



The good and the bad – epilepsy in film and literature

MEDISIN OG KUNST

CHRISTER MJÅSET

E-mail: chrnja@gmail.com

Department of Neurosurgery

Oslo University Hospital Rikshospitalet

Christer Mjåset (born 1973), assistant registrar in neurosurgery at Oslo University Hospital Rikshospitalet. He is also a writer of fiction and has published two collections of short stories and two novels. In his novel *The doctor who knew too much* (2008), the protagonist is a doctor who suffers from epilepsy.

The author has completed the ICMJE form and declares no conflicts of interest.

BACKGROUND

Notions about epilepsy have changed dramatically through history, and this is reflected in fiction and film. This article provides a general overview of the ways in which people with epilepsy have been portrayed in books and on the screen from Antiquity until the present day.

MATERIAL AND METHOD

The article is based on searches in PubMed with the search terms ‘modern literature’, ‘film’ and ‘epilepsy’, a review of the list ‘Epilepsy in literature’ prepared by the European Epilepsy Academy, and on the author’s own familiarity with films and books.

RESULTS AND INTERPRETATION

There is a tendency for characters with epilepsy to be portrayed as either very good or very bad, in line with the ambivalent notion dating from Antiquity that epilepsy was associated with both divine powers and demonic possession. In the modern era these notions have been toned down considerably, but review studies show that the archetypes from Antiquity keep recurring.

Apart from tuberculosis and syphilis, few diseases have been as steeped in myth as epilepsy. The generalised tonic-clonic seizure has been associated with phenomena ranging from divine powers and possession by spirits to mental and moral depravity, and this has been chronicled and described extensively in fiction and feature films.

In this article I will attempt to provide a brief overview of the ways in which characters with epilepsy have been portrayed in these media. Because aspects of medical history are so

significant in this context, the examples are largely presented in chronological order.

Material and method

The books and films were selected after a search in PubMed with the search terms ‘modern literature’, ‘film’ and ‘epilepsy’ and a review of ‘Epilepsy in literature’ prepared by the European Epilepsy Academy (1). In addition, I have made use of my own familiarity with fiction and films. The final selection was made at my own discretion.

Possession and divine powers

The first written accounts of epilepsy are found on Babylonian stone tablets dating from the year 1000 BCE. Epileptic seizures are here described as caused by possession by ghosts or demons. This idea persisted into Greek Antiquity, where it was common to assume that epilepsy was related to the moon goddess. The designation ‘epilepsy’ is also derived from the Greek word for ‘to attack’ or ‘to be gripped’ (*epilambanein*).

The Greeks nevertheless had a more ambivalent relationship than the Babylonians to this disease, as exemplified by the drama *Oresteia* by Aeschylus (525–456 BCE), where prophecies are accompanied by frothing at the mouth, seizures and spitting of blood, as in a generalised epileptic seizure. People with epilepsy were not only considered to be possessed, but also to have contact with the divine, and they could possess divine powers to predict the future (2). Interestingly, such powers of divination have been referred to by a number of modern authors. Similar descriptions are found in Thomas Mann’s *Joseph and his Brothers* (1933–43), Isabel Allende’s *Of Love and Shadows* (1986) and Salman Rushdie’s *Midnight’s Children* (1981).

In the Hippocratic writings from around 400 BCE it is claimed that the reason why epilepsy is associated with the divine lies in the lack of understanding of the disease at the time. Attempts to explain the seizures refer to humoral pathology, which regards illness as resulting from an imbalance between the bodily humours (3). This idea was propounded by the Greek doctor Claudius Galenus (approximately 130–200 CE), who practised in Rome and had great influence on the medical science of the time.

Perhaps this understanding of epilepsy might have developed further in this direction if it hadn’t been for the New Testament, which was written and collected after Galenus’ death. One scene where Jesus heals a boy who has fallen to the ground with seizures is described in the gospels of Luke, Mark and Matthew. Only the latter names the disease, and it is hardly a coincidence that the boy is referred to as a ‘lunatic’ (4). Again, we see the recurring notion that supernatural forces have taken possession of a human being. Moreover, all the evangelists describe the same cure: Jesus drives an evil spirit out of the boy, who is immediately healed.

