THOMAS ARNOLD: A PROVINCIAL PSYCHIATRIST IN GEORGIAN ENGLAND

by

PETER K. CARPENTER *

Thomas Arnold was one of the most prominent alienists in England at the end of the eighteenth century, but he has passed into comparative obscurity and little has been written about him.1 Recently there has been a reawakening of interest in eighteenth-century psychiatry,2 and his publications have again generated interest. However, his own life and his professional struggles also merit description, as examples of the problems of a provincial Georgian mad-doctor, and as the background to his publications.

EARLY LIFE

Thomas came from comparatively lowly stock. His grandfather was almost certainly Francis Arnold, who in 1684 became a freeman hosier of Leicester by apprenticeship.3 Francis’s sons included a butcher, a baker, a woolcomber, and a framework knitter.4 William Arnold, one of his younger sons, a freeman baker, was a preacher at the main Baptist chapel in Leicester.5 Between 1739 and 1745 he bought several buildings and parcels of agricultural land on the northern side of the town, within the Roman town walls, and in the early 1740s he set up his madhouse there.6

*Peter K. Carpenter, MB, Ch.B., B.Sc., MRCPsych, 24 Windsor Road, Bristol BS6 5BP.

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3 H. Hartopp, (editor), Register of the Freemen of Leicester 1196–1770, Leicester, Backus, 1927, p. 168. Francis was probably a Nonconformist, as there are no Anglican parish records of him in Leicester.
4 Ibid., and various wills at Leicestershire Record Office [LRO].
5 The death notice in the Leicester and Nottingham Journal [LJ], 21 July 1770, states “Was formerly preacher among the Anabaptists”. In 1719, he was one of sixteen people who leased two tenements in Leicester to be used as a Baptist Chapel and burial ground (LRO 9D62/2–3). A register of the chapel members in 1750 cites him as the Elder (Douglas Ashby, Friar Lane—the story of three hundred years, London, Carey Kingsgate, 1951).
6 In 1768 (vide infra) William advertised that he had been curing madness for “about the space of 30 years” (LJ, 20 August 1768). At this time, on 30 July 1768, he made a settlement of his land on his children. The document details more than nine dwellings he bought between 1739 and 1754. One, a converted barn
Why he did this is not known, but he may have shared the impulses that moved his fellow Baptist, Dr Joseph Mason, to open a madhouse in Bristol in 1738.7 William’s businesses made him a wealthy man, for he died in 1770 as a gentleman landowner and local notary.8 He had trained his eldest son to succeed him as a baker, but sent his second son, Thomas, to Edinburgh for a good practical training as a physician “with a particular view to succeeding me in the Practice of curing LUNATICS”.9 Prior to this, Thomas may have worked in the shop of Richard Pulteney, apothecary, botanist, and a notable local Baptist and Linnaean.10 Thomas enjoyed Edinburgh: “College Life is my Element. I think it the most agreeable Life upon Earth: & at present my only Fear is lest it should be too short. And how can it be otherwise. When one is continually meeting with something new, daily, nay hourly increasing our Stock of Ideas”.11 Among the lecturers, Thomas was most impressed by William Cullen, who appears to have heavily influenced his later work. Cullen’s other famous pupils included Alexander Crichton, William Hallaran, and Benjamin Rush.12

Thomas quickly became close friends with Timothy Bentley and Thomas Fowler, “the Companions I prize the most”13 and William Withering, with whom he spent some of the first summer vacation in Staffordshire, returning to Edinburgh via York to meet with Thomas Fowler.14 His friendship with Bentley appears to have soured after Thomas attended a meeting of students called to oppose Bentley receiving his degree (presumably because of his Nonconformity) in 1764.15 Thomas joined the Edinburgh Medical Society,16 and became a friend of James Graham, later a famous quack doctor, and married James’s sister Elizabeth Graham.17

purchased in 1745, had recently had a bathhouse built on to it, suggesting it was either the site of his madhouse or used by the nearby new madhouse (LRO 9D43/1/10). If this was the site of his first madhouse, then it cannot date from before 1745.


