

## Historical Note

# Charles Dickens: Observer of Sleep and Its Disorders

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**Summary:** Using the characters of his novels as the canvas, Charles Dickens painted vivid word pictures of a variety of manifestations of sleep and its disorders. These were presumably based on the author's own experiences and those of family and friends. Dickens was, himself, a self-confessed episodic insomniac. For this he devised the unique therapy of long night walks. This article illustrates, by a few selected quotations, this hitherto unpublicized aspect of the author's life and works. **Key Words:** Charles Dickens—Sleep disorders.

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The human condition was closely observed by Charles Dickens and vividly portrayed in his novels. Among the tremendous variety of characters in his fiction, with various pathological states and nuances of psychological aberration, are vivid descriptions that closely fit those recognized in modern medicine. The Pickwickian syndrome is the best known (1), and its manifestations have been analyzed in relation to Dickens' description (2). Sir Russell Brain made pertinent observations on neuropsychiatric conditions among Dickens' characters (3). Dystonia and dyskinesia have also been identified among his dramatis personae (4). It is not generally recognized that Dickens' observations extended to sleep and parasomnic states. This preoccupation with sleep might have been fostered by his own periodic insomnia, for which he devised a unique, but apparently effective, remedy, without the use of narcotic drugs.

### INSOMNIA

In *Pickwick papers* Dickens wrote "Every one has experienced that disagreeable state of mind, in which a sensation of bodily weariness in vain contends against an inability to sleep". Mr Pickwick "tossed first on one side and then on the other; and perseveringly closed his eyes as if to coax himself to slumber". On this occasion his sleep was prevented by "thoughts of grim pictures, and the stories to which they had given rise.

He came to the conclusion that it was of no use trying to sleep, so he got up and . . . dressed himself" (5).

Many other characters suffered from insomnia, usually situational in type. On the eve of her ill-matched marriage to Dombey, Edith Granger found "no rest in the tumult of her agitation . . . . Thus in the dead time of the night before her bridal, she wrestled with her unquiet spirit . . ." (6). Florence Dombey also allowed personal relationships to disturb her sleep: "Her . . . repugnance to this man . . . invaded her dreams and disturbed the whole night. Rising in the morning, unrefreshed, and with a heavy recollection of the domestic unhappiness of the previous day . . ." (7). Even the source of Florence's insomnia, James Carker, in flight from Dombey, suffered from the same condition: "His object was to rest . . . . He was stupefied and he was wearied to death . . . his drowsy senses would not lose their consciousness. He had no more influence with them in this regard, than if they had been another man's" (8).

Like today, travel disturbed sleep. Dickens observed that "The tendency of mankind when it falls asleep in coaches is to wake up cross; to find its legs in the way; and its corns an aggravation" (9). The same may be said to apply to modern Economy Class air travel. Dickens' own experience of sleepless nights and his remedy were recorded in "Night Walks": "a temporary inability to sleep, referable to a distressing impression, caused me to walk about the streets all night. The disorder might have taken a long time to conquer, if it had been faintly experimented on in bed; but it was soon defeated by the brisk treatment of getting up directly after lying down, and going out, and coming

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home tired at sunrise . . . (10). My last special feat was turning out of bed at two . . . and walking thirty miles into the country to breakfast . . . fell asleep to the monotonous sound of my own feet, doing their regular four miles an hour . . . dozing heavily and dreaming constantly . . ." (11).

### PROMOTION OF SLEEP

Apart from his own energetic but eccentric remedy for insomnia, Dickens was aware that other circumstances favored the onset of sleep. Rescued from likely imprisonment and nursed back to health in the Brownlow home, *Oliver Twist* ". . . fell into that deep tranquil sleep which ease from suffering alone imparts; that calm and peaceful rest which it is pain to wake from" (12). Several characters, at various times, showed the soporific effects of meals, as did Major Bagstock who became "sleepy in the process of digestion" (13). Certain surroundings were found to favor sleep: an apartment at the Blue Dragon Inn ". . . was a good, dull, leaden, drowsy place, where every article of furniture reminded you that you came there to sleep and that you were expected to go to sleep . . . they provoked sleep . . . were . . . disposed to snore" (14).

Dickens also noted that people have a tendency to exaggerate their loss of sleep. Volumnia Dedlock, following Sir Leicester's stroke ". . . makes a merit of not having 'closed an eye'—as if she had twenty or thirty—though it is hard to reconcile this statement with her having indisputably opened two within five minutes" (15).

### PARASOMNIC DISTURBANCES

Dickens was very aware of the process of falling asleep, and of various stages in sleep. He wrote of himself: "It is a curiosity of broken sleep that I made immense quantities of verses . . . and that I spoke a certain language, once familiar to me, but which I have nearly forgotten from disuse, with fluency. Of both these phenomena I have such frequent experience in the state between sleeping and waking, that I sometimes argue with myself that I know I cannot be awake . . ." (16).

