intervention, as Coleridge demonstrates in a July 1800 letter to Davy. In it he quotes a long medical case study from Karl Philipp Moritz’s psychological journal, *Gnothi Seauton oder Das Magazin zur Erfahrung seelenkunde*. After reflecting briefly on the quoted passage, Coleridge turns to Wordsworth: “In Wordsworth’s case, which I have sent to Beddoes, you will see a curious instance of ideas, linked with feeling habitually, at length forming blind associations with a particular pain, probably in the right hypochondrium—so as immediately to excite that pain” (*CL* 1:606).

6 This paper will consider illness representations from Coleridge’s unpublished correspondence alongside published work. Adapting Paul Magnuson’s interpretation, delineated in *Reading Public Romanticism*, my use of the term “public” will nevertheless extend to the letters because of their nature as essentially and self-consciously circulating texts that assume readers beyond the author himself.
runs dry” (194). Obviously Woolf was not thinking of Coleridge here, whose letters to his doctors (and many other people) overflow with descriptive language explaining the pains in his head (and many other places). My consideration of Coleridge’s autobiographical writing will provide a corrective to this way of thinking of illness and language, demonstrating that he articulates the very real pains of the body, and that this act of articulating illness through literary representation changes the way we understand the experience itself. Coleridge’s handling of it shows that at least on some level illness represented and communicated in language is no longer only destructive, dis-ordering, and isolating, but becomes at once also constructive, both of individual and social identity.

* * * *

From Coleridge’s own time until recently, his illnesses have been largely interpreted as incidental to his intellectual pursuits and the body of work he produced. To the extent that his health has been considered, investigations have focused on how Coleridge’s disorders impeded his literary production, or were offered as an excuse—legitimate or contrived—for his various shortcomings as a poet.

As valid as this perspective may be, it fails to account for the role of illness in the philosophy and aesthetics of Coleridge’s poetry and prose itself. My own approach, invested as it is in examining Coleridge’s representation of his own subjective experience, is itself possible and relevant precisely because of Coleridge’s own self-
conscious explorations of his subjective experience in the first place. I care about Coleridge’s disorders because Coleridge cared about his disorders, both as personally and intellectually formative. Neil Vickers has drawn much-needed attention to the important place that medicine and disorder have in relation to Coleridge’s work, demonstrating in Coleridge and the Doctors that “medicine was a central source of intellectual argument for Coleridge, not a peripheral one” (6). This project will build on this assertion by examining the literary function of Coleridge’s representations of his experiences of medical disorder. How does his practice operate rhetorically? What role did illness play in his poetics? Coleridge’s artistic appropriation of his very real physical suffering in the service of his self-created authorial/poetic identity is central, I believe, to Coleridge’s own poetic practice, as well as to the larger story of illness and subjectivity in the Romantic period. It becomes a model for later Romantics (De Quincey, Shelley, Keats, and others who also construct their authorial identity in relation to their own bodily disorders) and strengthens the problematic romanticization of illness that has troubled modern and contemporary critics. Coleridge’s metaphoric use of illness (to speak in Susan Sontag’s useful terms) does indeed carry problematic implications—all the more so because of how complicated a role illness played in Coleridge’s own self-analytical representations, and how much he struggled with it on personal and intellectual levels.

While illness played an important role in his life, writings, and thought, it was by no means monolithic. Coleridge himself worked persistently, but in vain, to make

---

7 Most notably Susan Sontag, whose Illness as Metaphor (1978) criticizes the conflation of disease and patient in relation to tuberculosis and cancer.
coherent sense of his disordered condition in practice and theory. Coleridge’s life and writings were marked by different disorders, which he manipulated and deployed in different ways and for different ends, at different stages of his life. For the purposes of my project, this paper will focus on the autobiographical writing produced between the years of 1800 and 1803, a time when, as we will see, illness was particularly influential in Coleridge’s development as a poet and thinker.

This project focuses on how the converging dramas of Coleridge’s literary, philosophical, and medical crises of the years 1800-1803 are worked through on the level of his authorial representations of his disorders during this period. The first part of the project investigates Coleridge’s developing understanding of his physical disorders in the context of his philosophical and aesthetic “systems.” The second part analyses his representation of his illness in his autobiographical letters (public and private, verse and prose). I hope to show that by situating his self-representations of illness experience in and as discourse, Coleridge assumes a kind of authority. This authority, however, is based on a model of interpersonal dialogue that is in tension with readings of illness representations as essentially private to the individual as well as with readings of the Romantic author as “individual genius.”
I.

1.1 “Child of Darkness & Discomfort”: Coleridge and his Disorders

“For a philosopher an illness is a school of physiology”

- Frederick the Great

During the late fall of 1800 Coleridge fell seriously ill with an affliction from which he would never fully recover. From this time, Coleridge became fascinated by his health; it would serve as a source of physical and emotional tribulation, but also metaphysical investigation, for the rest of his life. The next several years consisted of long bed-ridden stretches of weakness and affliction punctuated by periods of halcyon health, and sometimes surprising bursts of physical vigor. The following letter to Thomas Poole captures Coleridge’s own curiosity with his vacillating condition:

I have indeed been very, very ill…. However, I am somewhat better—and so far from weak now that I walked yesterday, tho’suffering grievously from asthma in consequence of the Drizzle, Fog, & Stifling Air, the 19 miles from Grasmere to Kendal in four hours & 35 minutes, & was not in the least fatigued—. My state of Health is a Riddle. (CL 2: 1035)

At first Coleridge interpreted his capacity to suddenly rebound from the depths of sickness as a promise of eventual cure and recovery. But relapses invariably followed,
and Coleridge began to regard his periods of wellness as little more than fleeting reprieves from a pervasive condition of sickness which always threatened to materialize.

Thus, while many of his health complaints may seem unrelated, Coleridge came to consider all of the diverse ailments he suffered during this period, from swollen eyelids to nausea to insomnia, as various manifestations of this controlling disorder, which he referred to as his “Disease.” Coleridge did indeed think of his state of health a riddle—but it was one he sought doggedly to solve. He identified the disorder first as rheumatic fever, later as gout or “rheumatic gout,” then eventually as scrofula, which he defined as constitutional. He explained his condition to his friend, fellow poet, and brother-in-law, Robert Southey, on Christmas Day, 1802 as “A deeply ingrained, tho’ mild Scrofula, is diffused thro’ me: & is a very Proteus” (CL 2: 895). Eventually he resolved to take drastic measures: a long convalescence abroad seemed the only possibility of restoring his health. But though he thought of this scheme as his best option, he remained doubtful of what he could hope, musing “[I] have struggled on in a series of convalescence & relapse, the disease still assuming new shapes & symptoms—and tho’ I am certainly better than at any former period of the Disease, and more steadily convalescent; yet it is not mere Low Spirits that makes me doubt, whether I shall ever wholly surmount the effects of it.”

This same period of deteriorating health saw Coleridge rely more and more heavily on opium, leaving him dependent on the drug and eventually fully addicted.8 Coleridge is known to have used opium before this point, both for its palliative and

---

8 See Molly Lefebure’s *The Pains of Opium* for a fuller account of Coleridge’s opium addiction.
recreational properties. Both categories of opium use were common enough in the Georgian period, when the drug served as the only effective pain killer and was easily procured from a chemist. For my purposes it is not especially relevant whether his opium use was responsible for his poor health or whether it was an imperfect but ultimately necessary treatment for some chronic condition. For Coleridge, opium and disease were two sides of the same coin. Surely opium and ill health became so bound up together in Coleridge’s experience of disorder as to make any attempt at pulling them apart to consider either in isolation necessarily incomplete.

After falling ill in 1800 Coleridge would insist for the rest of his life that he simply could not be understood by anyone who did not take his health into account, and seriously. For him, his physical state of health or disorder was a part of his identity—“not merely in me; it is me,” as he would insist to Southey (CL 2: 974). Coleridge’s correspondence testifies to the importance of the subject to his own self-representation; he communicates parts of the story of his health in most letters, and to most of his correspondents.

In addition to the implicit appeal to attention we can identify from the frequency and detail the letters grant to the subject, Coleridge goes out of his way to explicitly insist to his readers that his health is of the utmost importance. He writes to Mrs. Coleridge in a letter from November 1802 that a line from a letter she had sent him “immediately disordered my Heart, and Bowels.” The lines characteristically link his disordered emotions with his disordered health, and he goes on to state “it is necessary, absolutely
Physiological Perspectives

Beyond the fundamental claim to relevance that Coleridge’s attention to his illness makes, the self-analytical descriptions that he writes tell us a great deal about his perceptions of health and sickness, and the physiological relationship he saw between the body and the self. The passage quoted above is characteristic of Coleridge’s letters in that it represents his illness as holistic, inextricably wound up with his thoughts and emotions. The same letter that upsets him on an emotional level, disordering his heart, also upsets his body on a physical level, disordering his bowels as well.

Although Coleridge claims that there is something “peculiar” about the interrelatedness between his physical and mental states, this kind of theory of correspondences was neither original nor unique to Coleridge. He borrows this logic from a long tradition that traces back through Galenic and Hippocratic humoral theory whereby the balance of the body’s four humors governs health, emotions, and character more broadly. While medical practice based on Galenic theory had fallen out of favor over the course of the eighteenth century, its metaphors had not. As it existed in Georgian culture, illness still largely resisted being categorized as an affliction of the body, soul, or mind in isolation. Porter notes that the language Georgians tended to use for their inner functioning reveals an impressionistic understanding of bodily processes that linked...
sensation and emotion, as we noticed in Coleridge’s comment about his disordered heart and bowels. Porter explains, “People spoke of ‘sympathies’ between organs, of ‘obstructions,’ or of want of ‘spirits,’ and so forth. Their terms were allusive, applying metaphors from the world at large, and not least from emotional processes” (46).

Common complaints like pain in one’s “reins,” or a disorder of the “spleen” were vague and could apply to organs (“reins” referred to the kidneys), areas of the body (the lower back region in general), as well as associated functions or affective conditions (Porter 46). For example, having a dysfunctional spleen was thought to cause the well-known but ill-understood condition called “spleen.” “Spleen” itself was an outgrowth of humoralism’s melancholia, and as much an emotional disorder as a physiological one, with symptoms like depression, moodiness, irritability, etc. Porter wonders in “Against the Spleen,” “how many such [splenetic] people even knew where their spleen was” (46).

Furthermore, certain culturally distinctive disorders were especially characterized by symptoms that themselves seem hard to categorize as either physiological or psychological. Among others, these included conditions like nervous disorders, melancholia, hypochondria—which, as Maria Frawley observes, was thought of as “a chronic disease of the whole person” with observable, somatic symptoms, and not the “imaginary illness” that contemporary usage tends to imply. Frawley goes into some of these, noting that “Vapors, dejection, irritability, withdrawal, insomnia or disturbed sleep, abnormalities of appetite, and headaches were just a few of the symptoms thought to accompany and reveal hypochondriasis” (69). In spite of its associations—then and now—with the patient’s mind and feelings, hypochondria, like “spleen,” had a corporeal
seat: the hypochondrium, an anatomical term designating the organs of the lower abdomen including the liver, gall-bladder, and spleen (OED). The physiological disorder would affect the hypochondriacal person at every level.

