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“Cribb’d, Cabined, and Confined”: Fear, Claustrophobia and Modernity in Richard Marsh’s Urban Gothic Fiction

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‘Neurotics’ and ‘Ghosts’: Discursive Overlap in Medicine and the Gothic

In an article on “Nervous Diseases and Modern Life”, published in the Contemporary Review in 1895, T. Clifford Allbutt explores the contemporary notion that “affections of the nervous system are on the increase”. Allbutt lists a number of “nervous maladies” that contemporaries connected with modernity, including “nervous debility”, “hysteria”, “neurasthenia”, “fretfulness”, “melancholy” and “unrest” – all of which were supposedly resulting from “living at a high pressure, the whirl of the railway, the pelting of telegrams, the strife of business, the hunger for riches, the lust of vulgar minds for coarse and instant pleasures, the decay of those controlling ethics handed down from statelier and more steadfast generations”. Allbutt concludes his bitterly sarcastic commentary on the “outcry of the modern neurotic” by rejecting such concerns over the mental, moral and physical health of the nation. “Rich and idle people”, he states, “run, as they always did, after the fashionable fad of the day; what was ‘liver’ fifty years ago has become ‘nerves’ to-day.” Nervous ailments, he contends, are characterised by the sufferer’s “restlessness, quackishness and craving for sympathy”, and “the intellectual acuteness of many of these sufferers, the swift transmission of news by the press, and the facilities of modern locomotion all favour the neurotic traffic.” Nervous illness, thus, has become a fashionable diagnosis with the “inquisitive and peremptory generation” of the fin de siècle: “our neurotics have begun like ghosts to walk, and we exclaim that the earth is full of them!” (Allbutt 210, 214, 217, 218).

While Allbutt is concerned with criticising contemporary medical and social discourses on the degenerative and enervating impact of modernity, the comparison of neurotics to ghosts is intriguing. As David Trotter notes, medical men often used Gothic terminology to discuss psychological, particularly phobic, experiences in the nineteenth century. Moreover, in his analysis of phobic discourse in canonical Victorian and Modernist fiction, Trotter also argues that agoraphobia is commonly described in nineteenth-century fiction before Carl Otto Westphal named the condition in 1871: that, in effect, a fiction writer’s “diagnosis” of spatial phobia is not dependent on the existence of a preceding medical diagnosis (Trotter 464-70). To a certain extent literary texts thus provoked nosological classification. This essay will extend Trotter’s suggestive claim that fin-de-siècle medical debates and urban Gothic fiction share a common cultural context. It traces the ways in which phobic discourses are present within Richard Marsh’s urban Gothic novels The Beetle: A Mystery (1897) and The Goddess: A Demon (1900). Both novels are located within the contexts of modernity, the urban experience, and chronic fear, and their plotlines detail the plight of British protagonists – all somehow weak or wanting – who fall prey to foreign influences in a fin-de-siècle London that plays its own monstrous part in the novels. In The Beetle, a grotesque shape-shifting presence, part man, part woman, part gigantic beetle, invades London to avenge British desecration of the cult of Isis in Egypt. The monster proceeds to hypnotise, terrorise and sexually assault men and women from its base in suburban West London, but its ability to achieve this level of psychic
control is dependent on the mental weakness of the novel’s protagonists. In *The Goddess*, an Indian sacrificial idol exerts an uncanny mental influence over the man who brought her to London, seemingly inspiring him to fratricide and alcoholism before his eventual and gruesome suicide in a bizarre torture ritual. The following analysis will focus on the phobic, specifically claustrophobic, experience of two male characters in decaying physical, moral and financial conditions: the unemployed and starving clerk Robert Holt, who falls prey to the Beetle after seeking shelter from inclement weather inside a seemingly empty house, and the middle-class Edwin Lawrence, the owner of the Indian idol, whose gambling, collapsing finances, criminal connections and alcohol consumption lead him to the Goddess. However, phobic experiences are not exclusively a male affliction in Marsh’s fiction: some attention will also be paid to the two female protagonists, Marjorie Lindon, a strong-willed, outspoken New Woman who confidently navigates the public sphere of London in *The Beetle* until her encounter with the monster destroys her self-assurance, and the independent actress Bessie Moore, who suffers a mental collapse after witnessing the Goddess’s gruesome embrace, in order to illustrate how thoroughly Marsh positions his literary engagement with contemporary medical discourses in a late-nineteenth-century context.