Morbus daemonicus

Because of the New Testament’s explanatory model of epilepsy, it soon became clear that people who suffered from this disease were destined for hard times. Throughout the Middle Ages, epilepsy was largely considered to be caused by possession by spirits, as divine punishment or as a religious challenge. ‘Morbus daemonicus’ was one its epithets, and driving out demons, or exorcism, was a fairly common remedy performed by the clergy (2).

In the film *The Exorcist* (1973), a modern version of this procedure was dramatised, later giving rise to a separate horror-film genre. Most of these films place their main emphasis on the religious aspects of possession, but the recent *The Exorcism of Emily Rose* (2005) also raises the issue of whether Emily Rose may in fact suffer from epilepsy.

The religious notion of epilepsy remained just as strong during the Renaissance in the early 14th century. Falling to the ground in a seizure was seen as a consequence of sin – it was a fall in the direction of Hell, from which stems the concept of the ‘falling patient’ or the ‘falling

sickness' (2). This polarisation of Heaven and Hell is splendidly illustrated in Raphael's painting *The Transfiguration* from 1500, which depicts the biblical scene described above (Figure 1). In the upper half of the picture Jesus ascends to Heaven, while the boy, having what is assumed by many to be an epileptic seizure, is depicted in the dark-coloured lower half.



Figure 1 *The transfiguration* (1500) by Raphael illustrates two scenes from the New Testament: Jesus revealing his divine nature on Mount Tabor and the 'lunatick' boy having an epileptic seizure. Wikipedia Commons

The association between sin and the act of falling reappears in *The Divine Comedy* (1308–21) by the Renaissance author Dante Alighieri (1254–1321). It describes the author's imagined descent into Hell, Purgatory and finally his ascent to Paradise. On the journey, Dante falls to the ground three times, perhaps exactly symbolising his incomplete morality.

The murderous patient

When William Shakespeare (1564–1616) started writing, the religious interpretation of epilepsy had been somewhat toned down. There was as yet no medical explanation of the disease, many were afraid of becoming infected and prejudice abounded (2). Shakespeare made adjectival use of the concept of epilepsy in a line in *King Lear* (1605), where Kent gives Oswald a tongue-lashing: 'A plague upon your epileptic visage!' In this context, the 'epileptic visage' represents a bruised face caused by multiple seizures without the ability to use one's hands as protection (5).

In Shakespeare's time, many and varied attempts to treat epilepsy were made, and one of the techniques is described in *Othello*. In a conversation with Cassio in the fourth act,

Othello's right-hand man Iago claims that his master suffers from epileptic seizures. Cassio then suggests: 'Rub him about the temples' (6). Believing that epileptic seizures were linked to an increased flow of blood to the head, for example during fits of rage, was not uncommon. Pressing the blood back down from the head towards the neck was thus frequently tried in an attempt to cure seizures (2). Iago nevertheless remains sceptical of Cassio's suggestion. It is part of the story that Othello is a temperamental character, who will later be tricked by Iago into believing that his wife Desdemona is having an affair – and as we know, Othello ends up by killing both her and himself. The indication inherent in Iago's answer is therefore interesting: 'No, forbear; The lethargy must have his quiet course: If not, he foams at mouth and by and by breaks out to savage madness' (6) According to Iago, the epilepsy is rooted in Othello's personality, and the epileptic seizures are the expression of a depraved mind.

This image reappears two hundred years later in *Oliver Twist* (1838) by Charles Dickens (1812–70). Oliver Twist's half-brother Monks suffers from epilepsy, and we recognise the rhetoric in the description of him: 'Those (...) who pursued all kinds of evil passions, vice, and profligacy festered till they found a vent in a hideous disease' (7). The putative link between epilepsy and criminal behaviour was a prejudice that had persisted for hundreds of years when Dickens wrote his novel. Things were not to improve to any great degree for the next hundred years (2).

Fyodor M. Dostoyevsky

In the transition from the 18th to the 19th century the modern novel was born. Romanticism was replaced by realism and later by naturalism. Literary focus is increasingly turned inward to human nature and the subconscious mind (8). It is at the beginning of this wave that the great Russian novelist Fyodor M. Dostoyevsky starts to write (Figure 2). He suffered from epilepsy, and his struggle with the disease came to set its mark on his entire literary production. The kind of epilepsy that afflicted Dostoyevsky is a matter for debate. He was never diagnosed during his lifetime, and the diagnosis is based on his diaries and novels, as well as statements from general practitioners who examined him (9).