The healthy person, on the other hand, was imagined in terms of his or her harmonious, balanced, well-regulated constitution. For Coleridge and his contemporaries, the “constitution” was the underlying determinant of wellbeing in the human system as a whole. Porter calls it “the inner stock of vitality and strength, the vigour that flowed when all one’s organs worked effectively together, without the artificial crutches of medicine” (28). Diderot’s *Encyclopédie* explained the workings of the healthy constitution in the same terms:

Sensibility being apportioned to each organic part of the body, each organ feels and lives in its own manner, and the combination and sum of these particular lives makes the general life, in the same way that the harmony, symmetry and arrangement of these small lives produces health. (15: 42)

As a result, a disorder of any of these “small lives,” necessarily interrupts the harmonious functioning of the general life. Given this, it is unlikely that Sara Coleridge would have been surprised by her husband’s assertion that his “bodily Feelings” were linked with his “Ideas.” He most likely meant that the correspondence between sensation, emotion, and

---

9 “Sensibilité dans l'état contre nature, ou par rapport à la Pathologie. La sensibilité, suivant tout ce que nous venons d'exposer, étant distribuée par doses à toutes les parties organiques du corps, chaque organe sent ou vit à sa manière, & le concours ou la somme de ces vies particulières fait la vie en général, de même que l’harmonie, la symétrie & l'arrangement de ces petites vies fait la santé.”
thought governed his health to a “peculiar” extent (—that is, even more than one would expect from a typically sensible person).

Just as disorder could move easily between Coleridge’s figurative parts—mind, soul, body—he also imagined his disease as “proteus,” as he tells Southey, able to afflict any of his literal parts. He explains the mutability of his “irregular Gout,” which “made it’s outward shews sometimes in one or other of my fingers, sometimes in one or more of my Toes, sometimes in my right Knee & Ancle; but in general it was in my left Knee and Ancle—here the Disorder has been evidently attempting to fix itself” (CL 2: 731).

This perception of disorder was similarly conventional in Georgian England (Porter 120). Each minor gouty finger, each toothache or swollen testicle, threatened to migrate and metastasize into a more serious condition affecting not just the “small life” of the local organ, but “the general life,” of wellness more broadly. This is exactly what happened, Coleridge claimed, as the long-term result of a seemingly inconsequential dental complaint: “My indisposition originated in the stump of a tooth over which some matter had formed: this affected my eye, my eye my stomach, my stomach my head; and the consequence was a general fever” (CL 1: 394). Here the disorder moves from one place to the next is so quickly that we do not even see the intermediate manifestations before it escalates to a more important part with more alarming implications, finally ending with the conquering of the system as a whole by a “general fever.”

Although Coleridge becomes increasingly disillusioned with the possibility of finding a true remedy that will cure him once and for all of his disease, he fills his letters and notebooks from this period with plans for improving his health. He thus claims a
certain degree of control over, and responsibility for, his medical condition. His prescriptions include positive thinking (“Hope is itself no mean Medicine”), trying different medicines and nostrums (“I shall take for a few weeks the Rust of Iron in pretty large doses”), regulating diet and exercise (“I will observe every rule of the most scrupulous Prudence & Forecast with religious strictness, using regulated Diet & regulated Exercise”), and, when none of these proved effective, seeking out better climate away from “Wet & cold” to which his weakened constitution made him overly sensitive. The medical beliefs he expresses here were commonplace, reflecting widely-acknowledged, if not universally accepted, Georgian medical dogma regarding “self-physicking” and preventative care. The broader implication that a man must be his own physician, proactively taking his health into his own hands undergirded the eighteenth-century popularity of home self-care manuals, from George Cheyne’s *Essay on Health and Long Life* (1725), John Wesley’s *Primitive Physick* (1759) to William Buchan’s *Domestic Medicine* (1769), Beddoes’s *A guide for the self-preservation, and parental affection; or Plain Directions for enabling people to keep themselves and their children Free from several Common Disorders* (1794).

Coleridge was equipped with a much more precise medical knowledge than the average educated Georgian as a result of his scientific interest and study, friendship with doctors, etc., which I will touch on later. But still, his own medical knowledge was limited by the state of medicine largely. We must remember that Coleridge lived in a period before the advent of modern medicine, which most medical historians say arose with the advances and codification of bacteriology and the rise of antiseptic surgery—
developments which were not systematically adopted by the medical establishment until the 1870s (Frawley 51). Proponents of spontaneous generation remained influential through the beginning of the 19th century, and while it was progressively dismantled, modern theoretical advances replaced it only gradually. Germ theory itself, whereby disease is spread by microscopic organisms, though tracing intellectual roots back to antiquity, remained controversial through the end of the 19th century. Miasma theory also had widespread support throughout the 18th and 19th centuries, and posited that sickness was caused by some quality of the air (malaria, for example, was thought to be generated by the bad air of swampy or marsh places before the discovery that it was a parasitic disease transmitted by mosquitoes).

Metaphysical Perspectives

During this same period of ill health, Coleridge was also delving deeply into abstract philosophy—“abstruse researches” to use Coleridge’s term—revising and reevaluating his own philosophical principles on several fronts in the process. He wrote on many occasions that his intense metaphysical study affected his state of health, but his state of health also affected the content of his metaphysical study (and, by extension, his poetics), which he sought to make coherent with his experience. “I feel strongly, and I think strongly, but I seldom feel without thinking, or think without feeling…. My

---

10 For Coleridge on miasma theory (he accepted its basic assumptions) see his marginalia to the Edinburgh Medical Journal (CM 2: 362-363).
philosophical opinions are blended with, or deduced from, my feelings,” Coleridge would explain years later (qtd. in Lefebure 122).

Coleridge was struggling to work out a system that could account for his disorders in a way that was both true to his philosophical ideals and the experimental data of his lived experience.\(^{13}\) Philosophically, Coleridge was engaged deeply with questions regarding individual subjectivity and how the subject interacts with the world. He wrote to Godwin in June 1803 that all of his studies were devoted to “the two grand Problems, how, being acted upon, we shall act; how, acting, we shall be acted upon” (CL 2: 949). He was already invested in promoting a defense of the essential active nature of the subject that was to become so central to his theories of the primary Imagination and the “I AM” as set forward most prominently (albeit still incompletely) in the famous chapter 13 of the Biographia Literaria. He wrote about this problem to Poole in March 1801, during his recovery from that winter’s especially severe health crisis:

Newton was a mere materialist—Mind in his system is always passive—a lazy Looker-on on an external World. If the mind be not passive, if it be indeed made in God’s Image, & that too in the sublimest sense—the Image of the Creator—there is ground for suspicion, that any system built on the passiveness of the mind must be false, as a system. (CL 2: 709)

The philosophy of health that corresponded to this logical system would thus hold that while material conditions (the state of one’s constitution, environmental factors),

---

\(^{13}\) Owen Barfield, for one, argues in What Coleridge Thought that Coleridge actually succeeded, that “in [Coleridge’s] own mind his ‘system’ was indeed a coherent system and not a hodge podge of ‘inspired fragments’” (5).
influence the physical system, the individual ultimately has the active power to shape experience, and thus transcend—psychologically if not physically—physical disorder.

As Vickers observes, Coleridge’s letters from this period demonstrate an interest in the potential of this kind of medical mentalism. Especially in the earlier years of his illness, Coleridge thought that he could take control of his health through preventative or curative measures (diet, exercise, choosing to live in a salubrious climate, medication, etc.). Even if these failed to reestablish the constitution, a strong will could provide the fortitude needed to endure the pains of the body. From a mentalist perspective, suffering from poor health was akin to a failure of the will, and Coleridge does bemoan his own weak will as the “source” of his illnesses on numerous occasions.

But I think Vickers goes too far in his argument that “[e]very change of mind that Coleridge underwent on the subject of his infirmities had the effect of strengthening his commitment to medical mentalism” (Doctors 7). After all, he passionately insists that his disease is not self-caused at least as often. During this period Coleridge was testing his philosophical claims by considering the experimental observations of his own experience—early examples of Coleridge deducing his philosophical opinions from his feelings. In this case, as his health became progressively worse his lived experience with illness seemed to be providing him with contradictory data: illness did in many ways

---

14 By 1814 he had become emphatic in his defense of his opium use and expresses a desire to expose the inner workings of his body. He asked Dr. Sainsbury “Have you ever heard of a man whose Hypochondriasis consisted in a constant craving to have himself opened before his own eyes? …Wounded by the frequent assertions—‘all his complaints are owing to the use of opium’…if I could but be present while my Viscera were laid open!” (qtd. in Lefebure 49).

15 See CL 2: 706. We have good cause to suspect that at least some of these “little experiments on my own sensations” included chemical experimentation of the kind he discussed with Wedgwood in the winter of 1803—opium, nitrous oxide “bang,” etc. (CL 2: 934).
seem to be materially determined to an extent beyond the capacity of the will to control or direct. Blaming the will only led Coleridge back to the unsettling conclusion that the will itself can be subject to disorder.

Much of his writing from the period, poetry as well as prose, grapples inconclusively with the problem. In a letter to Godwin dated January 22, 1802, Coleridge wrote, “I ask for Mercy indeed on the score of my ill-health; but I confess, that this very ill-health is as much an effect as a cause of this want of steadiness & self-command; and it is for mercy that I ask, not for justice.” Here Coleridge assumes a guilty posture, begging Godwin’s forgiveness for the recent cooling of their friendship that Coleridge traces to his poor health and resulting indisposition. But while he blames his own weak will for his disorder, he also portrays the very weakness of will as a kind of underlying medical condition that he seems powerless to control. What power could one have if the very will itself, our controlling faculty, is diseased? Accordingly, during this period, as Coleridge experienced greater deteriorations in health and his opium addiction took deeper hold, his self-representations alternate between guilty self-reproaches and vehement pronouncements that he was, in fact, a victim of illness, which really did determine his reality in ways he could not control.

Coleridge contrasts his experience as a legitimate invalid with Wordsworth’s “hypochondriacal Fancies.” In a long agitated letter to Poole on October 14, 1803, Coleridge wrote

Wordsworth is in good health, & all his family…. I now see very little of Wordsworth: my own Health makes it inconvenient & unfit for me to go
thither one third as often, as I used to do—and Wordworth’s Indolence, &c keeps him at home…. I saw him more & more benetted in hypochondriacal Fancies, living wholly among Devotees—having every the minutest Thing, almost his very Eating & Dinking, done for him by his Sister, or Wife--& I trembled, lest a Film should rise, and thicken on his moral Eye. The habit too of writing such a multitude of small Poems was in this instance hurtful to him… (CL 2: 1013)

It is not because Coleridge thinks Wordworth’s pains are feigned or purely imaginary that he calls him a hypochondriac (although Coleridge does begin by telling Poole that “Wordworth is in good health”). Rather, Coleridge distinguishes Wordworth’s illness from his own because Wordworth’s complaints are self-induced, the results of his easy living and lack of artistic rigor. Coleridge diagnoses the problem as one caused by “living wholly among Devotees” along with Wordworth’s “habit of writing such a multitude of small Poems.” He provides a prescription as well: Wordworth should return to his Recluse project. He writes, “A Great Work, in which he will sail…this is his natural Element—the having out of it has been his Disease—to return to it is the specific Remedy, both Remedy & Health.” Coleridge does not claim the same responsibility over his own disease, which he exculpates himself of even more later in the letter, calling it “this child of Darkness & Discomfort—always threatening and bullying”—a sort of evil doppelganger that takes possession of him (CL 2: 1015).