What will emerge in the subsequent literary analysis is that Marsh’s fiction becomes a site which successfully negotiates the interaction between two seemingly different prose genres that prospered at the turn of the century: on the one hand, the medico-scientific accounts of nervous debility, chronic fear and spatial phobia and, on the other, the Gothic mode, which experienced a remarkable vogue in the 1880s and 1890s, “the moment when a distinctively urban Gothic was crystallised” (Luckhurst, *Contemporary* 530). Gothic, Fred Botting points out, constantly “transforms its own shape and focus” (Botting 20) in its articulation of contemporary social and cultural anxieties. As Teresa A. Goddu similarly argues, the Gothic is “a traveling form, both geographically and generically”, that “cannibalises other genres and transgresses their domain” (Goddu 127). “If the gothic is the repository for cultural anxieties,” Goddu concludes, “then the specific form and site of its conventions have much to say about its cultural effects. . . . Local contingency governs possible readings of the gothic and its cultural resonances” (Goddu 126). The reading of Marsh’s fiction aims to establish to what extent the medical debate on states of fear and the Gothic revival of the late nineteenth century emerged from a shared cultural backdrop. Indeed, that both types of discourse shared the same register is immediately apparent in their focus on the detrimental consequences of modern urban living: where medical accounts insist on the chronic, morbid character of states of fear, produced by the experience of modernity and, particularly, modern city life, late-Victorian Gothic writing characteristically focuses on the contemporary, decaying city as a site of corruption and ruination of the independent human subject. This ‘urban Gothic’ writing uses an imagery of darkness, fog and crime to convey a sense of the modern city as a place of danger and corruption (Botting 1-13; Hurley 124-41; Mighall 30-33). The key tropes of the Gothic mode – darkness, horror, sensations of suffocation and loss of control, irrationality, madness – bear an uncanny resemblance to medical definitions of fear and phobia, which emphasise the irrationality, the loss of control and the potential insanity of the sufferer. The discursive overlap between the medico-scientific and the Gothic-fictional register thus spotlights the associative connection between urban space and nervous illness in late nineteenth-century attempts to develop accurate pathological directories for chronic fear and anxiety.
In this attempt Marsh’s fiction emerges as an especially promising site for a critical analysis of phobias – and claustrophobia in particular – because of the author’s personal experience of spatial confinement during an eighteen-month jail sentence of hard labour in 1884-85, and because of his evident interest in mental illness. As Roger Luckhurst has convincingly argued, The Beetle is situated in the context of medical and psychic debates on telepathy and mind control (Luckhurst, Invention 208-10). For Victoria Margree, the novel similarly “opens on a note of anxiety that . . . belongs to the modern metropolis itself” and deals “with the changing nature of the social fabric of Britain” (Margree 64). Correspondingly, The Goddess, a novel which is not widely known, can be read as a text obsessed with nervous maladies connected with modernity. The novel references instances of hysteria, hallucination, irrationality, paranoia, persecution complex, delirium tremens, and dementia, and abounds with medical terminology connected to mental health: “imbecile[s]”, “idiots”, “raving lunatic[s]” and “maniac[s]” feature prominently in this novel populated by characters who are “stark mad”, “off [their] mental balance” and “mentally incapable” (Marsh Goddess 12, 63, 73, 86, 96, 129, 257). Although Marsh uses these terms predominantly in a non-medical sense, the frequency with which they occur clearly marks the novel’s paranoia over mental health issues. Moreover, the discussion of mental pathologies is firmly situated within contemporary medical debates by the introduction of the character of Dr Hume, “an authority on madness” who “is a student of what he calls obscure diseases of the brain; insisting that we have all of us a screw loose somewhere, and that out of every countenance insanity peeps” (Marsh, Goddess 262, 35). The prevalence of these tropes, then, can be seen as evidence of the wide-spread appeal and presence of phobic terminology in popular culture at the fin de siècle.