9 Death notice (LJ, 21 July 1770): “Dead. At Fleckney in this County, greatly advanced in years, Mr Arnold . . . “. His administrations state his occupation as “Gentleman” (LRO PR/T/1771/8 Adm. and PR/T/1816/11/1–2 Adm.).

10 See the DNB entry for Pulteney. Thomas Arnold signed his earliest letter to him from Edinburgh “your friend and pupil” (26 Dec. 1762; among the Pulteney Manuscripts at The Linnean Society of London [Pulteney MSS]).

11 Letter dated 26 Dec. 1762, Pulteney MSS.

12 See the discussion in Hunter and MacAlpine, op. cit., note 1 above, pp. 473–5.


15 Letter from Timothy Bentley, dated 12 May 1764, Pulteney MSS.

16 He signed William Withering’s Medical Society certificate (among the Withering MSS at The Royal Society of Medicine [Withering MSS]).

17 DNB entry for James Graham.
THE FIRST YEARS OF PRACTICE

Thomas returned to Leicester with his MD about 1767,18 and took over his father’s madhouse business. He either took over, or commissioned, a purpose-built madhouse,19 and in this way entered a business that could be, and almost certainly already was, highly lucrative at a time when there was no control over the lunacy trade. The Regulation of Madhouses Act was not passed until 1774, and even then had little impact in the provinces. As a doctor, Thomas had no primacy over the quacks and other non-medical people who made a trade from lunacy.20 His business success would rely on his personal reputation.

Thomas’s time in Leicester started badly. When he arrived there was no madhouse in Leicestershire to rival his father William’s.21 However, his cousin Robert Allen Arnold, who had been working with William, left and set up a rival madhouse in the adjacent street.22 Robert may have had an argument with Thomas; but, more probably, he decided to take advantage of his uncle’s, the experienced proprietor’s, departure, and of a recent inheritance, to set himself up as a rival to the young and inexperienced upstart from Edinburgh. The result was a battle of advertisements: the following, signed by William Arnold, appeared repeatedly for four months:

Whereas my nephew and late servant ROBERT ARNOLD hath presumed to take upon himself the weighty and important Charge of restoring to Health... MADPEOPLE; and endeavours to avail himself of my Name and of his Relationship to me, in order to deceive the Public:—I think it is a duty which I owe to my son Dr. Thomas Arnold... to whom I have communicated all I know, relative to that deplorable Disorder and my Method of Curing it... To inform the Public, That the abovementioned Robert Arnold, was no more than my Servant; and that after I declin’d Practice, he continued in that character under my Son... [that] his only Business was to take such Care of our Patients, as should prevent them from doing any Injury either to themselves or others; and to administer such Medicines as were prepared for them.

That I never did, nor ever intended to make him acquainted with any one of the Medicines which I made use of; nor in any respect did I ever give him the least insight into any single Branch of my Method of Practice.23

Robert’s reply was impassioned:

... Amidst so much shameless Invective and Falsity a modest Spice of Veracity... could be no Disservice to the character of my Cousin, who held the Pen of my Uncle... I do hereby honestly affirm, that all the Ingredients and Proportions of the usual Medicines, besides additional Instructions from the most eminent of the Faculty, are in my possession. When I was in Concert with the Doctor, we had but

18 His MD dissertation was the Dissertatio medica inauguralis de pleuritide, Edinburgh, Auld & Smellie, 1766, dedicated to Richard Pulteney MD. He was examined on it 29 November 1766.
19 LRO 9D43/1/10: ‘... together with the ground wherein a certain other new erected... tenement stands called the Madhouse and another Barn on the East side of the Said Madhouse lately conveyed by Wm Arnold to his son Thomas Arnold, subject to an annuity of £11...’.
21 Carpenter, op. cit., note 1 above.
22 LRO PR/T/1765/6.
23 LJ, every week between 6 August and 26 November 1768.
five Patients; I have now no less than 14; and hope my Success since left to myself, is a sufficient proof, how far I am qualified for the Doctor's as well as the Keeper's department...  