The letter to Poole reveals Coleridge’s straining relationship with Wordworth by 1803 and his jealousy toward his friend who was enjoying increasing domestic happiness
and success writing poetry. But taken alongside his other representations of his illness from the same period, it also indicates Coleridge’s deeply divided understanding of his own physical disorders and sense of how to represent them to others. His contradictions signal Coleridge’s own battle to systematically account for his illness. As I have stated, to attempt to do so was a typically Esteesian undertaking; he was in search of an all-encompassing philosophical system, and for him one that could not account for such a central element of his lived experience would not do.\textsuperscript{16} While Coleridge found the premises of medical mentalism attractive (especially its compatibility with his ideas about the essentially active nature of the subject), it becomes problematic when Coleridge attempts to follow it to its logical conclusions, a process which yielded absurd results that failed to reflect his actual lived experience.

As his embodied experience of health was seeming more and more determined, Coleridge takes control of his health in another way that has been less well-studied, either by medical historians or students of Coleridge’s corpus: through its representation in his autobiographical writings. In them Coleridge struggles to resolve the contradiction he saw between the determined aspects of his lived experience and his anti-deterministic philosophical principles. This struggle governed his complicated handling of sickness in his poetry and prose, at once insisted upon vigorously as absolutely constitutive of his physical reality—a natural and materially determined fact and not a fanciful illusion—and self-consciously mythologized as part of his assumed authorial identity (an assertion of Coleridge’s active “I AM”). In the broadest sense, by writing about his illness

\textsuperscript{16} He criticized Spinoza for having “no system” (CM 5: 201) and coined the term \textit{psilosophy}, or pseudo philosophy, to designate shallow and unsystematic thinking.
Coleridge is able to make claims about his very real physical suffering while subsuming illness’s deterministic qualities under the shaping power of his imagination. The next section will investigate his writings on his illness experience as authorial self-representations that are not only perlocutionary but illocutionary as well, descriptions and performances both.
II.

2.1 “Startle this dull pain, and make it move and live!”:

Performative “Dejection”

As we have seen in the last section, in the authorial act of self-representation Coleridge takes an active role in “shaping”/ “creating” the representation of his disordered condition that he cannot take (at least to the extent he would like) on the level of his corporeal experience. But this leads to its own problems: if shaping and creating are so important to Coleridge, why would his representations of his health focus so much on his powerlessness as an invalid? As a self-dramatist, why cast himself in the role of valetudinarian? In many ways this authorial practice might be seen as an example of the strange contortions that Coleridge’s logical gymnastics sometimes led him to in the service of creating a comprehensive system. Coleridge’s readers from Hazlitt and Byron to Nuttall have criticized, satirized, or otherwise observed that his need to account for everything in a grand design often led him to elaborate—and sometimes incomprehensible—“Coleridgian absurdities,” as Nuttall puts it (128).

In addition to the logical problem the practice presents, there is something ethically troubling about the idea of building identity around illness. In *Illness as Metaphor* (1978), Susan Sontag famously criticized what she called “the romantic idea that the disease expresses the character” because it “is invariably extended to assert that
the character causes the disease,” resulting in a prevailing cultural willingness to blame
the patient for being sick. Her claim has special relevance in relation to Coleridge’s work,
which constructs identity precisely by presenting the self as diseased, weak, disordered,
unregulated, and lacking coherence. In Richard Holmes’s words, “While Wordsworth
gained the authority of poetic success, Coleridge found the authority of his poetic failure.
Failure, prostration, imaginative crisis, itself became something upon which he, as a
writer, could exercise brilliant lines of poetic enquiry and self-dramatization” (Visions
300-301).

This is problematic from the critic’s standpoint, as it certainly also was for
Coleridge himself, and for his readers and friends. The most common reading of his
incongruous-seeming practice has been to dismiss it as a shortcoming, or at best an
eccentricity, of Coleridge’s. This section will question this reading, proposing that
Coleridge’s illness “confession” is in fact more than psychologically interesting precisely
because it opens up another way of thinking of Coleridge and authority, presenting the
author not as the text’s finite center, but as a result of textual discourse. Angela
Esterhammer has noted that “[l]ike the German Romantic thinkers, Coleridge was
attracted to the notion of dialogue as the model for the mind’s relationship with the
world—indeed, as the source of identity itself” (173). By writing performatively about
his illness, Coleridge was able to practice this theory.
“A Letter to Sara Hutchinson”

I hope to probe into just how Coleridge’s depiction of disorder works to engage author and reader in an especially interactive relationship by turning now to his “Letter to Sara Hutchinson.” Like much of Coleridge’s writing, the poem has a complicated history of circulation. Written originally in the spring of 1802 as a literal letter to Sara Hutchinson, Coleridge substantially edited and published it several months later as his “Dejection: An Ode,” addressed now to Wordsworth and published in the *Morning Post* on October 4, 1802—his friend’s wedding day. This version of the poem was quite literally a gift, one imbued with significance that is as pointed as it is opaque. It was later collected and published again in *Sibylline Leaves* (1817). In addition to being published in various versions during Coleridge’s lifetime, the poet regularly quoted verses from “A Letter” in his letters to other people, circulating the poem in fragments or entirety among his many correspondents.17

Stephen Parrish writes that “The verse-letter to Sara and its companion poem, *The Day-Dream*, remain the truest and most authentic portraits of [Coleridge’s] inner mood, written with the intensity that constitutes for some readers the highest mark of poetic quality” (14). Richard Holmes expresses a similar opinion of the strong, even troubling, distinction he sees between inner experience and outer representation in “A Letter” and “Dejection”: “They reveal the split between Coleridge’s inner world of tempestuous emotions, and the outer persona of the public philosopher-poet who wrote for the *Morning Post*” (Visions 318). Regardless of whether or not we accept these poems as

---

17 See Stephen Parrish’s *Coleridge’s Dejection: The Earliest Manuscripts and the Earliest Printings* for a detailed account of the poem’s composition and circulation.
“authentic portraits,” they are more than that. In both versions Coleridge treats even his most intimate affective experiences as opportunities to interact dramatically—perhaps even melodramatically—with his audiences as he envisions and constructs them. While “A Letter” and “Dejection” merit consideration as two distinct poems in the form they take in a modern collection or anthology, one tending to the personal and the other to the universal, it is also productive to understand how they functioned for their author and their original readers as closely related parts of a larger confessional dialogue. This dialogue is enacted by every incarnation of the Dejection writings, including “A Letter,” in which the appearance of intimacy itself functions as part of the poem’s poetic—and public—performance.

The poem is, I believe, both a statement about the nature of Coleridge’s dejection and an application of the argument that he makes. In the poem, Coleridge meditates on, and attempts to systematically account for, the metaphysical dimension of his condition. Does his dejection come from inside or outside? Is it active, an isolatable, material, external thing that we “have” or “get,” or is the disordered subject active, his disorder a condition of his existence that he “makes” or “is”? Does it possess us, or do we create it?

In spite of the poem’s preoccupation with tracing the causes and effects of disorder, however, it ultimately fails to present a precise vision of these relationships. Both models seem operative at different parts of the poem. The official line of the poem takes a relatively clear stand. By the concluding stanza the poet’s tentative musings are
replaced with the confident assertion that “we receive but what we give / And in our Life alone does Nature live” (295-296).

These lines respond to the views Wordsworth expressed regarding the poet’s receptiveness to nature in his “Intimations Ode.” Wordsworth, while unconcerned with Coleridge’s brand of systematic theorizing, did have a philosophical perspective. He was, in Nuttall’s words, “a philosophically inarticulate member of the school of Locke” (129). “Intimations Ode” conveys, if not a comprehensive theory, then an empirical outlook on object relations avant la lettre, whereby human consciousness derives from our experiences and sense perception of the objects of nature. Wordsworth draws comfort from the fact that the objects and experiences that impress their beauty upon us thereby form our conscious minds:

    But for those first affections,
    Those shadowy recollections,
    Which, be they what they may,
    Are yet the fountain light of all our day,
    Are yet a master light of all our seeing (151-155)

Because our very consciousness is shaped by these experiences, perceptions, and events, they are forever accessible to us—indeed, they are us. The ode ends with a bittersweet affirmation:

    And oh ye Fountains, Meadows, Hills, and Groves,
    Think not of any severing of our loves!
    Yet in my heart of hearts I feel your might;
    I only have relinquished one delight
    To live beneath your more habitual sway. (190-194)

---

18 These lines appear in “Dejection” as well, but Coleridge moves them from the final stanza to the middle stanza (stanza IV of VIII). Many versions of the lines from “A Letter” exist; unless otherwise noted, I use the text and numbering from Parish’s reading text of the Cornell Manuscript of “A Letter” as printed in Coleridge’s Dejection (21-34).
It is fair to imagine that this vision was attractive to Coleridge when expressed by Wordsworth in masterful verse. However, he could not help reading Wordsworth’s ode with an eye to his own philosophical standpoint. When he did, Coleridge could not accept the philosophical implications he identified. His criticism was that the individual’s subjective existence animates the world and not the other way around: “To thee would all things live from pole to pole, / Their Life the Eddying of thy living Soul” he tells Sara in the last lines of “A Letter” (and Wordsworth in the last lines of the Morning Post version of “Dejection”).

But this sits somewhat uneasily with the poem’s treatment of health, which it characterizes as both materially and psychologically grounded. While Coleridge was philosophically invested in establishing the primacy of the active subject which does not merely react mechanically to the material world, we have seen that it was nonetheless important for him that illness was “real” and had environmental causes. In later years Coleridge would coin the term “psychosomatic,” that is, “a physical disorder caused or aggravated by psychological factors” (OED). But though he was intrigued and influenced by psychology and theories on the mind’s control over the body, Coleridge was never a pure medical mentalist. The scoffing tone of his earliest use of the term in an 1817 reference to “Mesmerists, Spiritualists, or Psychosomatists” (CM 3: 396) betrays a skepticism towards its pseudoscientific truth claims. This next part of this section will

---

19 Coleridge wrote in 1830 “Hope and Fear...have slipt out their collars, and no longer run in couples...from the Kennel of my Psycho-somatic Ology.” OED, “psychosomatic,” “psychosomatist.”
20 Of particular interest were those of Dr. Beddoes, who the poet greatly admired during this period. For a detailed account of Coleridge’s intellectual engagement with Beddoes, see Neil Vickers’s chapter “Coleridge and Thomas Beddoes” in Coleridge and the Doctors.
explore the complicated relationship between subjective experience of disorder and its material existence as depicted in Coleridge’s poetic representation in “A Letter.” On a theoretical level the poem attempts to reconcile mentalism and materialism, to recognize the primacy of the shaping Imagination to create experience while also taking seriously (in a way he felt Wordsworth did not) the defiant claims and pains of his body. On a more submerged level the poem then becomes about how to manage one’s condition.

Disorders: What they are and how they move

The poem’s descriptions of disorders ostensibly support the model of materialist medicine, whereby disorders can be traced to environmental causes. People are made sick by agents or factors external to themselves, like the food they eat or the climate they live in. As we have seen, Coleridge frequently blamed ill health on precisely these causes, chiding himself for “incautiously [eating] some Greens” (*CL* 2: 785) or prescribing protection against the cold to an ill Mrs. Coleridge: “I hope to God, you will make you[rself] flannel Drawers, &c, as I advised” (*CL* 2: 779), or insisting that it would be too dangerous for him to winter at Greta Hall: “Here it will be imprudent for me to stay, from the wet & the cold—even if every thing within doors were as well suited to my head & heart, as my head & heart would” (*CL* 2: 762).