“Oh to be out of that room!”: Fear, Spatial Phobia, and the Gothic
The last three decades of the nineteenth century witnessed extensive medical discussion on states of fear. Mathias Roth, in his Notes on Fear and Fright (1872), divides such sensations into feelings of fear, or “a depressing mental impression, caused by real or imaginary danger by which we are, or believe ourselves to be, threatened . . . combined with an involuntary endeavour to escape the threatening danger”; fright or terror, “a mental shock based on fear caused by a sudden irruption of a real or imaginary danger for which we are perfectly unprepared”, and dread, “a minor species of fright or terror, but of a more enduring nature” (Roth 1-2). According to Roth, “Darkness, solitude, silence, sleeplessness, contribute as external causes to the development of fear” (Roth 8), and he describes terror, the most powerful of these states, as producing “a succession of recurring periods of unconsciousness, alternating very rapidly with intervals of consciousness” and causing “total deprivation of consciousness, and even death”. Terror is associated with “a perfect cessation of the function of the will” and “the sensation of paralysis”. Its physical symptoms include “coldness and the pallor of the face, the throbbing of the head . . . a tearing and pressing frontal headache, and profuse cold perspiration on the face and head, eructation and vomiting of acrid and acid mucus, palpitation of the heart, oppression of the chest, and shaking of the body and limbs, difficulty of breathing, with sensation of heaviness and cold in the abdomen” – a list of intense physical symptoms that have the potential to incapacitate, even kill, the sufferer (Roth 3-5). It is perhaps not surprising that people already in a ‘weakened’ physical or mental condition were seen as particularly prone to suffer from sensations of fear and
terror. According to Roth, those pre-disposed to suffer from states of fear included “[w]eakly constituted, sickly, ailing, highly imaginative persons, those who have been shaken by a railway or other accident, convalescents after severe illness”, people suffering from a range of illnesses, women at the “critical periods” of life, “children, adolescents, and adults whose education has been neglected [or] whose mental education has been conducted on false principles”, “persons addicted to drink”, those indulging in “sexual excesses”, people suffering from depression, “professional” or “commercial men” engaged in stressful situations, and “in general students and others who overtax their mental powers” (Roth 7-8). Fear, in other words, appeared as the index of a wide range of pathologies.

Indeed, contemporary debates interpreted states of fear alternatively as a medical condition, a manifestation of degeneration or of flawed development, as a type of insanity, or as a symptom of modernity. Contemporary mental specialists commented widely on “the fearful progress of this moral avalanche”, stating that “morbid mental disorder” was “unhappily on the increase” (Winslow 174). As Andrew Wynter bleakly concluded in 1875, “That there is an immense amount of latent brain disease in the community, only awaiting a sufficient exciting cause to make itself patent to the world, there can be no manner of doubt” (Wynter 1). Vigorous medical discussion of the issue at the end of the nineteenth century, which coincided with contemporary interest in questions of degeneration and the impact of modernity on the mind, led to an interest in phobias, or “morbid fears which are due to insanity or a diseased brain” (Morse 37). As Trotter notes, “The last three decades of the nineteenth century were phobia’s belle époque” (Trotter 463), and the period, in keeping with a range of discourses focused on the city and the experience of living in the city, witnessed a special interest in spatial phobias. Consequently, when presenting a paper to the Psychology section of the British Medical Association, meeting in Cork in August 1879 for its forty-seventh annual conference, Benjamin Ball identified the condition “claustrophobia” as “a state of mind in which there was a morbid fear of closed spaces . . . apparently different from, but in reality similar to, agoraphobia or the dread of open spaces”. In his paper, Ball argued that claustrophobia and agoraphobia were both “closely allied to the causeless depression of melancholy or the furious excitement of mania” and were to “be viewed as the result of a distinct and peculiar form of insanity” (Ball 371). In the following years, a number of medical doctors, psychologists and psychiatrists investigated the condition. In 1893, for example, Harry Campbell noted the claustrophobe’s “panic” at the thought of physical constraint, his “frantic efforts to secure perfect freedom of limbs and breathing”, and his “morbid fear of suffocation and of captivity” (Campbell 463). By the mid-1920s, Frederick William Alexander, the Medical Officer of Health of the Metropolitan Borough of Poplar, was able to offer a range of definitions of claustrophobia. These included a “morbid dread of confined spaces”, a “morbid apprehension of being in a house or any enclosure or confined space”, and, interestingly, “a condition of introspection, i.e., looking inward, contemplating one’s own mental processes” (Alexander 1): claustrophobic space could now be located inside the patient’s mind as well as within the physical space of the modern city. Alexander further describes claustrophobes as “unable to bear the feeling of enclosure. . . . [A] suffocating sensation overcomes them often combined with palpitation of the heart, and they break into a cold sweat. In fact, they become panic-stricken, uncertain, and unable to reason” (Alexander 1).
Fear, of course, is a key element in all Gothic fiction. The inclusion of feelings of terror or horror is a given in this genre that seeks to provoke sensations of unease in the reader. A fluid genre, the Gothic seeks to provoke unease in its readers by making them confront fears and anxieties that are relevant to their cultural context. In their focus on late-Victorian London as a site of a “keenly felt sense of disorientation” (Thacker 7) and derelict buildings as places of corruption, Marsh’s novels feature the darkness, fog and lack of clarity typical of fin-de-siècle urban Gothic, but they also reference contemporary fears over hostile urban space (Vuohelainen, “‘Oh to Get Out of that Room!’” 115-24). Correspondingly, claustrophobic scenes in both novels are located within Gothic interiors towards which characters are precipitated by a hostile urban world. The Gothic is famously preoccupied with binaries, including the distinction between inside and outside (Schmitt 13). Marsh’s novels deliberately call attention to this dichotomy by emphasising spatial relations and spatial transgression. Thus, The Beetle begins with chapters which are respectively entitled “Outside” and “Inside”, while key episodes in The Goddess take place in chapters entitled “The Woman Who Came through the Window” and “In the Room”. Both novels abound with examples of spatiality, boundaries and spatial transgression, as characters are spatially entrapped or cross spatial boundaries, as in the entrances from an exterior to an interior space that occur at the beginning of both texts. These spatial transgressions are typically characterised by Holt and Bessie’s hesitation at the boundary between the “inside” and the “outside”. It is notable that the Beetle is herself associated with claustrophobic interiors throughout the novel, whether in her violation of young men in Egyptian caves, her torture of Marjorie Lindon in her bedroom, in a hotel room, and in cabs and on trains, or in her initial assault on Holt at the beginning of the novel. The Goddess, similarly, inspires sensations of claustrophobia in her victims, seemingly turning even exterior urban spaces into foggy enclosures characterised by lack of freedom and of visibility.