Many of his characters showed signs and symptoms of sleep onset that are now well recognized. Miggs, ". . . sitting up far beyond the usual hour . . . arrived at that restless state and sensitive condition of the nervous system . . . constant rubbing and tweaking of her nose, a perpetual change of position . . . a frequent friction of her eyebrows . . . a small groan, a gasp, a sigh, a sniff, a spasmodic start . . ." (17). David Copperfield described his sensations on trying to keep awake: "I was dead sleepy . . . I had reached that stage of sleep-

iness when Peggotty seemed to swell up and grow immensely large. I propped my eyelids open with my two forefingers . . ." (18). On another occasion David was ". . . so sleepy that I couldn't keep my eyes open. They begin to close again . . . I wake with a start . . ." (19). These appear to have been hypnic jerks and hypnagogic hallucinations.

Barnaby Rudge also had hallucinations: ". . . I have been asleep. There have been great faces coming and going—close to my face and then a mile away—low places to creep through—high churches to fall down from—strange creatures crowded up together neck and heels, to sit upon the bed . . ." (20).

At an inn there was ". . . a sleepy waiter, who had got the fidgets in his legs, and was twisting them, and hitting them, and putting them through all sorts of contortions . . ." (21). Might this be the earliest description of the restless legs syndrome?

Dickens' description of the waking process must be based on his own experience: "Oliver . . . was not thoroughly awake. There is a drowsy state, between sleeping and waking, when you dream more in five minutes with your eyes half open, and yourself half conscious of everything that is passing around you, than you would in five nights with your eyes fast closed, and your senses wrapt in perfect unconsciousness . . . Oliver was in this condition . . ." (22).

That Dickens was aware of the phenomenon of sleep paralysis is shown by the experience of Oliver in the following passage: "There is a kind of sleep that steals upon us sometimes, which, while it holds the body prisoner, does not free the mind from a sense of things about it, and enable it to ramble at its pleasure. So far as an overpowering heaviness, a prostration of strength, and an utter inability to control our thoughts or power of motion, can be called sleep, this is it; and yet we have consciousness of all that is going on about us, and, if we dream at such a time, words which are really spoken, or sounds which really exist at the moment, accommodate themselves with surprising readiness to our visions, until reality and imagination become so strangely blended that it is afterwards almost a matter of impossibility to separate the two . . ." (23). Weir Mitchell first described sleep paralysis in 1876, 40 years after this account.

### DREAMS, NIGHTMARES AND NIGHT TERRORS

Many of Dickens' characters had dreams, mostly of a situational type. Walter Gay, who survived a shipwreck in which he was thought lost, had ". . . floated so often . . . on that piece of wreck . . . in my dreams . . . since my preservation . . ." (24). David Copperfield was very prone to dreams and nightmares. He dreamed

about Uriah Heep "... for what appeared to be half the night; and dreaming that he had launched Mr. Peggotty's house on a piratical expedition, with a black flag at the masthead ... under which diabolical ensign he was carrying me and little Em'ly to the Spanish Main to be drowned" (25).

Florence Dombey "... in her sleep could not lose an undefined impression of what had so recently passed. It formed the subject of her dreams, and haunted her; now in one shape, now in another; but always oppressively, and with a sense of fear. She dreamed of seeing her father in wildernesses, following his track up fearful heights, and down into deep mines and caverns; ... extraordinary suffering ... yet never being able to attain the goal and set him free .... In the terror of this dream she cried out and awoke ..." (26).

Some characters experienced night terrors: Chester, in *Barnaby Rudge*, "... went to bed and fell asleep, but he had not slept long when he started up and thought that Hugh was ... calling in a strange voice, very different to his own, to be admitted. The delusion was so strange upon him, and so full of that vague terror of the night in which such visions have their being, that he rose ..." (27).

### SLEEP AUTOMATISMS

Dickens was also aware of manifestations of automatisms. Captain Cuttle had "... Some uneasy ideas that he must be walking in his sleep, or that he had been troubled with phantoms ..." (28). Mrs Perch heard her husband "... moaning in his sleep, 'twelve and ninepence in the pound, twelve and ninepence in the pound!' Which act of somnambulism he supposed to have originated in the impression made upon him by the change in Mr Dombey's face ..." (29).

### HYPERSOMNIA

Charles Dickens is best known in medicine for the character, Joe, the fat boy, on whom the Pickwickian syndrome is founded. Though this term has, by common usage, been applied to the cardiorespiratory syndrome of extreme obesity (1), or the sleep apnea syndrome (2), alternative or additional diagnoses must be considered. Joe's introduction is as "... a fat and red-faced boy, in a state of somnolency" (30). Although Joe did snore, Dickens did not describe apneic episodes such as were displayed by others of his characters (31,32). Also, bear in mind that he was a teenager who displayed a pathological appetite.