This is how the poem starts. As Martin Wallen observes in *Cities of Health, Fields of Disease: Revolutions in the Poetry, Medicine, and Philosophy of Romanticism*, the opening lines about the approaching storm also portend the health threats that Coleridge and others so closely associated with sudden changes in weather. Wallen links
these lines with the effects of scrofula, the primary medical concern which Coleridge believed himself to be suffering during the winter and spring of 1802. He observes that “[t]he poem – in each of the letters, as well as in its published forms – opens with bad weather, which always has a negative effect on a constitution susceptible to scrofula. Accordingly, Coleridge’s illness is always most irritated by ‘The coming on of Rain and squally Blast’ (DMs l. 14)” (55). That line is followed by a description of the promise of physical pain that the storm foretells:

And O! that even now the gust were swelling,
   And the slant night-show’r driving loud and fast!
Those sounds which oft have rais’d me, while they aw’d,
   And sent my soul abroad,
Might now perhaps their wonted impulse give,
Might startle this dull pain, and make it move and live! (15-20)

When Coleridge talks about the phenomenology of disorder here and elsewhere in this poem, disorder is both literal and figurative. The poem insistently employs descriptions of “feelings” that apply equally to corporeal sensation and to affective experience. For example, the fourth verse paragraph begins with the following lines:

   My genial Spirits fail—
      And what can these avail
   To lift the smoth’ring weight from off my breast? (44-46)

The “genial Spirits” may seem figurative to modern readers, but for Coleridge and his contemporary readers, a consideration of one’s spirits—classed as natural, animal, and vital—would carry a strong physiological signification (Vickers 24-25). The line echoes

---

21 According to the OED, the usage of “genial” as an adjectival form of “genius” did not develop until later in the 19th century.
Samson’s “My genial spirits droop” in Milton’s *Samson Agonistes.* Milton tended to use the adjective “genial” to describe the generative and regenerative. Coleridge’s “genial spirits” retain this sense, associating them with Galenic/Platonic natural spirits, which govern systematic growth characteristic of all forms of life, from vegetable to animal to human (Vickers 25). So the failure of Coleridge’s genial spirits is a serious complaint, a comment on his body’s capacity to regulate itself systematically, as much as it is a complaint about feeling low-spirited.

Similarly, “the smoth’ring weight” Coleridge describes being afflicted by should be read as an affective complaint (he feels emotionally stifled), but also as a medical complaint. Wallen draws the same conclusion, citing the similarities of phrase between the line of verse and the following passage from an 1804 letter from Coleridge to his wife in which he describes his journey to Malta:

> after a very painful Passage, in which I was miserably ill – since then I have never had such sharp illnesses as in England – but dreadful Langour, weight on my breathing, & a sort of sudden fits of Sleep with nervous Twitches in my Stomach and Limbs…. & then comes on the dreadful *Smothering* upon my chest. *(CL 2: 1143; qtd. in Wallen 62)*

The poem is packed with similar examples. “Dejection” itself is treated in this way. We know from Coleridge’s letters that he thought of his dejection as a holistic disorder of the whole person, manifesting itself in his body, mind, and soul. One of his recurring maxims

---

22 Patrick Keane notes that Coleridge himself quoted Milton’s lines, 

> So much I felt my genial spirits droop!
> My hopes all flat, nature within me seem’d
> In all her functions weary of herself

in a 1797 letter to Joseph Cottle *(CL 1: 319; qtd. in Keane 230).*
in letters describing his period of illness during the winter of 1801 was “But cheerful
Thoughts come with genial sensations; and Hope is itself no mean Medicine,” which he
repeats like a mantra in succeeding letters to Stuart, then Poole, then Davy (CL 2: 729,
732, 735).

The poem depicts disorders as moving fluidly across the parts of the self, the parts
of the body and across bodies of different people. Their movement is fundamentally
transferential. Adela Pinch and Thomas Pfau both begin their respective studies of
Romantic emotion with this idea of the transferentiality of subjective experience. Each
notes Hume’s claim regarding this subject from his Treatise of Human Nature: “The
passions are so contagious,” Hume writes, “that they pass with the greatest facility from
one person to another, and produce correspondent movements in all human breasts” (qtd.
in Pinch 1). In this system, feelings—disordered or otherwise—do not exist only, or even
fundamentally, as constitutive ontological qualities of the feeling subject, necessarily
private and inaccessible to all but the individual experiencing them. Rather, one’s
feelings are described as activity that can stimulate similar corresponding disordering in
others. That is, the feelings or their conditions exist in the world apart from an
individual’s subjective experience of them. This kind of movement seems operative at
various moments in “A Letter,” especially in the first half of the poem. In verse
paragraph 9 Coleridge writes:

Ah fair Remembrances, that so revive
My Heart, and fill it with a living power,
Where were they Sara?—or did I not strive
To win them to me?—on the fretting Hour,
Then when I wrote thee that complaining Scroll
Which even to bodily sickness bruis’d thy Soul! (111-116)
Several lines later the speaker continues:

   this, alas! I know,
    That thou art weak and pale with Sickness, Grief, and Pain,
     And I—I made thee so! (127-129)

These lines trace the movement of the poet’s lovesickness, which transfers fluidly as “a living power” to his beloved through “that complaining Scroll”—a reference to a love letter he wrote her when visiting her months earlier at Gallow Hill. It then manifests itself in her as “bodily sickness” (“Sickness, Grief, and Pain”), then redounds back on him as “dejection” amplified, which we perceive in the pathos of the final line in stanza 10, “And I—I made thee so!” Coleridge goes on to claim that witnessing her torment does not just cause him to pity her in some abstract sense, but to partake in the torment himself:

   O for my own sake, I regret, perforce,
    Whatever turns thee, Sara! From the course
     Of calm well-being and a heart at rest. (130-132; Coleridge’s emphasis)

   But even in this description of the contagious spread of feeling, the poem confronts us with the unrelenting tension between the idea of its easy and fluid transference from person to person, and other evidence that this is in fact often not the case. Perhaps instead sympathetic correspondence is not spontaneous at all, but must be manipulated, forced, or in the poet’s case, not revealed but artfully crafted. Here and elsewhere, Coleridge seems to question whether the passions really could be so contagious as Hume claims. The choice to italicize “for my own sake” and “thee” links Coleridge’s affective state with Sara’s states, but only visually through the mechanical device of typeset. The other italicized word, “perforce,” indicates that the “sakes” of the
speaker and Sara are necessarily linked. Where does this associative force originate? On its surface, the force that causes Coleridge and Sara to feel each other’s feelings has its roots in those laws of natural philosophy/sympathy whose operation Hume described as working “with the greatest facility from one person to another, [producing] correspondent movements in all human breasts.” Feelings, then, operate within those Hartleyan and Priestleyan associationist systems to which Coleridge enthusiastically subscribed as a young man. According to these, “human action was determined, or necessitated, by reality located in external circumstance” (Lefebure 127). But, as we will see, the poem goes on to question the spontaneity of sympathetic correspondence of feelings, just as Coleridge was rejecting what he called “blind Nature ruled by a fatal Necessity—Slave of an ideot Nature!” (qtd. in Lefebure 128).

After all, it is their communication, specifically here through writing—letters and poems—that enables Coleridge’s suffering to transfer to Sara Hutchinson. As a result Coleridge expresses dismay, guilt at having “caused” her illness, and he vows to refrain from spending time with her in the future for the sake of her health. He writes

While ye are well and happy, ‘twould but wrong you,
If I should fondly yearn to be among you—
Wherefore, O! wherefore, should I wish to be
A wither’d Branch upon a blossoming Tree? (165-168)

This prescription, however, simply fails to fit Coleridge’s own diagnosis. As described in the poem, spending time together is not what makes either Sara or Coleridge sick, nor thinking about or looking at one another or any other existential association. In fact, the only passage in the poem that locates Coleridge in Sara’s physical presence conveys the poet’s memory of absolute bliss to which he compares his current dejection. He
remembers an intimate evening that he spent with Sara and Mary Hutchinson at Gallow
Hill during the summer of 1801 in the following passage:

the happy Night
When Mary, Thou and I, together were,
The low-decaying Fire our only Light,
And listen’d to the stillness of the Air!
O that affectionate and blameless Maid,
Dear Mary!—on her Lap my Head she lay’d—
Her Hand was on my Brow,
Even as my own is now;
And on my Cheek I felt thy Eye-lash play—
Such joy I had that I may truly say,
My Spirit was awe-stricken with the Excess
And trance-like depth of its brief Happiness. (99-110)

This period of intimate physical proximity is the closest the poem comes to describing a
moment that actually produces the “Joy” he expounds on so emphatically—but
theoretically—in the final stanza.

Indeed, Coleridge represents Sara’s sickness throughout the poem as the result of
the textual practice of exchanging letters necessitated by their distance from one another.
He blames Sara’s disorder on her susceptibility to his own “complaining Scroll,” not his
sick body. The kind of communication that makes her sick is, it turns out, not transferred
with the greatest facility, by necessity, from one person to another, but as a result of the
labor of writing and the performative verses thereby produced.23 In effect then, the very
process of promising no longer to plague her with the company of what his “whither’d
branch” passage figures as his blighting physical presence performatively enacts a kind of

23 The written letter, and therefore the letter writer, becomes the agent of the suffering the letter
communicates rather than the letter’s content. Coleridge describes elsewhere his own experience of being
made sick by a letter. In the following he relates to Mrs. Coleridge his reaction to receiving a letter from
Southey which told of the death of Southey’s only child: “Dear Southey’s Letter had the precise effect of
intoxication by an overdose of some narcotic Drug—weeping—vomiting—wipefulness the whole night, in
a sort of stupid sensuality of Itching from my Head to my Toes, all night” (CL 2: 985).
diversionary tactic, obscuring the poem’s fundamental refusal to invest itself wholly in its stated purpose of promoting Sara Hutchinson’s wellbeing. To compose and send the verse letter at all is to expose Sara Hutchinson to the deleterious effects of yet a further “complaining Scroll,” the true source of her affliction.

While Sara Hutchinson herself seems not to have left a record of how reading “A Letter” affected her health, Dorothy Wordsworth does leave a telling account of first hearing the poem. Her Grasmere Journal entry from April 21, 1802 contains the following record:

William & I sauntered a little in the garden. Coleridge came to us & repeated the verses he wrote to Sara—I was affected with them & was on the whole, not being well, in miserable spirits. The sunshine—the green fields & the fair sky made me sadder; even the little happy sporting lambs seemed but sorrowful to me. (89)

It seems fair to assume that Sara Hutchinson would have read the lines with at least as much vexation.

At this point it is useful to look back at a stanza that appears earlier in the poem. This is the second stanza, the poet’s introduction of his dejection:

A Grief without a pang, void, dark, & drear,
A stifling, drowsy, unimpassion’d Grief
That finds no natural Outlet, no Relief
In word, or sigh, or tear—
This, Sara! Well thou know’st,
Is that sore Evil, which I dread the most,
And oft’nest suffer! (21-25)
Coleridge explains repeatedly in verse and prose accounts that the most concrete causes of his discontent during the spring and summer of 1802 could be traced to his physical illness, marital strife, unrequited love for Sara Hutchinson, his perceived decline of his poetic talents, his “indolence” (a frequent Esteesian euphemism for opium use during this time according to Lefebure), and other tangible misfortunes. But these lines also contain a metaphysical lament. He cannot, he claims, manage his feelings appropriately in the world. He imagines emotions as requiring “outlets,” or sympathetic correspondence between feelings and their expression, whether “In word or sigh, or tear.” In these lines at least, Coleridge asserts that the cause of his “dejection” is not grief itself, but his own inability to express his grief sufficiently and appropriately: “Grief without a Pang.” This trouble with self-expression is “the sore Evil which I dread the most / And oft’nest suffer.”