Transgressive acts of entering forbidden spaces directly set off the claustrophobic narratives of the two texts. To the starving Holt, a clerical figure representative of modern urban conditions (Margree 64-66), even the shelter offered by the Beetle’s lair, a “dismal-looking habitation” “threatening to tumble down” (Marsh, Beetle 222), is inviting: “I saw the open window”, Holt explains, “How it rained out there! . . . And, inside that open window, it was, it must be, so warm, so dry” (Marsh, Beetle 10). Refused entry to the casual ward, the homeless Holt is initially glad of any shelter from the rain, regardless of its architectural or hygienic failings. This domestic space is not only pitch-black, dirty and infiltrated by an “uncomfortable odour . . . suggestive of some evil-smelling animal” (Marsh, Beetle 228-29), but Holt’s entry into the house soon leads to a violation of his personal space which reverses his initial burglarious entry through the open window. In a primal scene that sees Holt effectively enveloped by an unknown evil presence described in overwhelmingly physical terms, the resident monster in the form of a giant, malodorous beetle proceeds to climb up Holt’s body:

With a sense of shrinking, horror, nausea, rendering me momentarily more helpless, I realised that the creature was beginning to ascend my legs, to climb my body. . . . [I]t mounted me, apparently, with as much ease as if I had been horizontal instead of perpendicular. . . . Higher and higher! It had gained my loins. It was moving towards the pit of my stomach. . . . It reached my chin, it touched my lips, – and I stood still and bore it all, while it enveloped my face.
with its huge, slimy, evil-smelling body, and embraced me with its myriad legs. (Marsh Beetle 14-16)