There are many references to his extreme gluttony. On a picnic, Joe "... proceeded to unpack the hamper with more expedition than could be expected from his previous inactivity ... (sleep) ... the leaden eyes which

twinkled behind his mountainous cheeks leered horribly upon the food ... the fat boy was hanging fondly over a capon, which he seemed wholly unable to part with" (33). At a wedding, Joe "... glanced from the cod-fish to the oyster barrels, and chuckled joyously ... and divided his time into small alternate allotments of eating and sleeping" (34). At a meal, "There was the meat-pie of which the youth had spoken so feelingly ... a steak, and a dish of potatoes, and a pot of porter ..." The fat boy said "Oh, my eye, how prime! I am so hungry" (35).

Joe's somnolence is legendary. In addition there is occasional evidence of behavioral disturbance: Pickwick commented: "This is such an extremely singular lad! ... upon my word I am afraid that, at times he is a little deranged" (36). Given the obesity, somnolence, overeating and periodic behavioral aberration, in a young boy, it seems possible that he portrays a diencephalic syndrome, or possibly the Kleine-Levin syndrome, rather than the cardiorespiratory syndrome of extreme obesity. Joe's reported interest in the opposite sex, represented by Mary, does not exclude such conditions. Even hypersexuality may be a feature of these. The fault is not with Dickens' description, but it may be with interpretation of signs by 20th century physicians.

Some other characters suffered from hypersomnia. William Dorrit, traveling in Europe after his release from prison, fell asleep in inappropriate circumstances, including one occasion when "... as he stood ... he fell into a heavy doze, of not a minute's duration, and awoke with a start" (37). But this was associated with general mental and physical decline, and "... he fell into a weakness so extreme that he could not raise his hand". He died shortly afterward. This somnolence must have been from metabolic disease such as uremia or diabetes, or other system disease.

Many of Dickens' characters snored when asleep. Some showed features of obstructive sleep apnea. John Willet, sitting before the fire on a winter's night "... gave no other signs of life than breathing with a loud and constant snore ... began to doze ... his breathing was pretty much the same ... save that he sometimes experienced a slight difficulty in respiration (such as a carpenter meets with when he is planing and comes to a knot), neither of his companions was aware of the circumstance, until he met with one of these impediments .... Mr Willet came to another knot—one of surpassing obduracy—which bade fair to throw him into convulsions, but which he got over without waking by an effort quite superhuman". This earned the comment from Mr Cobb: "He sleeps uncommon hard". Later, Willet had "... got into such a complication of knots, that it was perfectly clear he must wake or die. He chose the former alternative, and opened his eyes"

(31). Dickens seems to have realized the potential mortality of obstructive sleep apnea.

On his night walks, Dickens found a London coffee-stall holder, who "... was so heavy with sleep that in every interval of toast and coffee he went off anew behind the partition into complicated cross-roads of choke and snore, and lost his way directly ..." (32).

Hugh, the ostler at the Maypole Inn, was in the habit of sleeping on the job. A guest at the inn remarked: "I should think if he were living, he would have heard you by this time". His employer responded: "In his fits of laziness, he sleeps so desperate hard ... that if you were to fire off cannon-balls into his ears, it wouldn't wake him" (38).

These passages are but a few of many that illustrate Dickens' close observation and vivid description of sleep and its many facets. For one without medical training, living in an era before sleep was formally studied, the accuracy and insight are remarkable.

Conditions such as the restless legs syndrome, sleep paralysis and obstructive sleep apnea had not been formally described, so these word pictures must have been based on his own observations and those of family and friends. Dickens' preoccupation with sleep might have been provoked by his own experiences of sleep and parasomnias. His episodic insomnia and his self-devised, unique remedy of long night walks might have allowed his genius extra time for reflection and invention of plots, characters and dialogue for his novels. Dare we recommend the same for our insomniac patients?

### References to Dickens' works

The following abbreviations have been used in referring to those of Dickens' works that are quoted. The large number of publications and editions makes it possible to provide only chapter numbers and not pages:

PP = *Pickwick papers*  
 MC = *Martin Chuzzlewit*  
 UT = *The uncommercial traveller*  
 BR = *Barnaby Rudge*

DC = *David Copperfield*  
 DS = *Dombey and son*  
 OT = *Oliver Twist*  
 BH = *Bleak house*  
 LD = *Little Dorrit*

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6. DS, chapter 30.
7. DS, chapter 47.
8. DS, chapter 55.
9. MC, chapter 8.
10. UT, chapter 13.
11. UT, chapter 10.
12. OT, chapter 12.
13. DS, chapter 27.
14. MC, chapter 3.
15. BH, chapter 58.
16. UT, chapter 10.
17. BR, chapter 51.
18. DC, chapter 2.
19. DC, chapter 5.
20. BR, chapter 6.
21. DC, chapter 19.
22. OT, chapter 9.
23. OT, chapter 34.
24. DS, chapter 50.
25. DC, chapter 16.
26. DS, chapter 35.
27. BR, chapter 28.
28. DS, chapter 39.
29. DS, chapter 58.
30. PP, chapter 4.
31. BR, chapter 33.
32. UT, chapter 13.
33. PP, chapter 4.
34. PP, chapter 28.
35. PP, chapter 54.
36. PP, chapter 54.
37. LD(II), chapter 19.
38. BR, chapter 10.