These lines depict the speaker’s inability to connect his feelings to their appropriate external objects in language that carries strong sexual connotations. The absences of passion, a “Pang,” or a “sigh” are all indicative of Coleridge’s very literal sense of sexual frustration. In a Notebook entry from September 1801 he wonders at his wife’s physical coldness toward him using the same language of lack, here as a lack of bodily warmth and vigor: “I have dressed perhaps washed with her, & no one with us—all as cold & calm as a deep frost.” Later in the same entry he concludes, “[Sara] is uncommonly cold in her feelings of animal Love…” (CN 1: 979). As for Sara Hutchinson, her own physical absence from Coleridge during this period necessitates communication via letter in the first place, and precludes any possibility of physical
intimacy. In these lines, then, this language roots the metaphysical sense of the one-sided partnership, the failure of emotional intimacy through effective communication, in the physicality of unsatisfied longing for sexual “communication.”

But there is some instability of meaning that the grammatical openness of the passage allows. Emotion seems here to be “his,” though no pronoun claims it (it’s just “A Grief”), but what about the “missing” somatic markers? Are the “pang,” “word,” “sigh,” and “tear” meant to be his too? At the beginning of the stanza it makes most sense to assign those to the speaker as well, which would express problem of his own inability to fully feel his feelings. That sentiment is expressed more clearly in the stanza’s final lines in which the speaker laments his inability to fully appreciate the objects of nature that surround him and Wordsworth in the Lake District: “I see them all, so excellently fair! / I see, not feel, how beautiful they are” (44-45). “A Letter” contains several well-documented allusions to Milton, and I believe that these lines, too, contain a Miltonic reference. In them Coleridge contrasts himself with prelapsarian Adam, who muses “I feel I am happier than I know” (PL 8.282). For Coleridge, as for Adam, feeling is the most direct, and therefore most “real,” way of perceiving reality. It overcomes the distance between perceiving subject and perceived object. In this passage, however, Coleridge speaks from a decidedly postlapsarian position, a thousand miles away from the meteorological and astronomical objects he describes: the “western Sky” and “thin Clouds above,” “Those Stars, that glide behind them” and “Yon crescent Moon.” He

---

24 In addition to the aforementioned “My Genial Spirits fail,” Halmi notes that line 62, “At eve, sky-gazing in ‘ecstatic fit,’” quotes lines 41-42 of Milton’s “The Passion”: “There doth my soul in holy vision sit, / In pensive trance, and anguish, and ecstatick fit” (qtd. in Coleridge’s Poetry 147)
sums up his description of them with a statement as impotent as he claims: they are insipidly “beautiful,” “excellently fair”—words we too see on the page but fail to feel.

Coleridge echoes the beginning of the “Immortality Ode” here, which self-consciously uses colorless, abstract description with the same numbing effect:

The Rainbow comes and goes,
And lovely is the Rose,
The Moon doth with delight
Look round her when the heavens are bare;
Waters on a starry night
Are beautiful and fair… (10-15)

But the earlier lines of stanza 2 of “A Letter” are further complicated because of their intersubjective nature. Coleridge is concerned with his relationship with Sara Hutchinson, another feeling person. Unlike the inanimate objects of nature, she is both object of his attention and desire and subject of her own experience. As such, it is not quite clear whose words, sighs, and tears he wants to solicit—his own? The lines make most logical sense as a lament that she is insensible here to his expressions of grief, and so, adding the elided pronouns, his lovesickness “finds no natural outlet, no relief” in her “word or sigh or tear.” Returning to the last lines of stanza 10 with this in mind creates the potential for another layer of interpretation: “thou art weak and pale with Sickness, Grief, and Pain, / And I—I made thee so!” Suddenly the “I—I made thee so!” takes on a sort of exhilaration.

The double motion of “communicability” of feeling on the one hand, and susceptibility of individuals to “catch” the feelings of others is fundamental to the way the romantics understood the process of Sympathy. Pfau writes, “the affect of sympathy
attests to a deep-seated intersubjective logic at work within a given individual and indeed constitutive of his or her humanity. What feeling instantiates in the individual is the fact of its social connectedness—Coleridge metaphorizes it as an ‘electric force’—as well as an ethical obligation that is also intrinsic to such ‘feeling’: namely, to extend the social potentiality experienced in the aesthetic feeling of ‘communicability’ into a lived reality” (36). He continues, “Far from being a merely contingent and ephemeral sympathy for someone else, feeling here unfolds as an inherently transferential process, a feeling of otherness within one’s own self.” In Coleridge’s case it would be appropriate to add the corollary: the feeling of the self in others, the sense that his feelings have come to occupy another, that his dejection has become her “Sickness, Grief, and Pain.”

Lefebure refers to these lines as “sadistic lip-licking,” claiming that “the note of sadistic satisfaction in these lines is quite unmistakable” (357). I don’t want to push too far in this direction because I think it would be a misreading to claim that Coleridge took pleasure in causing suffering in his beloved—at least in any straightforward way. A more accurate interpretation of this strange slippage is, I think, that for Coleridge, while what is communicated might be unpleasant (the pain of illness and emotional suffering in this case), the very process of communicating with an intensely responsive reader—to actively move another subject through the power of his self-expression—is essentially pleasurable.

Coleridge began worrying over his descriptive power as an artist several years before his dejection crisis motivated his composition of “A Letter.” Over the course of his nearly year-long expedition to Germany in 1798-1799, Coleridge wrote a series of
long descriptive letters and sent them alternately to his wife and to Poole. He refers to these as his “Journal,” and seems to have originally intended them for publication with Longman upon his return to England. He dutifully sends his records back in spite of growing disappointment with the merit of their contents:

> These Letters, & the Descriptions in them, may possibly recall to me real forms, if I should ever take it into my head to read them again; but I fear that to you they must be [insupportably] unmeaning—accumulated repetitions of the same words in almost the same Combinations…I neither am or ever was a good Hand at description.—I see what I write / but alas![ I cannot] write what I see. (CL 1: 503)

As McCarthy writes, a “poet’s success is measured by his ability not merely to express his own feelings, but to stimulate analogous emotional and psychological activity in his reader” (94). Coleridge laments his inability to communicate in this way with his reader in his final German “Journal” letter to Poole:

> These lines, my dear Poole, I have written rather for my own pleasure than your’s—for it is impossible that this misery of words can give to you, that which it may yet perhaps be able to recall to me.—What can be the cause that I am so miserable a Describer? Is it that I understand neither the practice nor the principles of Painting? (CL 1: 511)

He quickly goes on to reject this suggestion that he should infuse his writing with a more painterly quality, affirming instead the primacy of communicating feelings over mere images through language: “I could half suspect that what are deemed fine descriptions,
produce their effects almost purely by the charm of words, with which & with whose combinations, we associate feelings indeed, but no distinct Images” (CL 1: 511). This sense of their descriptive insufficiency is part of the reason that Coleridge ultimately determined not to publish these accounts of his travels, stating in a letter to Southey upon his return to England: “I am decisive against ever publishing the Letters—& were I not, it would take me more trouble to fit ‘em up, than they are worth.—As to a Volume of Poems, I am not in a poetical Mood / & moreover am resolved to publish nothing with my name till my Great Work” (CL 1: 535). Certainly the “Great Work” to which Coleridge refers must prove its worth through the power to communicate feelings, if not “distinct Images,” to its reader, in a way that his travel letters, he thought, failed to do.

The appropriate measurement of the feelings communicated in a “Great Work,” it seems, should be quantitative (vividness or force) instead of qualitative (good or bad). In feeling—good or bad—we accord value content. As Martha Nussbaum claims in *Upheavals of Thought* (in the tradition of Kant’s *Critique of Judgment*): “emotions are appraisals or value judgments, which ascribe to things or persons outside the person’s own control great importance for that person’s own flourishing.” She continues, “emotions are not about their objects…Their aboutness is more internal, and embodies a way of seeing” (qtd. in Pfau, 29). For Coleridge here it does not seem quite right, or

---

25 See Angela Esterhammer’s “The Performative Coleridge” in *The Romantic Performative* for a discussion of Coleridge’s development of a more fully-formed linguistic theory in his later writing. Esterhammer writes, “With his development of a theological and philosophical system in the early decades of the nineteenth century, Coleridge’s valorization of biblical language grows into a conviction of the centrality of the Word or Logos—conceived of as many things, but among them as a world-creating and world-sustaining performative by means of which we can potentially have access to an immediate and atemporal conception of reality” (145).
perhaps not especially useful, to say the feelings the speaker expresses are or are not about their objects, but I think it is helpful and accurate to say they embody a way of seeing. Their “way of seeing” is ideally between active subjects who can respond to each other, take up the feelings of another, incorporate them, change them, and return them in their changed form.

I have tried to explore the ways that Coleridge used, or perhaps conceived of, representations of his own disorder in “A Letter to Sara Hutchinson” as at once a lived experience with autobiographical resonance, and a tool with which to mediate the relationship between author and reader. Tracing the causes and effects of disorder which the poem had been so preoccupied with—and frustratingly unable to untangle with any precision—becomes less important as the poem enacts a kind of emotional exchange between author and reader. Seen this way, the process of feeling and sympathizing is akin to engaging Coleridge’s developing idea of the esemplastic, or actively shaping, Imagination, a faculty that both author and reader should exercise. It is as important to his poetics as to his interpersonal relationships.

With this in mind, I would like to turn to Coleridge’s famous statement to Sotheby on the workings of the Imagination:

> It is easy to cloathe Imaginary Beings with our own Thoughts & Feelings; but to send ourselves out of ourselves, to think ourselves in to the Thoughts and Feelings of Beings in circumstances wholly & strangely different from our own: hoc labor, hoc opus: and who has achieved it? Perhaps only Shakespeare. Metaphysics is a word, that you, my dear Sir!
are no great Friend to. But yet you will agree, that the great Poet must be, implicitè if not explicitè, a profound Metaphysician. (CL 2: 810)

These lines refer to the author’s construction and vivification of characters dissimilar from himself. What, though, about the great poet when writing about himself, his own strange or exotic disorders? In cases like this Coleridge seems (implicitè if not explicitè) to shift the impetus to the reader to become the metaphysician. The great poet must create the conditions for reader to do so. The next section will consider the confessional nature of Coleridge’s correspondence as a tool that, by dis-ordering the author as a text’s unified and coherent, irreproachable and all-knowing center, might allow, indeed insist, that the reader take on the role of participant in the text’s meaning-making discourse.
2.2 Illness Confessional in the Correspondence

“My weaknesses are of some advantage to me; they unite me more with the great mass of my fellow-beings”

-S. T. Coleridge

In December 1800 Coleridge fell ill after walking to Grasmere in the cold and wet. He spent all of January confined to his bed, “harassed,” he wrote, “by a series of Indispositions” (CL 2: 662). Three weeks into the illness he wrote to Davy that “by the Lettre de cachet of a Rheumatic Fever sentenced me to the Bed-bastille.” He describes several of his pains and symptoms, but quickly comes to the most problematic part of the ailment: “but alas! worse than all, my left Testicle swelled, without pain indeed, but distressing from it’s weight; from a foolish shamefacedness almost peculiar to Englishmen I did [not]shew it to our doctor till last Tuesday night.” This confession of his illness associates the condition first with legal guilt and judgment by comparing confinement to his sickbed to a sentence of imprisonment in the French Bastille. Later he reveals a relationship between his condition and spiritual guilt by claiming to undergo the same torment “which the Damned suffer in Hell.” He emphasizes his guilt by telling Davy that he delayed consulting a doctor because he felt ashamed of his condition. Still, he goes on to reveal all of the details of his enlarged and itchy genitals to Davy:
On examination it appeared that a Fluid had collected between the 
Epididymis & the Body of the Testicle (how learned a Misfortune of this 
kind makes one)—Fomentations & fumigations of Vinegar having no 
effect, I applied Sal ammoniac dissolved in verjuice, & to considerable 
purpose; but the smart was followed by such a frantic & intolerable 
Itching over the whole surface of the Scrotum, that I am convinced it is the 
identical Torment which the Damned suffer in Hell. (CL 2: 663)

This passage is typical of Coleridge’s letters, which appropriate the confessional mode to 
reveal the physical and moral dimensions of his disorders to his readers. This section will 
look more closely at several specific instances of this distinctively Coleridgian letter-
writing practice between the years of 1800 and 1803.