Holt describes his reaction to this encounter as one of “panic fear”, but it is in fact very similar to the claustrophobe’s “panic”, “frantic efforts to secure perfect freedom of limbs and breathing” and “morbid fear of suffocation and of captivity”, as described by Campbell (Campbell 463). Though initially glad of any shelter, Holt, once inside the Beetle’s den, begins “to wish [he] had not seen the house; that [he] had passed it by; that [he] had not come through the window; that [he] were safely out of it again”. “[O]verwrought, played out; physically speaking, at [his] last counter”, Holt feels that his “mental organisation ha[s] been stricken by a sudden paralysis” (Marsh, Beetle 12). This rapid utterance reflects his descent to irrationality: “The horror of it made me mad”, Holt explains, “I dashed towards the window. . . . [O]h to get out of that room! . . . [D]espite my hunger, my fatigues, let anyone have stopped me if they could!” (Marsh, Beetle 16). Holt’s chaotic thoughts, focused wholly on escaping “the horrible glamour . . . of [the] near neighbourhood” (Marsh, Beetle 30) of the Beetle, direct the reader’s attention to his spatial fear. Evidently, though, Holt here conflates the claustrophobic, dark space inhabited by the monster with the physical presence of “something strange, something evil” that he must escape (Marsh, Beetle 13). His spatial fear is intimately related to his perception of the presence within the room but also to his sensations of paralysis, suffocation, and physical and mental constraint as the Beetle promptly proceeds to enslave her victim, “to warp [Holt’s] limbs; . . . to confine [him], tighter and tighter, within, as it were, swaddling clothes; to make [him] more and more helpless” (Marsh, Beetle 34). The creature, invertebrate by definition, turns the tables on Holt who “in that room, in that presence” describes himself as “invertebrate” (Marsh, Beetle 17) in his “backboneless state” (Marsh, Beetle 8).

In an apparent contrast to Holt’s experience in The Beetle, Edwin Lawrence in The Goddess, hiding from the officers of the law and from his creditors, takes up his residence in a “large, bare, barn-like room” (Marsh, Goddess 266) in “a building which, outwardly, was more like a warehouse than a private residence” (Marsh, Goddess 253). Inside, the room is characterised by its emptiness and spaciousness: “The floor was bare. . . . The furniture was scanty. In one corner was a camp bedstead, the bedclothes in disorder” (Marsh, Goddess 266). Rather than suggesting spatial confinement, the dwelling’s uncomfortable characteristics are its bareness, lack of furniture and, in particular, the suggestion of alcoholism: “Bottles and glasses . . . were everywhere. . . . On the floor, in the corner, opposite the bedstead, were at least seven or eight dozen unopened bottles, of all sizes, sorts, and shapes” (Marsh, Goddess 266). Lawrence has gone from extreme comfort in a snug, modern mansion block to extreme squalor in this bare studio. This social transgression and Lawrence’s need for space are equated in the novel with a mental breakdown resulting from too close a contact with the Goddess, Lawrence’s “demon” (Marsh, Goddess 245). As in the case of Holt, it is this contact with the evil presence that has led to Lawrence’s fear of spatial entrapment. Interestingly, though, Lawrence, an urbanite and appreciator of comfort, has previously been “one of the most finical men . . . on the subject of draughts”: a “properly ventilated apartment set him shivering, even in the middle of summer. The faintest suspicion of a healthy current of air made him turn up the collar of his coat. No room could be too stuffy for him” (Marsh, Goddess 111).
Such sensitivity sets Lawrence up as suspect, since healthy Anglo-Saxon manhood should surely not shiver at the thought of fresh air. Like Holt, Lawrence is a creature of the city and, in contemporary medical parlance such as Roth’s account quoted above, predisposed to nervous ailments. However, Lawrence exacerbates these tendencies by “the life of dissipation” (Marsh, *Goddess* 282) he leads and, in particular, his alcohol consumption, which produces delirium tremens and accentuates his inherent tendencies towards paranoia and persecution complex. After his encounter with the Goddess, Lawrence comes to associate spatial enclosures, represented in curiously personalised terms as physical oppression, with death: “There’s a hand upon my heart, a grip upon my throat, a weight upon my head; they make it hard to breathe. I’ll be in close quarters soon enough; I’ll keep out of them as long as I can” (Marsh, *Goddess* 245). Closed spaces, in the company of the Goddess, become oppressive and insupportable, just as they did for Holt in seeking to escape the vicinity of the Beetle.

While Marsh never terms these experiences ‘claustrophobic’, they are nonetheless very close to contemporary medical descriptions of the condition which describe the fear of being suffocated or crushed or of losing consciousness or control of one’s thoughts or actions as a result of feelings of entrapment. Indeed, the two discourses – the medical discourse on phobia and the Gothic discourse on the sensation of horror – have striking parallels: the encounter with monstrosity provokes the inability “to bear the feeling of enclosure”, the resulting “suffocating sensation” and the “palpitation of the heart” described by Alexander (Alexander 1). Like claustrophobes, the victims of the Beetle and the Goddess are also “panic-stricken, uncertain, and unable to reason” (Alexander 1), and experience a “cessation of the function of the will” and a “sensation of paralysis” which in the case of Holt does indeed resemble death. These unpleasant sensations are exacerbated by the “[d]arkness, solitude, silence, sleeplessness” which Holt and Lawrence experience (Roth 4, 8). In an interesting conflation of the Gothic register with medical terminology, Lawrence believes himself to be haunted by the Goddess, his “demon”, but the novel’s narrator John Ferguson describes Lawrence’s increasing *insanity* as his “demon”: “He was not mad, as yet, but on the border line, where men fight with demons. He had been drinking, to drive them back; but they had come the more, threatening, on every hand, to shut him in for ever” (Marsh, *Goddess* 245, 243).