Thomas Arnold then added a lengthy advertisement, which appeared alongside his father's, accusing Robert of lying, and repeating that he was no more than a servant who had run off with a small supply of Thomas's and William's nostrums. Robert's first reply to this said that his cousin's advertisement had obliged him "to give up my kind Intentions of receiving him into Partnership". His next advertisement, printed twice, again decried Thomas's libel and stated that he had worked with the medicines for twenty years, so it was lunacy to suggest that he was not familiar with them. To its third appearance he added a postscript: "Finding my Cousin Dead to all Sense of feeling, I hope the Public will excuse my Advertising any more." But he did:

... having seen the Advertisement (pretended to be written by my Uncle) in Lloyd and the St. James's Evening, and been informed that it is in several Country-Papers, I just give this consolatory Hint to the Gentlemen of the Faculty in general, That I will not follow [Thomas]: Persons so well known to the World as either of Us, must give a general alarm, and the Professors of Bethlem and St Lukes must be uneasy in the Seats,—I Promise not to molest them—and I hope my Cousin (tho' he should have nothing to do at home) will not barbarously monopolize the Trade of the Metropolis and of the whole Kingdom, even tho' he should have already grasp'd it in Idea.

Three years later, Robert died in the debtor's gaol in Leicester, leaving Thomas Arnold with a monopoly of the town's lunacy trade, as the only owner of a madhouse there.

JAMES VAUGHAN

Thomas Arnold's reputation did not just depend on his lunacy practice, but also on his work as a general physician. His main medical rival in Leicester was James Vaughan. Vaughan came from a line of doctors, being the great-grandson of a Royal Physician. Born in Leominster, he trained in Edinburgh several years before Thomas, and was well established in Leicester by the time Thomas returned. Vaughan married a wealthy local heiress, Hester Smalley, through whom his second son, Henry, inherited the Halford baronetcy. Five of Vaughan's sons became highly respected and successful men. Sir Henry Halford, for example, became President of the Royal College of Physicians and Royal Physician to four English monarchs, including George III. Vaughan was very different from Thomas: "Dr Vaughan was a man of genius and quick perception; his practice bold and decisive. Dr Arnold was the

24 LJ, 13 and 20 August 1768.
25 LJ, every week between 20 August and 29 October 1768.
26 LJ, 27 August and 3 September 1768.
27 LJ, 10 to 24 September 1768.
28 LJ, 1 October 1768.
29 LJ, 8 October 1768.
opposite; cautious, deliberate and sure.”33 Vaughan was a High-Church Tory, as were his sons, while Arnold, reflecting his father’s convictions, was a more liberal churchman who sympathized strongly with the grievances of the Dissenters. Vaughan’s temper was shorter than Arnold’s: he was twice in court for assault.34 But for all their rivalry, they socialized with each other when Thomas returned from Edinburgh:

Dr Vaughan’s Family drinks Tea with us, and after Tea we go to the Play.—I suppose Dr Sutton has told you on what seeming Terms we all are at present. I say seeming;—not because I have yet seen any particular Reason to doubt whether we are all sincere; but a Thing of this Kind you know is so uncommon among ye Faculty in the Country, that one is apt to fear it may last no longer than Views of Interest make it necessary to continue it.35