As we have seen, the letters are remarkable for their frank self-exposure, 
sometimes bordering on self-abasement. No bodily function is too private, no excretion 
too repulsive, no failure of “carcase Coleridge” too humiliating to be denied its place next 
to other reoccurring epistolary topics of conversation, like the merits or flaws of various 
philosophical systems, lines of verse, funny baby anecdotes, invitations to visit, etc. At 
least this is the case with certain correspondents. That Coleridge shares the minutiae of 
his illness adventures with Mrs. Coleridge, Wedgewood, and Poole, or other of his most 
intimate correspondents, should not surprise us overly much (although he sometimes 
includes such graphic description that even these letters take on a certain luridness). But
letters to even recent acquaintances are often just as revealing of his medical conditions and their interrelated moral implications.

Coleridge explains in a letter to Godwin, dated January 22 1802 that he wants to explain the “nature of my body and mind”: “Partly from ill-health, & partly from an unhealthy & reverie-like vividness of Thoughts, & (pardon the pedantry of the phrase) a diminished Impressibility from Things, my ideas, wishes, & feelings are to a diseased degree disconnected from motion & action...” (CL 2: 782). Quoting the same passage, Richard Holmes also touches on this curious-seeming strategy of playing up his illness, opium addiction, and lack of productivity as a writer: “To the normal human response, which Godwin himself must have made – what do you intend to do about these weaknesses? – Coleridge’s implicit answer was, not to change them, but to explore and exploit them” (Visions 315). His letters do just that, but still we might wonder at the effect of this method of self-representation, and what purposes it serves. Why reveal so much information in explicit detail, and why make the rhetorical gestures that associate the disorder with his own guilt?

Of course, sometimes the letters blatantly confess illness for practical strategic reasons. Porter explains that “[t]he art of invalidism evolved through the Georgian era, and delicacy came into vogue, claiming attention, exemption, sympathy, and excuse” (190). Of course playing the “sick role” is different from being sick, and being a “valetudinarian” or “invalid” is different from being sick because of its performative dimension. Part of the performance is the request for exemption from life’s practical responsibilities. Coleridge undeniably participated in this “art,” telling people details
concerning his ill health to benefit from the exceptions invalidism allowed—and more sure that these exceptions would be allowed by the reader, now bound by the special intimacy that such sharing produces. His letters are full of such requests for exemption—exemption from returning letters in a timely manner, accepting dinner invitations, supporting his family. Elsewhere he confesses illness to provide a catch-all excuse for bad behavior. In Porter’s discussion of illness as a social construction he calls it “that conscious or unconscious psychological strategy and social permission according to the sick a package of responsibilities and privileges: disabling them (temporarily at least) from normal social life; exempting them from responsibilities, and granting them immunities” (210).

In addition to self-consciously performing a kind of authorial control over his illness, Coleridge’s illness confessions participate in constructing and engaging his “ideal reader” interactively. Coleridge’s ideal reader is an active, responsive reader, a reader in dialogue with the text and, especially when the text is autobiographical in nature, with its author. My focus will be on how Coleridge actively engages his reader to participate in meaning-making by situating his representations of his illness within two specific performative discourses: 1) the discourse of correspondence, which makes any exchange of letters a prima facie literary dialogue, and 2) the discourse of confession, which invites the reader not only to reflect, but to judge. Coleridge’s letters confess his condition, assuming both the guilt for the disorder, and the diagnostic authority that comes with being able to tell his own narrative. At the same time, he nonetheless requests and submits to the reader’s judgment and evaluation. Coleridge’s illness confessional
operated discursively to create identity—both the author’s and the reader’s—by enacting a double identification of writer and reader with both patient and doctor.

Conventions of Confession

I’ve discussed the general performativity of Coleridge’s writing, and now this paper will situate Coleridge in context of a specific kind of performative writing: the confessional. The confessional was only just becoming an identifiable literary mode by the end of the eighteenth century. Up until Rousseau’s paradigm-shifting Les Confessions, posthumously published in 1782 (and first published in English in 1783), the most widely known literary confession, Augustine’s Confessions, was spiritual in nature. When Rousseau penned the introduction to Les Confessions, his famous opening claim, “Je forme une entreprise qui n’eut jamais d’exemple,” was not hyperbole. In “The Case of Rousseau,” James Treadwell traces British reactions to Rousseau’s Confessions after its first English publication, concluding that “[t]o British readers (as indeed to late eighteenth-century readers all over Europe) the Confessions had a meteoric quality, brilliantly and inexplicably unlike anything they had encountered before” (35).

Rousseau’s was one of the earliest of many secular literary “confessions” that would come to form a recognizable sub-genre of autobiography (itself nascent during the Romantic period) over the course of the nineteenth century. The popularity of his work inspired the subsequent proliferation of similar “confessions,” on many different topics,
from Thomas De Quincey’s *Confessions of an English Opium-Eater* to Charles Lamb’s “Confessions of a Drunkard,” all united as performative airings of the author’s authentic—if sordid—experiences.

Although the secular author’s confession does not appeal to a religious or legal authority, the inherent performativity of the confessional mode comes from its dramatic roots in the church and in the courtroom. To confess is to formally admit one’s guilt to a judging party, whether priest, jury, or God, who is expected to pass judgment. As such, the confession is a social ritual that cannot be successful without a confessor, and the confessional text casts the reader in that role. As Susan Levin writes, “[a]ll texts ask for a reader, but romantic confessions articulate the very creation of the reader they need. Confession demands a listener. No longer speaking to God or the priest, the romantic confessional text creates a non-empirical ‘you’” (qtd. in Frawley 67). Romantic readers were attuned to this gesture and its positioning of not only the author, but the reader, in a special role. The *Monthly Review* observed this phenomenon—and noted its appeal—in its review of De Quincey’s *Confessions*:

> we thus find that, from the time of Jean-Jacques up to the present Opium-Eater, the world has been fond of assuming the character of a father-confessor, listening to the sins and errors of its votaries, and perhaps giving absolution with a kind and merciful spirit, providing that the detail be sufficiently instructive and amusing. (NS c. 288; qtd. in Treadwell 40)

The judgment from the confessor, whether in the form of condemnation or absolution, is the basis for the performative’s status as, in J. L. Austin’s terms, “happy” or “unhappy,”
successful or unsuccessful in making something happen in the world. To be successful, the speech act must be performed under conditions which will allow for it to do the thing it claims to do.

Coleridge’s relationship to the secular confessional is, of course, less direct than that of Rousseau, Lamb, De Quincey, or other authors who title their own works “confessions.” I mean only to maintain that Coleridge’s autobiographical representations of illness borrow from the confessional mode and its associations, and not that his writings fit cleanly into that category. They are confessional so insofar as they claim to submit what J. M. Coetzee calls “an essential truth about the self” (194) to their reader’s judgment. Many of his poems that treat illness are clearly romantic precursors to the confessional poetry of the 20th century, in which the author is explicitly identified as the speaker. We have no doubt that when Coleridge writes “I fear’d to sleep: Sleep seem’d to be / Disease’s worst malignity” in “The Pains of Sleep,” for example, that the speaking “I” is meant to be identified with Coleridge the poet, and the complaint one he actually suffered, as he describes in various prose and verse accounts. Coleridge himself states as much, referring to the poem as “a true portrait of my nights” (CL 2: 984). His frequent quotation of his poetry to illustrate conditions he writes about in his letters leaves little room for doubt that the author is very much alive in his poems. As Porter puts it in response to deconstructionist textual approaches, “[i]t would be well-nigh obscene to

---

26 Coetzee quotes Francis Hart’s distinction between confession, memoir, and apologia, writing “confession is ‘personal history that seeks to communicate or express the essential nature, the truth, of the self,’ while apology is ‘personal history that seeks to demonstrate or realize the integrity of the self’ and memoir is ‘personal history that seeks to articulate or repossess the historicity of the self.’ Thus ‘Confession is ontological; apology ethical; memoir historical or cultural’” (194).
deny the ‘author’ when the authors of the texts discussed below were undergoing heroic surgery or suffering dissolution on the sickbed” (10).

Coleridge’s excision of the explicitly autobiographical sections of “A Letter to Sara Hutchinson” before publishing it as “Dejection” in the *Morning Post* demonstrates that he saw self-revelation in degrees, not all of which he considered appropriate. Indeed, Coleridge expressed misgivings about the very concept of publishing autobiographical writing. For example, a letter to Poole in 1801 attributes his apprehension about publishing his travel letters from Germany, not to the quality of the letters (as he had earlier claimed), but to their autobiographical nature. He explained that the work, “which tho’ nearly done I am exceedingly anxious not to publish, because it brings me forward in a personal way, as a man who relates little adventures of himself to *amuse* people--& thereby exposes me to sarcasm & the malignity of anonymous Critics, & is besides *beneath me*” ([CL 2: 707]).

Coleridge’s concerns about publishing his autobiographical writing reflect a broad distrust of the developing practice in Romantic culture at large. He and his contemporaries found the practice difficult to justify in theory and practice. They questioned its very motives: is it ignoble to expose one’s life in order to “*amuse* people”? Does it signal an unattractive egotism to presume public interest in one’s “little adventures of himself”? Treadwell explains that in the early years of autobiography

A particular self-consciousness attaches to the moment of publication.