Although such language may seem Gothic excess, similar expressions were, in fact, commonly used in contemporary medical discourse on nervous debilities. Wynter, for example, references the neurotic’s “struggles with the inward fiend” as he inhabits the “Borderlands of Insanity” (Wynter 5). Marsh here offers us a particularly striking example of such discursive overlap between the vocabularies of the Gothic and of science.

“Cribb’d, cabined and confined”: Spatial Phobia, Modernity and the Gothic

In his 1879 address, Benjamin Ball had linked claustrophobia with its apparent opposite, agoraphobia, or the fear of open spaces. Contemporaries agreed with this seeming nosological polarity. In his response to Ball’s paper, G.M. Beard offered the general designation of “Topophobia, or fear of places”, including “agoraphobia, or fear of open squares or places, and claustrophobia, or fear of closed places”, which he viewed as “morbid fears” (qtd. in Ball 371). For a number of commentators, phobias were in fact symptomatic of life in the modern city. The fragmented experience of modernity was supposedly conducive to mental instability, hysteria and even
madness: phobias, connected with nervous impairment, were seen as symptomatic of the bustle and the social isolation of modern urban existence. Thus, Josiah Morse explained phobias as emanating from “neuropathic brains which do not offer normal resistance to nervous currents and therefore find themselves in a state of constant excitation and irritation” (Morse 44). Campbell noted the claustrophobe’s objections “to travelling in trains” and his “abject dread of tunnels” and argued that this condition on “the borderland of insanity” was linked to city life since the sufferer typically “disliked a crowd or narrow passages, and might even be fearful of walking down a street with high houses on either side” (Campbell 463). For Alexander, writing in 1925, the link to modern city life was even more explicit in “the chronic condition” of people “suffering from nerve exhaustion” and “obsessed by fear” (Alexander 2). Claustrophobia in Alexander’s work is linked to the conditions which characterise modernity and city life – office work, crowds, public transport, lack of open spaces and fresh air:

Dislike and dread of travelling in Tubes or Underground Railways is often expressed by people suffering from nervous strain, overwork, etc. . . . The overcrowded state of trains add their quota [sic] to the already strained nerves; perhaps a morning journey in a congested railway carriage, close work in an office – possibly underground – rom 8.30 a.m. to 5.30 p.m., and then a journey home under the same overcrowded conditions. . . . In these strenuous days when individuals expend nervous energy to a large extent during the hours they are confined in offices, it is not surprising that nervous diseases are on the increase. – [T]he panic-stricken condition daily recurs in travelling backwards and forwards to business in tubes and trains. Through constant self-annoyance the sufferer becomes almost melancholic. A sufferer from Claustrophobia is inclined to relieve his condition by imbibing alcohol with the result that the more he drinks the more he wants, until such imbibing becomes habitual. (Alexander 1-2)

The similarities between the two discourses of medicine and fiction are further developed in characters’ urban experience in Marsh’s novels. The darkness and bad weather of Marsh’s perpetually nocturnal fin-de-siècle London ensure that visibility is lacking, and characters feel lost and vulnerable. Streets are invariably narrow and dark, and appear to close in on the characters. In The Goddess, the London fog contributes to this disorientating and confining effect, turning day into night and preventing characters from seeing clearly: “It was between three and four o’clock in the afternoon. Already the lamps were lighted. The fog still hung over the city. From the appearance of things it might have been night” (Marsh, Goddess 215). Even when he is outdoors, Edwin Lawrence can hear the monster calling him back, laughing all the time: “Through the mist, out there in the Fulham Road, there came the sound of a woman’s laughter . . . – soft, low, musical; yet within it, indefinable, yet not to be mistaken, a quality which was pregnant with horrible suggestion” (Marsh, Goddess 229). The Goddess is capable of making the city shrink around the characters, enveloping each of them in a fog symbolic of their mental perturbation.