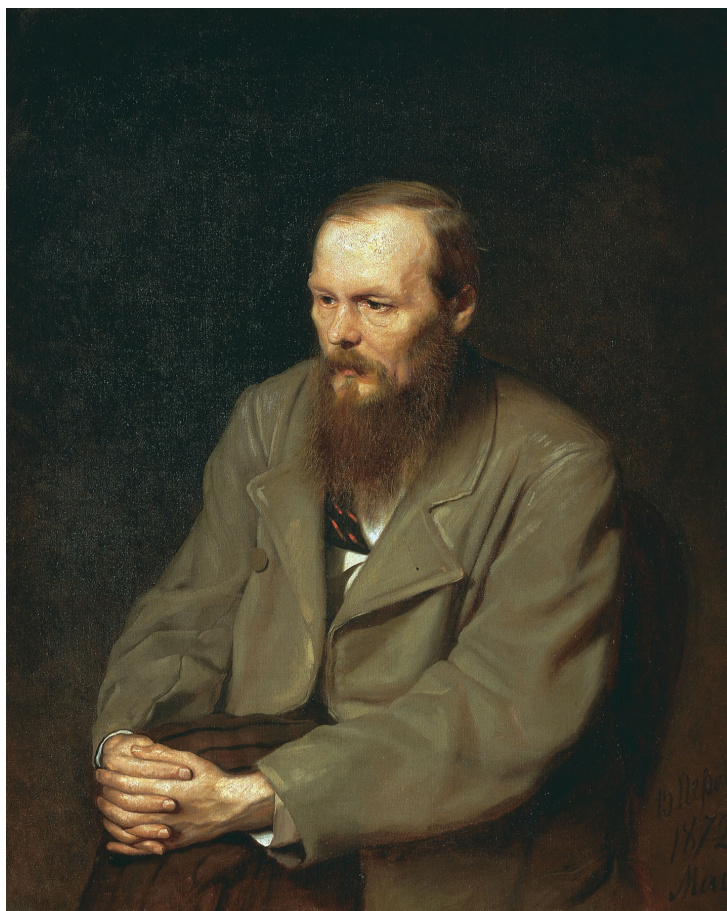


Figure 2 Fyodor M. Dostoyevsky (1821–81) suffered from epilepsy and the disease was a topic in many of his books. Portrait by Vasily Perov, 1872. Wikipedia Commons

Most reports conclude that Dostoyevsky must have suffered from temporal-lobe epilepsy (10, 11). It is claimed that features such as his gambling mania, hyperreligiosity, depressive tendencies and hypergraphia can be explained by this disease. Others believe that he suffered from epilepsy of a primary, generalised type (12), while the Norwegian neurologist Halfdan Kierulf points to the likelihood that Dostoyevsky suffered from meningoencephalitis caused by secondary-stage syphilis (13). In any case, it seems certain that the author suffered from what has later been referred to as 'Dostoyevsky epilepsy', partial seizures represented by brief ecstasy. There was prolonged disagreement as to whether such seizures actually existed, until an Italian neurologist succeeded in capturing one during an EEG scan (14). This finding has later been confirmed, including by Norwegian researchers (15).

The main character of the novel *The Idiot* (1868), Prince Myshkin, suffers from precisely such ecstatic seizures. The prince returns to Russia after a stay in a rehabilitation facility in Switzerland where attempts have been made to cure him of his epilepsy or 'idiocy', with little success. He is a naive character – well-intentioned and benevolent – who encounters a cynical Russian bourgeoisie. Things do not turn out well. The object of his affection is murdered by a jealous rival and the prince returns to Switzerland in a worsened condition.

This Christ-like main character contrasts strongly with another of Dostoyevsky's main characters who also suffers from epilepsy, Smerdyakov in *The Brothers Karamazov* (1880). Smerdyakov bears many similarities to Monks in Dickens' novel. He is the result of his father's rape of a mentally retarded prostitute. He is introverted and hostile, and he also kills his father, who is keeping him as a servant. Smerdyakov conceals the murder by simulating an epileptic seizure and pretending to be in the post-ictal phase. He finally confesses to the crime and commits suicide.