Here autobiographical writing becomes deeply uncertain not only of its literary place but of its broader social place as well. Regardless of the lack
of generic foundations, each instance of published autobiography is itself potentially indecorous or offensive, in a way that could reflect (even posthumously) on the character of the author. Public circulation of personal information risks more than one's literary reputation. (7)

Wordsworth, of course, shared Coleridge’s apprehension, withholding *The Prelude* from publication for similar reasons. De Quincey, whose decision to publish his autobiographical confessions brought him a mixture of fame, public contumely, and private reproach, defended his choice on didactic grounds. He maintained that his intention in nakedly exposing his own frailties and faults was in fact social utility. When *Confessions of an English Opium-Eater* was published in book form in 1822, he added an appendix, which concluded

> From this account, rambling as it may be, it is evident that thus much of benefit may arise to the persons most interested in such a history of opium – viz. to opium-eaters in general – that it establishes, for their consolation and encouragement, the fact that opium may be renounced; and without greater sufferings than an ordinary resolution may support; and by a pretty rapid course of descent. (123)

Although Coleridge remained skeptical of De Quincey, he did eventually publish his own autobiography of sorts in 1817, the *Biographia Literaria*, Coleridge’s “literary life.” That project may have been informed in some ways by the same textual strategies of self-representation that his letters from this earlier period enact. As Treadwell notes, Coleridge’s earliest reference to the *Biographia* project comes from a notebook entry
during this period: “Seem to have made up my mind to write my metaphysical works, as my *Life*, & in my *Life*—intermixed with all the other events/ or history of the mind & fortunes of S. T. Coleridge” (*CN* 1: 1515, qtd. in Treadwell 127). Treadwell remarks, and I concur, that for Coleridge, the events of his life are inseparable from his metaphysics. Coleridge states as much in the *Biographia*, but the illness confessions in the letters most clearly demonstrate this intermixing of illness and the “history of the mind” of Coleridge.

The correspondence also demonstrates the intermixing of identities between Coleridge and his readers. Wolfgang Iser has observed that “if reading removes the subject/object division that constitutes all perception, it follows that the reader will be ‘occupied’ by the thoughts of the author, and that these in their turn will cause the drawing of new ‘boundaries’” (qtd. in McCarthy 103). If this is the condition of reading generally, it is all the more intrinsic to reading and writing letters. Thomas McCarthy argues that correspondence “gives graphic expression to the Romantic connection between lyric and sympathy. The reader is ‘moved’ physically as well as emotionally: he/she puts his/her response in writing, thereby enacting not only the same ‘mode of feeling’ but also the same ‘mode of behavior’” (95).

In the case of Coleridge’s correspondences, especially with other writers, the writer and reader regularly enact this same “mode of behavior”—composition—on the very same text. Much of Coleridge’s correspondence takes the form of feedback between authors who send manuscripts back and forth, adding layers of commentary and criticism to each other’s work. A letter from Coleridge to Sotheby dated July 13, 1802, for example, ends with a typical request that Sotheby send Coleridge a copy of his recently
published translation of Virgil’s *Georgics* “interleaved” so that Coleridge could write his running commentary inside the volume before returning it (*CL* 2: 812). This practice encourages each participant to impress and be impressed upon with an appealing mutuality which manifests itself in a one-of-a-kind object, the annotated book or manuscript.

**Metaphysics, Poetry, Illness**

Coleridge met William Godwin while still a student at Cambridge spending his Christmas 1794 vacation period in London (*Visions* 83-84). They had the same friends and interests, and eventually became friends themselves in spite of their philosophical and theological disagreements. They developed a correspondence through which the two authors shared ideas, work, and criticism. In the spring of 1801, during a period of convalescence for Coleridge, Godwin requested Coleridge’s opinion on his manuscript, a tragedy titled *Abbas, King of Persia*. Coleridge wrote a letter promising to report back to Godwin with his honest assessment of the play’s merits. His response was not especially supportive (“Theatre—alas! alas! that is not to be relied on by you”), and the play was ultimately declined by Drury Lane (*CL* 2: 713n1). Before sending Godwin his annotated copy of *Abbas*, Coleridge prefaces his critique with a disclaimer, warning Godwin that his recent illness led him to deep metaphysical investigations which have unsuited him to poetic enterprises. He writes,
I have been, during the last 3 months, undergoing a process of intellectual exsiccation. In my long Illness I had compelled into hours of Delight many a sleepless, painful hour of Darkness by chasing down metaphysical Game—and since then I have continued the Hunt, till I found myself unaware at the Root of Pure Mathematics—and up that tall smooth Tree, whose few poor Branches are all at it’s very summit, am I climbing by pure adhesive strength of arms and thighs—still slipping down, still renewing my ascent.—You would not know me--! All sounds of similitude keep at such a distance from each other in my mind, that I have forgotten how to make a rhyme…I look at the Mountains only for the Curves of their outlines; the Stars, as I behold them, form themselves into Triangles—and my hands are scarred with scratches from a Cat, whose back I was rubbing in the Dark in order to see whether the sparks from it were refrangible by a Prism. The Poet is dead in me—my imagination (or rather the Somewhat that had been imaginative) lies, like a Cold Snuff on the circular Rim of a Brass Candle-stick, without even a stink of Tallow to remind you that it was once cloathed & mitred with Flame. That is past by!—I was once a Volume of Gold Leaf, rising & riding on every breath of Fancy—but I have beaten myself back into weight & density, & now I sink in quicksilver, yea, remain squat and square on the earth amid the hurricane, that makes Oaks and Straws join in one Dance, fifty yards high in the Element.
However, I will do what I can—Taste & Feeling have I none, but what I have, give I unto thee.—But I repeat, that I am unfit to decide on any but works of severe Logic. (CL 2: 713; underlining mine)

In this passage Coleridge insists that his metaphysical studies have left him unable to think like a poet. He seems to realize he has made his professed point poorly, halting his lyric sally to remind Godwin what his illustration supposedly illustrates—“I have forgotten how to make a rhyme,” “The Poet is dead in me,” and “That is past by.” The choppiness of these abrupt statements marks them out from their surroundings, but before we have time to wonder at the incongruity, Coleridge launches off again just as suddenly, back into the long fluid lines, the “rising & riding,” of inspiration. Even if Coleridge doubts his capacity to rhyme, he does so in a passage of striking lyric beauty, coyly inviting his reader to ignore his official line, to read it as a sort of prose poem instead—a fitting form for a metaphysician-poet. A final summing up seems at once necessary and jarring precisely because he has just demonstrated how very alive in him the poet in him actually is.

Of course, Coleridge had entirely valid practical reasons for denying his poetic sensibility in this letter, just as he had practical reasons for reminding Godwin that he had been ill. It is possible that in doing so Coleridge has found a way to implicitly exercise his poetic authority while professing the opposite for the sake of his rather delicate friendship with Godwin. As Gurion Taussig points out in Coleridge and the Idea of Friendship, “Coleridge situates himself in a Cowperian tradition of social management whereby polite friends abide by rules of conduct, designed to minimize the ‘Danger of
conflagration’ in social relations” (280). The potential for such a “conflagration” was always present in the friendship between Coleridge and Godwin, partly because of their different expectations in social exchanges. As set forth in Political Justice, Godwin adamantly demanded “sincerity” over disingenuous politesse, and the “rules of conduct” in his friendship with Coleridge reflected this (Taussig 281). The letter excerpted above should be read in this context. Perhaps Coleridge was posturing to soften the blow to his friend’s ego that he (rightly) suspected his “sincere” criticisms would produce in spite of Godwin’s insistence on brutal honesty.27

But this passage operates on another level as well. The letter indicates Coleridge’s very real ambivalence about his poetic powers, about the relationship between the poet and the metaphysician, and a conflicted sense of the role that his illness played in mediating the aspects of his authorial identity. He tells Godwin that he has undergone a sea change as a writer, and attributes this to the time he spent “exsiccating” during his illness. He claims this period had a transformative effect on him, so much so that “You would not know me.”

The terms he uses to describe himself, before and after, largely draw on a chemical and alchemical lexicon: from wax candle to “Cold Snuff,” gold leaf to a heavy

---

27 Coleridge’s response was indeed brutal. Coleridge returned Abbas to Godwin annotated using a system of four marks, each corresponding to a different fault. According to William St. Clair, “There is scarcely a page of manuscript which is not liberally spattered. One passage of five lines is condemned on all four counts…. The marks are sometimes reinforced by comments—‘Execrable metre,’ ‘a solecism in manners,’ ‘Too bad,’ ‘a foul line,’ ‘Whoo!!’…In only [three] places is there a word of commendation ‘well written’ to offset the 111 separate faults that Coleridge had noticed before he began to tire somewhere in Act II” (qtd. in Taussig 286). Despite his request that Coleridge not hold back, Godwin was offended when he received the annotated Abbas. The resulting quarrel led Coleridge to vow that in the future “I will never therefore willingly criticize any manuscript composition, unless the author and I are together / for then I know, that say what I will, he cannot be wounded—because my voice, my look, my whole manner, must convince any good man, that all I said was accompanied with sincere good-will & genuine kindness” (CL 2: 762).
substance, “squat and square on the earth.” For some time Coleridge had been actively engaged with study in “natural philosophy” broadly, and especially interested in chemistry. His friendship with Humphry Davy, with whom he was also actively corresponding during this period, gave him access to one of the preeminent scientific thinkers of his day. Coleridge took advantage by inquiring regularly after developments in Davy’s research and “chemical philosophy.” In 1800 he wrote to Davy with plans to “attack Chemistry, like a Shark” (CL 1: 605). He reported back with his progress in May 1801, just over a month after his letter to Godwin: “As far as words go, I have become a formidable chemist—having got by heart a prodigious quantity of terms &c to which I attach some ideas” (CL 2: 727). In 1802 Coleridge attended Davy’s entire lecture series at the Royal Institution, taking copious notes. His intellectual intentions were at least partly creative; he said he attended Davy’s lectures to “renew my stock of metaphors” (qtd. in Hartley 45).

In his March 25, 1801 letter to Godwin, Coleridge described his three months of illness as a kind of gestation. If the process “killed” the poet in him, it did so partly on a linguistic level, making him forget “how to make a rhyme,” or to arrange language in structures immediately recognizable as poetry. But it brought on a rebirth in the kind of language available to him as well—one that would draw upon the metaphors from natural philosophy that he was investigating, and which he did seem to think might be compatible with a broader theory of language/poetics. As he describes it to Godwin, this metamorphosis left him a new kind of creature, something more mysterious than beautiful, someone even a friend would not recognize, and might even fear or disdain.
Indeed, it seems as though Coleridge himself wanted help figuring out whether he really could be a poet-metaphysician, a “formidable chemist” of words, and if so, what this hybrid thing would look like.28

Over a year later Coleridge was still soliciting his friends’ opinions on this question. He writes to Sotheby in July 1802 with a similar triangulation of illness, poetry, and metaphysics. Here again Coleridge claims that his poor health “first forced me into downright metaphysics,” and suggests that metaphysics was essentially antipathetical to the project of poetic creation. Nevertheless, he again goes on to describe his disorder with imaginative gusto. He even ends the letter with his poet’s cap on, by transcribing “a poem written during that dejection” (he does not attribute them, but the lines are edited from “A Letter to Sara Hutchinson,” the poem that Coleridge quoted in his letters from this period more than any other he had written [Parrish 7]). Before his verse quotations, the letter announces to Sotheby his completion of a translation of Gesner’s *Der erste Schiffer* into English blank verse. He asks for Sotheby’s permission to send it, and explains the project’s genesis:

I wished to force myself out of metaphysical trains of Thought—which, when I trusted myself to my own Ideas, came upon me uncalled—and when I wished to write a poem, beat up Game of far other kind—instead of a Covey of poetic Partridges with whirring wings of music, or wild Ducks shaping their rapid flight in forms always regular (a still better image of

---

28 Coleridge expresses some misgivings. He worries in an 1802 letter to Sotheby that the “poetical Prose” that was becoming so characteristically Coleridgian was “a very vile Olio” (CL 2: 814).
Verse) up came a metaphysical Bustard, urging its’ slow, heavy, laborious, earth-skimming Flight, over dreary & level Wastes. (CL 2: 814)

The image of the “metaphysical Bustard” is telling. Unlike the flocks of partridges or wild—but domestically familiar—ducks, the bustard was a singular curiosity. The largest bird in England, the species was well on its way to extinction by the time Coleridge wrote this letter to Sotheby in 1802.29 As a result, the bustard would have been considered a distinctive but unfamiliar creature, defined by its strangeness, rarity, and decline. During what Coleridge himself would later call “this AGE OF PERSONALITY” (Friend 2: 138), diagnosing his writer’s block by associating himself with a “metaphysical Bustard” placed himself in a similarly singular taxonomical category. The malady described in the passage marks him as a “character,” sui generis.