In The Beetle, rain plays a similar role. Accordingly, on the “miserable night” Holt falls prey to the monster, “The rain was like a mist, and was not only drenching [him] to the skin, but it was rendering it difficult to see more than a little distance in any direction. The neighbourhood was badly lighted” (Marsh, Beetle 6). London
weather – the “delightful fog”, the “filthy rain” (Marsh, Beetle 198) making the pavements “wet and slimy”, and an “easterly wind” “howling wildly” and “shrieking” (Marsh, Beetle 41) along the streets – serve to heighten the reader’s sense of unease. However, although the characters are in an open space, this urban setting is rendered claustrophobic because of the lack of visibility, the darkness, the narrowness of the streets and the implied presence of monstrosity. The city itself thus becomes a monstrous, suffocating presence, so hostile that the choice Holt has to make between “inside” and “outside” is a difficult one. For not only is the nocturnal London of The Beetle dark and dirty, but it is also strangely devoid of people as Holt finds out on his “remote-controlled” (Luckhurst, Trance-Gothic 164) expedition from Walham Green to Lowndes Square: “All the way I never met a soul. . . . [T]here are streets in London, long lines of streets which, at a certain period of the night, in a certain sort of weather . . . are clean deserted; . . . not a creature did I see, nor, I imagine, was there a creature who saw me” (Marsh, Beetle 39-40). Such desolation is not natural and inspires a dread of the city and its desolate spaces in the novels. The city is here depicted as both consisting of a network of dark streets and thus claustrophobic, and unnanically empty and spacious, and therefore agoraphobic. While Holt has achieved his primary target of escaping the Beetle’s den, albeit briefly and under psychic control, his sensations continue to be those of unease, but now they are provoked by the great open and unpopulated expanse of the nocturnal city. Fearful sensations are thus produced by both agoraphobia and claustrophobia.

Moreover, in firmly linking claustrophobia with its conceptual opposite, agoraphobia, in the description of the modern metropolis, Marsh’s Gothic fiction draws heavily on scientific terminology. The two novels echo contemporary medical analyses that identified the sensation of phobia, and particularly of topophobia, as symptomatic of modernity itself. It is not by accident that the chief characters suffering from spatial phobias in the two novels are Holt, an unemployed clerk; Lawrence, an urban gambler and rogue; Marjorie, a New Woman figure; and Bessie, an actress. All of these characters are products of the modern city. Marsh’s protagonists are, thus, subject to the “constant excitation and irritation” (Morse, 44) which Morse saw as conducive to abnormal states of morbid fear: the city itself provokes a phobic experience, whether by its emptiness as in The Beetle or by its crowdedness as in The Goddess, a novel that contains some notable crowd scenes in which the “hustling throng” gathers as out of nowhere to “h[af]ng round” the protagonists “like a fringe”, “growing, both in numbers and in impudence” in preparation for “an ugly rush” (Marsh, Goddess 240, 252-53). The protagonists are both isolated and threatened by the crowd in this foggy city.

In keeping with the medical opinions of the period that city dwellers “expend nervous energy” in traversing the city “in Tubes or Underground Railways”, the “overcrowded state of [which] add[s] their quota to the already strained nerves” (Alexander 1-2), Marsh also provides us with various examples of hired and public transport, all of them evoked negatively in the two novels. The Beetle dwells excessively, even titillatingly, on the unseen horrors that take place inside the train compartment and the public cab that the Beetle uses to flee with her captives, Marjorie and Holt. Other passengers and the cab driver hear “wailing”, “shrieks and yells” (Marsh, Beetle 312) from within, which lead to speculation over the “unimaginable agony”, “speechless torture” and “nameless terrors” suffered within the “rattling, jolting box on wheels” carrying Marjorie and Holt “through the heart of civilised London” (Marsh, Beetle 316). The text thus invites the reader to speculate on
the experiences of Marjorie and Holt, and the fate reserved for them, but we are never allowed to witness what happens inside the closed space of the cab; this experience is so horrific that both characters remain mute about it. This narrative coyness is echoed in *The Goddess*, where the exact nature of the spectacle that Bessie has witnessed remains unknown until the very end of the novel. The action itself has taken place behind closed doors: we only know that the horror of it has sent Bessie mad, just as Marjorie’s torturous experience unhinges her mind in *The Beetle*.