One can safely say that Dostoyevsky's descriptions of people with epilepsy are extremely diverse. He both demonises and glamorises their character, perhaps as a result of his own ambiguous relationship to his disease. Interestingly, this ambivalent image remains consistent with antique notions of the disease, which alternate between divinity and possession. World literature from the late 19th century includes only a few protagonists who merely *have* epilepsy and *are* not merely 'epileptics', with all the prejudice and characteristics inherent in that name.

The modern era

A major medical breakthrough happened when the British neurologist John Hughlings Jackson (1835–1911) finally discovered the neurophysiological causes of epileptic seizures in 1869. A new medical specialty was born, and continuous medical progress was made during the late 19th and early 20th centuries. In the 1850s, potassium bromide was introduced as the first drug that had a real effect on seizures. Patients with epilepsy were provided with their own hospitals and institutions.

Prejudice nevertheless persisted, among doctors as well as the general public. In the United States, legal restrictions existed on marriages, and there were calls for forced sterilisation of people with epilepsy until well into the 20th century (2). Traces of such prejudice can easily be discerned in the famous detective story *The Big Sleep* (1939) by the American author Raymond Chandler (1888–1959). Private detective Philip Marlowe must solve the murder of the bootlegger Rusty Regan. It turns out that the murderer is the promiscuous and spoiled Carmen Sternwood, the daughter of a general, who suffers from epilepsy. In a dubiously described partial seizure she has shot Regan, one of her numerous lovers. Marlowe promises Sternwood's sister that he will refrain from going to the police if Carmen is institutionalised: 'Somewhere far off from here where they can handle her type' (16).

Carmen Sternwood is the personification of the negative myths surrounding her disease: criminal, hypersexual and morally depraved. Like Othello and Monks, she is the murderous epileptic. She does not belong in society with the rest of us.

The well-functioning patient

But then a change occurs. High-functioning characters with epilepsy become increasingly common. In *The Andromeda Strain* (1969), written by Harvard-trained doctor Michael Crichton, the character with epilepsy has been promoted to a top research post. In the book, a group of scientists seek to prevent an alien, life-threatening microbe from spreading from an area in Arizona. One of the scientists tries to keep his epilepsy secret, but at a critical point in the plot he suffers a generalised seizure, which causes the horror scenario to escalate. This highly skilled researcher's epilepsy represents his weak spot. He is unable to perform at his best when he needs to, unlike the other characters in the novel.

The author-cum-doctor Michael Crichton (1942–2008) has also published another novel in which epilepsy is a topic. In it, the description is less than flattering. In *The Terminal Man* (1972) the main character suffers from psychomotor epileptic seizures, and during these he behaves violently without later being able to recall what he has done. He has a brain pacemaker implanted to control the seizures, but ends up becoming dependent on the stimulation provided by the pacemaker and turns into a veritable killing machine. The book cites a study published in 1965 claiming that 36 out of every 100 persons with temporal-lobe epilepsy show aggressive behaviour and that many of them suffer from personality disorders (17).

This was far from acceptable to the American neurological association, and Crichton faced criticism after the publication. For the paperback edition he therefore wrote a preface in which he emphasises that people with epilepsy are no more prone to criminal behaviour than others, and there is no evidence for claiming that determinedly violent behaviour may occur during seizures. Some assert, however, that the book was partly to blame for the fact that during the 1970s and 1980s, it was not uncommon for American defence attorneys to attempt to have their clients acquitted by arguing that violent criminal acts could be caused by epileptic seizures (18).

Epilepsy in the movies

The medium of film is far younger than literary fiction, but that does not mean that epilepsy has been treated with more empathy on the screen than in print. A review of 62 international feature films that deal with people suffering from epilepsy, produced during the years 1929–2003, concludes that old stereotypes remain easily identifiable, and that their use in no way appears to abate. For example, it is shown that male characters with primary epilepsy are typically portrayed as insane, immoral and generally dangerous, while women with this condition are exotic and vulnerable (19). Again, the ancient, ambivalent notions of epilepsy shine through, but this time split between the two genders.