But we could reasonably expect this passage to have surprised Sotheby. It came just days after another long letter from Coleridge, which contained its own vivid statement on metaphysics and the poet, but to a far different end. In that letter Coleridge defended his metaphysics in bold terms. It contains the passage comparing the “great Poet” to a “profound metaphysician” quoted in the last section and which I’d like to turn to again here:

It is easy to cloathe Imaginary Beings with our own Thoughts & Feelings;
but to    send ourselves out of ourselves, to think ourselves in to the

Thoughts and Feelings of Beings in circumstances wholly & strangely

---

different from our own: hoc labor, hoc opus: and who has achieved it?
Perhaps only Shakespeare. Metaphysics is a word, that you, my dear Sir!
are no great Friend to. But yet you will agree, that the great Poet must be,
implicite if not explicité, a profound Metaphysician. (CL 2: 810)

Here he makes the exact opposite claim about the relationship between metaphysical
investigation and poetic sensibility: metaphysics is not only compatible with poetic
production, but a prerequisite for the “great Poet.” Coleridge stresses the near-heroic
difficulty of sympathizing with others as a task for both the poet and metaphysician,
recalling a journal entry from the summer of 1801: “Sympathy the Poet alone can excite /
any Dabbler in stories may excite Pity.—The more I think, the more I am convinced that
Admiration is an essential element of poetical Delight” (CN 1; 957).30

In the face of the author’s claim to individuality, singularity, sole authorship, is
the fact of his dependence on others, “Beings in circumstances wholly & strangely
different from our own.” He enacts this by “opening his viscera” within the communal
dialogue of correspondence with others, who are themselves authors (figuratively and
often literally) and therefore subjects as well. Another effect of these lines is to open up
his identity to the interpretation of his reader, to excite the reader’s imaginative
involvement. Each passage in each letter is a possibility which Coleridge presents. He
asks, often literally, for his reader to respond and comment. Coleridge submits his own
diagnostic account to the judgment of his reader, who will in turn provide his diagnosis.

---

30 Coburn’s note to this entry references a letter to John Rickman of March 26, 1804, in which Coleridge
states “Approbation accompanied by a sense of the Difficulty would make no very bad definition of
Admiration.”
Coleridge often explained exactly what kind of reading he wanted to his correspondents. In a discussion on critiquing writing and being critiqued, he enjoined Sotheby to “[b]e minute, & assign your Reasons often, & your first impressions always--& then blame or praise—I care not which—I shall be gratified” (CL 2: 863). He could handle blame or praise, but not indifference. In the same letter he reveals the intellectual intimacy that their critical correspondence will facilitate: “You have imposed a pleasing task on me in requesting the minutiae of my opinions concerning your Orestes—whatever these opinions may be, the disclosure of them will be a sort of map of my mind, as a Poet & Reasoner—& my curiosity is strongly excited.” In revealing to Coleridge his work, a representation of the author in his text, Sotheby will receive in exchange the “disclosure” of the “minutiae” of Coleridge’s thoughts, enacting a reciprocal opening and revealing of Coleridge’s mind to his friend. Each will open himself to the judgment of the other, each will enter into the other that is opened to him by judging. The passage imagines that Coleridge’s opening and entering are both enacted by the very same gesture of providing feedback, which engages Sotheby and in so doing, reveals Coleridge.

Several weeks later Coleridge sent the Orestes manuscript with his critical notes back to Sotheby, again claiming that the detail of his response indicates his investment in the project. He calls his annotations “minutiae minutissimae” and says he sends the heavily marked manuscript back “half-ashamed” (probably remembering the offense Godwin took to what he surely thought of as Coleridgian nitpicking) (CL 2: 873). He describes the practice that guided his reading:
After I had looked at the building with something of the eye of an architect, to turn myself into a fly, & creep over it with animalcular feet, & peer microscopically at the sand-grit of it’s component Stones / this may give you no great idea of my Taste, but I am persuaded, it will please you as proof of the zeal, with which I read, while I read.31

He finishes, “How deeply I admire the Tragedy, & how sincerely / —I flatter myself, I shall prove to you by proving that I understand it” (CL 2: 874).

The practice obviously had its limitations. Coleridge’s writing practices facilitated sharing, but ultimately the fact was that any writing produced as and in correspondence depended on (at least) two subjective authors—the letter writers. Coleridge’s ideal relationship with his reader was an ideal not always realized. He explains an instance of this to Godwin, who, as Vickers observes, disappointed Coleridge by failing to care about or respond to Coleridge’s graphic autobiographical accounts of his illness and dejection. Coleridge writes, “If I underwent any alteration of feelings, it was in consequence of my appearing to observe in your Letters a want of interest in me, my health, my goings on. This offended my moral nature, & (so help me God) not my personal Pride. I considered it as a great Defect in your character…” (CL 2: 782). Coleridge then reminds him once

31 Leslie Griggs points out that his detailed notes extend through the first three acts of Orestes, and then end with Coleridge’s explanation: “Men almost always write most correctly when they write most passionately. It is a common opinion, but I will ever assert, that [it] is a compleat vulgar error that cold writers are the correct writers. Passion is the common Parent both of Harmony [and of correctness] / --Now whether it be that the latter part of the Tragedy (rolling shoreward in larger billows of Passion) is indeed faultless in language, or that tho’ I have read it over three times, I am still incapable of reading it with sufficient calmness to detect any minute faults—I know not. The effect is certain—I cannot find the dot of an I amiss in it” (CL 2: 873).
again of all the unfortunate circumstances of his personal life that he had shared through his letters to Godwin, and remarks, “Of all this you knew but a part, & that, no doubt, indistinctly / yet there did appear to me in your letters a sort of indifference—a total want of affectionate Enquiry…it did appear to me, as if without any attachment to me you were simply gratified by the notion of my attachment to you” (CL 2: 783-784). The letter’s final word is a denial that he was motivated to write about his own disorders and other circumstances of his life because of “Self-love, or of pleasure from the writing about myself.” As he had claimed to Sotheby, “blame or praise—I care not which,” but the “indifference” Coleridge accords to Godwin’s perceived lack of reciprocity, or to a reader who withholds judgment, was insupportable.
Conclusion

While the letters this study has analyzed were unpublished in Coleridge’s lifetime, they were circulating and they were intended to be seen and read. Furthermore, many of the earliest versions of Coleridge’s published poetry and prose (including both “A Letter to Sara Hutchinson” and “The Pains of Sleep”), exist in his correspondence. Coleridge culled a great deal of copy for *The Friend, Biographia Literaria*, and other published works from letters and notebook entries—many of them originally written in the years of this investigation. For example, Coleridge wrote in an 1802 notebook entry

> I lay too many Eggs <in the hot Sands of this Wilderness, the World!> with Ostrich Carelessness & Ostrich Oblivion. The greater part, I trust, are trod underfoot, & smashed; but yet no small number crawl forth into Life, some to furnish Feathers for the Caps of others, & still more to plume the Shafts in the Quivers of my Enemies, of them that lie in wait against my Soul. (CN 1: 1248)

These same lines would reappear, lightly edited, in chapter 2 of the *Biographia*, as well as in letters to Poole, Francis Jeffery, and Sir George Beaumont (Halmi 398).

The “ostrich” passage expresses Coleridge’s constant concern that much of his best thinking and writing never survived to maturity—that is, never developed from notebook entries, passages in letters, public lectures, into published volumes of poetry or prose. He defends his intellectual contribution in these other less well-recognized mediums in chapter 11 of the *Biographia*: 
Even if the compositions, which I have made public, and that too in a form
the most certain of an extensive circulation, though the least flattering to
an author’s self-love, had been published in books, they would have filled
a respectable number of volumes, though every passage of merely
temporary interest were omitted…. But are books the only channel
through which the stream of intellectual usefulness can flow? Is the
diffusion of truth to be estimated by publications; or publications by the
truth which they diffuse or at least contain. (BL 1: 220; qtd. in Kearns 125)

Books are “flattering to the author’s self-love” because they assert the author as the
independent originative source of the material they contain. But here and elsewhere
Coleridge asserts that this is not the most productive way of thinking of the author’s
function. The “great Poet” should be most concerned not with constructing his own
monolithic, and ultimately mythic, identity as a wholly “individual genius,” but by
contributing to a public discourse, part of which requires attention to and imaginative
interaction with those “Beings in circumstances wholly & strangely different from our
own.” He portrays his authorial choices as ones that have subsumed his own independent
authority to a “stream of intellectual usefulness”—and a kind of greater intellectual good.

To the extent that these confessional correspondences can have a narrative, the
“story” they tell is ultimately as much “about” their own sharedness—the fact of their
own being told, read, responded to, retold—as they are “about” any of the strands of
information they confess/communicate, from illness and opium use, to dejection and
marital unhappiness. As Dennis Foster writes, “[T]he value of confession is determined
not by ‘the presence of a secret content,’ but by a ‘capacity for circulation and exchange’” (qtd. in Frawley 67) that reader and writer participate in together. In place of the book, Coleridge’s model is the conversation.32

Less literally, Coleridge’s solicitations of his readers’ judgments and diagnoses extend to the reading practices contemporary Coleridge readers bring to his texts. By diagnosing, we too create the author, the Coleridge that we read. This is true of all critical engagement, but as this project has attempted to demonstrate, Coleridge seems uniquely attuned to this dimension of the author/reader relationship and the extent to which engaging with the text in one role (as reader or author) ends up engaging one in other roles as well. In abstraction, the author transcends the dilemma of whether force is exerted upon him from without or derived from within himself by recognizing the extent to which individuals in communication are both subjects and objects. The author creates and then exerts his subjectivity in the world, insisting through writing that “I AM,” but, becoming text, submits to the interpretation, judgment, diagnosis of his readers, whose identities he, as their reader, helps to construct in an ever-expansive intertwining of intersubjective creation. But of course, the concrete results of this theoretical practice are far from a happy dialectical synthesis of subject/object relations; Coleridge’s best work, closest friendships, and subtlest metaphysical engagements were marked by the conflicts that inevitably arose in his project of synthesizing and systematizing an experience as over-determined as his “Disease.”

32 Of course, it’s a conversation that he dominates. Mme De Stael’s famous quip that “avec M. Coleridge, c’est tout a fait un monologue” was a commentary on the limitations of Coleridge’s self-styled “conversationalist” approach, and alludes to a characteristic conflict between theory and practice.
BIBLIOGRAPHY


http://www.jstor.org/stable/1771079


McCarthy, Thomas J. Relationships of Sympathy: The Writer and the Reader in British


Treadwell, James. Autobiographical Writing and British Literature, 1783-1834.