THE LEICESTER INFIRMARY

In many ways, the business that both made and broke Thomas Arnold was his connection with the Leicester Infirmary and its Asylum.36 Though the Infirmary was proposed prior to his return to Leicester, in 1766, he was still the first doctor to subscribe to its foundation. However, on his return to Leicester, he was probably too involved in setting up his madhouse business and private practice to help with the Infirmary’s planning, and the more established James Vaughan became the physician involved. When the Infirmary opened, Arnold and Vaughan were appointed its joint physicians. Arnold must already have had some local standing to obtain the appointment, but it may well have been secured through the political battle then raging between the city’s liberal, Nonconformist merchants, and the conservative City Council and shire dynasties.37 With his Dissenter background, Arnold would have been considered a highly eligible candidate by the former group, whereas Vaughan would have appealed more to the latter. However the appointment came about, its local prestige must have boosted both Arnold’s standing and his private practice.

In 1776, evidence of financial extravagance was discovered by a special committee set up to examine the hospital’s accounts. The matron, and several nurses, resigned publicly, whilst Arnold resigned quietly. His resignation, in fact, is not formally recorded. There is no clear reason for it: he may have been extravagant in spending money;38 a victim of boardroom politics; or indeed protesting at the nurses’ dismissals.

33 William Gardiner, Music and friends, Leicester, Crossley & Clarke, 1853, p. 409.
34 Chinery, op. cit., note 30 above, pp. 152, 165. He assaulted Richard Beale, Gent., and Septimus Sutton, apothecary. The reasons are unknown, but Sutton may have been a friend of Thomas Arnold (who wrote about a “Dr Sutton”: Pulteney MSS).
35 Letter written by Thomas to Pulteney, dated 3 April 1767; Pulteney MSS.
36 See Frizelle and Martin, op. cit., note 1 above, for further details of Thomas Arnold’s involvement with the Leicester Infirmary.
37 R. A. McKinley, A history of the County of Leicester, vol. 4: The City of Leicester, Oxford University Press, 1958 (part of The Victoria history of the counties of England); see also, A. Temple Patterson, Radical Leicester, Leicester University College, 1954.
38 Thomas Arnold’s later publication, A case of hydrophobia, shows that he was prepared to use lengthy courses of expensive medicines (in this case musk) on a patient. But then Munk, op. cit., note 32 above, recounted that James Vaughan had a reputation for liberality with medicine. Arnold’s later lack of supervision of his treasurer may indicate the inadequacy of his earlier supervision of the matron, but this would have been a joint responsibility with James Vaughan.
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He appears to have been less well connected to the committee of enquiry than Vaughan and was therefore the more likely scapegoat for maladministration. The discreetness of his resignation kept his loss of prestige to a minimum, but left James Vaughan with the honour of being the sole physician to the Infirmary. Thomas Arnold withdrew totally from formal contact with the Infirmary, and concentrated on his madhouse and private practice.

THE BOND STREET ASYLUM

Relatively little is known about Thomas Arnold’s private madhouses. The first was either built for him, or for his father shortly before Thomas took it over. It was in Bond Street (now St Peter’s Lane), where pleasure grounds were later laid out on an adjacent site. In 1804 these were described as a

Bowling Green and Teagarden with many small structures erected for the general purposes of amusement, it is known by the name of New Vauxhall. Among this various assemblages of edifices, stands one, which from its size will attract the attention of visitors—it is a spacious House for the Reception of Lunatics, under the direction of Dr Arnold.39

This house was said to have had “an underground passage across the narrow street, by which the patients could reach the walled garden opposite, within which they took their exercise”.40

It was while based there that Thomas published his great work: Observations on the nature, kinds, causes and prevention of insanity, published in two volumes in 1782 and 1786.41 This book, the longest English work on insanity at that time, has been analysed elsewhere.42 Suffice to say here that it was written “at intervals in the midst of many interruptions from professional and other necessary engagements” and that, as Arnold claimed, “There are very few definitions in the whole book, which were not drawn up from examples of actual cases of Insanity, which had fallen under my own inspection.”43 It was widely read and quickly established an international reputation for Arnold,44 and probably enlarged the size of his private practice. He appears to have set a fashion for private madhouse keepers to publish works on lunacy.45