Moreover, the same study finds that epilepsy is most frequently used as a topic for dramas, and that portrayals of everyday challenges associated with this disease have seen an upswing in recent decades. This finding is supported by other studies pointing out that such screenplays help promote new and healthy attitudes to the disease (20). The film *Control* (2007), about the life of Ian Curtis, vocalist of the band Joy Division, may well be seen as a case in point (Figure 3). Here, the main character's epilepsy is described in fairly direct terms, including repeated scenes of generalised seizures that illustrate his sense of loss of control over his life, while his career as a musician takes off. Epilepsy no longer represents a dramaturgical character flaw, as in *The Andromeda Strain*, but an existential challenge.

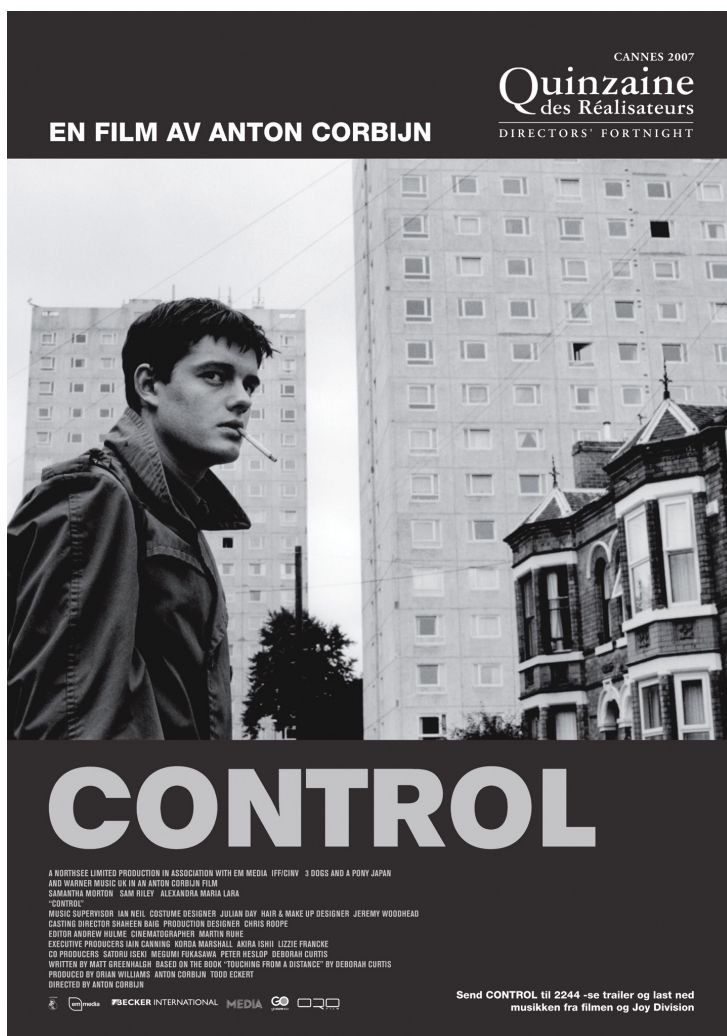


Figure 3 The film *Control* (2007) describes the life of Joy Division vocalist Ian Curtis, who suffered from epilepsy. © Filmweb

Natalie Portman's (born 1981) character in the film *Garden State* (2004), on the other hand, has completely different problems to contend with regarding her epilepsy. Because of the risk that she will fall and hit her head during a seizure, her insurance company wants her to wear a padded helmet at all times. It makes no difference that she has had no seizures for a long time, nor does she have any during the film. The helmet thus becomes an image of the absurd aspects of the American insurance industry, while the epilepsy patient is portrayed as a completely normal person of rare beauty.

Epilepsy in comic-strip format

When writing about epilepsy in drama it is hard not to mention *L'ascension du haut-mal* (published in English under the title *Epileptic*) by the French cartoonist Pierre-François Beauchard (born 1959). It describes Beauchard's own upbringing with a brother who suffers from intractable epilepsy.

The comic-strip medium is used to its full capacity to illustrate the narrator's highly subjective experience of witnessing a family member who is slowly broken down by his disease. The visually grotesque aspects of a generalised seizure are combined with dream-like pictures from the imagination of an unprejudiced child in a way that would make it difficult to reproduce this story in any other format. In addition, it is informative both when it comes to the treatment of epilepsy over recent decades and with regard to a number of more or less alternative therapies.