What is more, *The Beetle* concludes on a note of warning regarding the dangers of modern modes of transport. The monster attempts to escape her pursuers by an express train with the captive Marjorie, the starving Holt having expired in the meantime. The pursuers follow on a special train, “expecting at every moment . . . to be derailed” as the carriage “rocked and swung, and jogged and jolted”. The passengers are “jerked backwards and forwards up and down, this way and that”, and “the noise was deafening”: “It was as though we were being pursued by a legion of shrieking, bellowing, raging demons” (Marsh, *Beetle* 341). This form of travelling, which, as Thacker argues, “intensifie[s]” the “psychic unease at being situated in the ‘giddy space’ of the metropolis” (Thacker 91), foreshadows the train crash that involves the express carrying the Beetle and Marjorie, presented to us as an apocalyptic scene in which the mangled engine “vomit[s] forth smoke, and steam, and flames” and “what had once been the interiors” of the front coaches are now “match-boxed” (Marsh, *Beetle* 346-47). Marjorie is pulled out of this wreckage in a state of imbecility, while the monster vanishes and is presumed dead. In *The Goddess*, Lawrence refuses to enter a cab, preferring walking to other modes of transport: “I’ll have none of your cabs,” he explains, “I’ll walk. I’m cribb’d, cabined, and confined out in the open; in a cab I’d stifle” (Marsh, *Goddess* 245). The fear of being forced to enter a cab provokes “a fit of maniacal fury” and a “crescendo” threat of bodily violence towards anyone trying to compel him to enter a closed space, confirming both the morbidity of Lawrence’s spatial phobia and its very real grip upon him (Marsh, *Goddess* 246). Lawrence’s vehemence is in keeping with the “nerve exhaustion” and the “panic-stricken condition” identified in commuters by Alexander, but his alcoholism also tallies with the sufferer’s supposed inclination “to relieve his condition by imbibing alcohol with the result that the more he drinks the more he wants, until such imbibing becomes habitual” (Alexander 1-2). For contemporary medical men, modern urban existence was conducive to nervous ailments, and Marsh’s novels, both of which abound with instances of hysteria, hallucination, irrationality, and accusations of insanity, tally with such anxieties over the state of contemporary society and, particularly, urban life.

A representative Gothic writer of the period, Marsh was not a medical man. Nevertheless, his fiction provides us with phobic readings of monstrosity which are closely linked to the spatial experience of fin-de-siècle London. Like many of his contemporaries, Marsh articulates a sense of spatial fear in his urban Gothic fiction that is intimately connected to late-Victorian medicine’s diagnosis of the mental dangers inherent in the experience of urban modernity. While the urban Gothic is a different discourse from contemporary medical and scientific debates on spatial phobia, the two share a conceptual register and emerge from a shared cultural context. Both discourses address the problems brought about by the growth of cities, by the lack of space resulting from building activity and overcrowding in urban areas, and by a perceived increase in mental illness. Even where there is little direct evidence that establishes causal links between medicine and fiction, both were undoubtedly
influenced by the conditions of modernity and the attendant anxieties over mental health that characterised the fin de siècle.
Notes

1. This is not to suggest that Marsh was methodically or even deliberately trying to translate medical concerns into fiction. His work is here sampled because it can be seen as representative of the gothic revival, in particular the generic movement towards urban gothic, in this period. However, the concerns articulated by Marsh, a professional author working on topics of interest to the mainstream public, can also be located in the urban gothic fiction of his better-known contemporaries Bram Stoker, Arthur Conan Doyle and Robert Louis Stevenson. By the end of the century, improved access to printed matter had resulted in considerable overlap between different discourses: the popular fiction papers of the period such as Strand Magazine and Pearson’s Magazine, both of which published Marsh’s fiction, regularly carried articles on popular science, including representations of nervous illness, which made their way to lower-middle- and middle-class family homes. Some of this topical discourse may have seeped into Marsh’s fiction at a completely unconscious level. However, as a professional author, Marsh was also aware of the commercial potential of contemporary debates: as Allbutt notes, nervous illness was a “fashionable fad”, and Marsh may have hoped to benefit from the prominence of such concerns at the time by provoking and manipulating images and rhetorical devices with which his readers were familiar from the contemporary press.

2. For Hurley’s interpretation of the scene, see The Gothic Body, pp. 124-41.
Works Cited

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