THE LEICESTER INFIRMARY ASYLUM

In 1781, the only lunatic asylum in Leicester was that of Thomas Arnold: the Leicester Infirmary, according to the rules drawn up by James Vaughan, excluded

39 Susannah Watts, A walk through Leicester, Leicester, Combe, 1804, pp. 24–5. Watts was a member of the Leicester Literary Society, of which Thomas Arnold was the President.
43 Prefaces to the two volumes of Observations.
44 The work was also published in German (copy in The Hunter Collection at Cambridge University Library).
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people disordered in their senses.46 That year, at an Annual General Meeting attended by Vaughan, the Infirmary’s Governors resolved to build a lunatic asylum as the best way to make the “present establishment more extensively useful”.47 Vaughan was closely involved with the creation of this charity asylum, and his participation, to the exclusion of Thomas Arnold, makes one suspect that he intended the asylum either as a rival to Thomas’s lucrative business (through the proposed Asylum would have received mainly charity cases), or as a springboard for the creation of a rival madhouse of his own. Thus, Vaughan may well have proposed the original motion; he certainly helped to choose the building’s design, and drew up the rules for the Asylum’s operation, based on those of York and Manchester.

Thomas Arnold attended no meeting of the Infirmary Governors, or the Asylum planning committee, until 1784. When he did attend, he had the prestige of his Observations to increase the weight of his opinions. The first meeting he attended was intended to determine some final details, prior to the Asylum’s opening. This meeting unexpectedly resolved, however, that the Asylum could not open, due to lack of funds.48 James Vaughan resigned as the Infirmary Physician, although he became a subscriber to, and thus a Governor of, the Infirmary. Thomas Arnold was reappointed a joint Physician, alongside his friend and supporter Robert Bree. After the meeting Bree advertised his thanks for his appointment, stating “I rejoice in the connection [with Dr Arnold], and reflect upon the secession of your last able Physician with less regret.”49 Meanwhile, the two Infirmary surgeons, Mr Maule and Mr William Ingle, who had been appointed whilst the Asylum was being planned, also resigned.

The rivalry between Arnold and Vaughan became more public in the next year, when Vaughan, Maule, and Ingle started to visit the Infirmary wards and, as Governors, to attend the weekly Board Meetings. These weekly meetings, and then a quarterly Board Meeting, re-emphasized that only appointed medical staff could visit the wards.50 On the same day as that quarterly Board Meeting, William Ingle “at [St Martin’s] parish with a whip he had in his right hand . . . did make an assault on [Robert Bree] and then and there did beat, wound and illtreat him . . . and further that on the same day in the same parish did [again] assault Robert Bree.”51 The next weekly meeting was better attended by the Governors than many annual meetings!52 A month later, after Maule again visited the wards, the weekly Board Meeting “directed the servants of the house not to permit any medical person for the future to

46 See the rules quoted in the Annual Reports, LRO 13D54/7. This part of the rules appears to have been derived from those of Manchester Infirmary.
47 Minutes of the Leicester Infirmary: LRO 13D54/1, dated 21 June 1781.
48 Minutes LRO 13D54/1, dated 17 June 1784.
49 LJR, 19 June 1784. Robert Bree came from the Northampton General Infirmary, and moved on first to the Birmingham General Hospital, then to London. He described emotional precipitants of migraine and asthma (see Hunter and MacAlpine, op. cit., note 1 above).
50 Minutes LRO 13D54/1, dated 23 September 1785.
51 Indictment, LRO BRIV/1/163–29.
52 Weekly Board Meeting, 27 September 1785: eighteen people attended, compared to the usual five or eight.
enter the said wards, but such as the Governors shall appoint".\textsuperscript{53} The minutes of the next weekly meeting, chaired by Dr Bree, are now barely legible. They note that