Conclusion

The understanding of epilepsy and its treatment continues to develop. As I have shown, this

understanding is not always equally well reflected in the portrayal of people with epilepsy in fiction and film. Myths and notions, especially about possession and divinity, continue to inspire authors and film makers, even in our modern era. 'The murderous epileptic' is a recurring character in the crime and thriller genres. The prophetic epileptic seizure is still used in stories that involve events determined by destiny.

In many ways, it is an important insight for therapists that such myths not only live on, but also that patients and their next of kin are repeatedly reminded of them through dramatic media representations. Such myths can thus more easily be anticipated in and during the treatment process.

REFERENCES:

1. Wolf P. red. Epilepsy in literature. Bielefeld: European Epilepsy Academy, 1998.
2. Temkin O. The falling sickness. 2. utg. Baltimore: Johns Hopkins University Press, 1971.
3. Hippokrates. On the sacred disease. <http://classics.mit.edu/Hippocrates/sacred.html> (10.1.2012).
4. Bibelen. Matt 17,15. <http://www.bibel.no/Hovedmeny/Nettbibelen.aspx?query-SyXGjvFYqNIZbs4N/mRmrbxbAr3SBgr6uWqls7LdOOcB±89IqmArHuD8TM3u9h1B> (26.2.2012).
5. Wolf P. Epilepsy in literature. *Epilepsia* 1995; 36 (suppl 1): S12 - 7. [PubMed][CrossRef]
6. Shakespeare W. Othello. Oslo: Aschehoug, 2002: 159.
7. Dickens C. Oliwer Twist. Oslo: LibriArte AS, 1998: 352.
8. Hertel H. red. Verdens litteraturhistorie. Bd. 5: 1830 - 1914. Oslo: Gyldendal, 1989: 28 - 34.
9. Rice JL. Dostoevsky and the healing art: an essay in literary and medical history. Ann Arbor, MI: Ardis, 1985.
10. Hughes JR. The idiosyncratic aspects of the epilepsy of Fyodor Dostoevsky. *Epilepsy Behav* 2005; 7: 531 - 8. [PubMed][CrossRef]
11. Baumann CR, Novikov VP, Regard M et al. Did Fyodor Mikhailovich Dostoevsky suffer from mesial temporal lobe epilepsy? *Seizure* 2005; 14: 324 - 30. [PubMed][CrossRef]
12. Gastaut H. Fyodor Mikhailovitch Dostoevsky's involuntary contribution to the symptomatology and prognosis of epilepsy. William G. Lennox Lecture, 1977. *Epilepsia* 1978; 19: 186 - 201. [PubMed][CrossRef]
13. Kierulf H, Kjetsaa G. Dostojevskijs epilepsi- et nytt syn på en stor dikters sykdom. *Tidsskr Nor Lægeforen* 1999; 119: 2474 - 6. [PubMed]
14. Cirignotta F, Todesco CV, Lugaresi E. Temporal lobe epilepsy with ecstatic seizures (so-called Dostoevsky epilepsy). *Epilepsia* 1980; 21: 705 - 10. [PubMed][CrossRef]
15. Åsheim Hansen B, Brodtkorb E. Partial epilepsy with "ecstatic" seizures. *Epilepsy Behav* 2003; 4: 667 - 73. [PubMed][CrossRef]
16. Chandler R. Den store søvnen. Oslo: De norske Bokklubbene, 1999: 194.
17. Serafetinides EA. Aggressiveness in temporal lobe epileptics and its relation to cerebral dysfunction and environmental factors. *Epilepsia* 1965; 6: 33 - 42. [PubMed][CrossRef]
18. Lewis JA. Violence and epilepsy. *JAMA* 1975; 232: 1165 - 7. [PubMed][CrossRef]
19. Baxendale S. Epilepsy at the movies: possession to presidential assassination. *Lancet Neurol* 2003; 2: 764 - 70. [PubMed][CrossRef]
20. Maio G. Die medialen Deutungsmuster von Krankheit und Medizin. Eine Untersuchung der Stereotypen von Epilepsie im Medium Film. *Fortschr Neurol Psychiatr* 2001; 69: 138 - 46. [PubMed][CrossRef]

Published: 1 November 2018. Tidsskr Nor Legeforen. DOI: 10.4045/tidsskr.12.0151

Received 1.2.2012, first revision submitted 26.2.2012, accepted 1.3.2012.

© The Journal of the Norwegian Medical Association 2020. Downloaded from tidsskriftet.no