

insanity, and, in the present day, an excessive preoccupation with bodily symptoms. Perhaps wisely, Dillon states that his aim is not to write a history of hypochondria, but rather a history of hypochondriacs. He has chosen nine figures, beginning with James Boswell in the 18th century and ending with Andy Warhol in our time.

Dillon begins his book by admitting to his own bouts of hypochondria, which he links to losing his parents at an early age. His experience as a fellow sufferer makes him an astute commentator on the 'torments' of his nine subjects. Although he recognises that they sometimes endured great distress, he also acknowledges that there was often a certain element of absurdity to their plight. For example, he describes how Charles Darwin kept detailed records of his bodily functions, including the frequency of episodes of flatulence, which, as befits his role as the Great Classifier, he further subdivided into 'slight', 'sharp' or 'excessive'. Marcel Proust famously immured himself in a cork-lined room, from which he issued precise instructions as to how his servant should enter when she brought him his meals, which, naturally, had to be prepared to his exacting standards.

Dillon has chapters on Charlotte Brontë, Florence Nightingale and Alice James, whose experience of ill health can be seen in the context of the place of women in 19th-century society. Brontë used her hypochondria to escape from familial and social demands in order to write her novels. Nightingale's ailments allowed her to become a recluse, hiding from relatives and colleagues but still able to conduct her campaign on behalf of wounded soldiers. Alice James was the sister of the more famous Henry, the novelist, and William, the psychologist. She came from a family where success was judged, not by conventional ideas of

attainment, but by how 'interesting' you were. In reaction to a life without a partner, children, career or creative achievement, Alice responded by enacting her private drama in the only theatre then available to women of her class, the female body. As her brother Henry commented after her death: 'Her disastrous, her tragic health was in a manner the only solution for her of the practical problem of life'.

Dillon is attentive to the cultural context in which his nine sufferers lived and is aware that concepts of illness and terminology have changed markedly over time. This caution is especially important when dealing with the rather bewildering evolution of hypochondria. He also avoids making dogmatic pronouncements to the effect that his subjects were merely suffering from *le malade imaginaire* and points out that Florence Nightingale may have had brucellosis, Darwin could have contracted an infection on his voyage in *The Beagle*, and Marcel Proust had asthma. Rather, Dillon is interested in the way psychological and physical symptoms interact. The history of hypochondria, he maintains, makes us think about the nature of sickness and about what can legitimately be called a disease. He writes: 'The history of hypochondria is an X-Ray of the more solid and familiar history of medicine: it reveals the underlying structure of our hopes and fears about our bodies'. Dillon's book has certainly provided a penetrating picture of this subject.

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