Mr Maule has persisted in visiting the several Wards of the Infirmary . . . such conduct is grossly unbecoming & shews an intention to disturb the tranquility of the [ ] . Dr James Vaughan Esq. in company with Mr Maule and Mr Ingle [ ] grossly insulted Dr Arnold . . . Every one of the three persons have acted in an improper manner to the [ ] of this hospital and endeavoured to render the execution of their duty to the Infirmary disagreeable . . . It is remarked that before the three persons became governors, the most perfect harmony subsisted at every board that met to transact business, that in their attendance there is every appearance of design to disturb business and create dissention . . . For these reasons, & many more [a special meeting of the governors should be asked to remove the three from the list of governors].\textsuperscript{54}

The resultant special meeting was one of the best attended meetings in the Infirmary’s early history. The chairman, the Earl of Denbigh “[preserved] that decorum which the occasion required and [suffered] no personalities or ungentlemanlike language to be used.”\textsuperscript{55} The intruding doctors were banned from the hospital but the minute demanding their removal as Governors was expunged from the minute book.\textsuperscript{56} Propriety was restored within the grounds of the hospital, but the day after the meeting, Ingle was bound over for assaulting Thomas Arnold.\textsuperscript{57}

Shortly after this Ingle set up a rival madhouse, close to Arnold’s, but this was short-lived and he returned to Ashby-de-la-Zouch.\textsuperscript{58} Thomas continued to run the only madhouse in Leicester, and the Asylum stood unused, “a useless and disgraceful pile”.\textsuperscript{59}

During this dispute, Thomas appears to have solicited the support of the other Governors with a series of advertisements, for which he was thanked by a meeting.\textsuperscript{60} He undertook to admit ten patients not in receipt of parish aid, “on the reduced terms, of eight shillings per week; being the sum, or nearly, which is usually required in the general Lunatic Asylums already established at York and Manchester” with preference given to those recommended by the Infirmary’s subscribers. As a postscript, he advertised that he would also admit two patients free of all charges.\textsuperscript{61} He later extended this charity.\textsuperscript{62}

Arnold’s prestige was augmented by the publication of the second volume of his \textit{Observations}, of a letter (together with one from William Withering) on the effects of
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arsenic, and of an account of a case of hydrophobia he had successfully treated. This followed James Vaughan’s publication of his three unsuccessful treatments of hydrophobia. Arnold, much less incisive than Vaughan, took almost 300 pages to detail one hundred days of treatment, for a case that was more probably tetanus than rabies.

The Leicester Lunatic Asylum was partially opened in 1794, after standing empty for ten years. Before then, the fabric was altered to Arnold’s specifications, and its rules were amended by him to give the physician-in-charge more control of the asylum’s operation, and to increase its privacy. At first only ten patients were admitted, fewer than the charity cases then admitted to Arnold’s madhouse. This was increased to twelve in 1795, and fourteen in 1799.

THOMAS ARNOLD AND HIS FAMILY

Arnold was then at the height of his power. He held a monopoly on the lunacy trade in Leicestershire, and, with his sons, another on the post of Physician to the Infirmary. Indeed, he and his son William Withering Arnold were the longest serving doctors in its history. Though his children were baptized Anglicans, and he once voted for the conservative City Council’s parliamentary nominee, he appears to have become more publicly radical once his reputation was established. He became the first President of the Leicester Literacy Society, set up by the highly radical local newspaper editor Richard Phillips (who in 1793 was imprisoned for selling seditious publications), and chaired a public meeting of Dissenters which resolved to campaign for the repeal of the Test Acts. Arnold also gained respect as one of the few local patrons of the arts, as a book collector, and as the host of enjoyable musical evenings. Through his wife Elizabeth, he was associated not only with James Graham, but also with Catherine Macaulay, the “historian and controversialist” who had married Elizabeth’s brother, William Graham, a rector in Leicestershire, and stayed with them frequently. Arnold also helped to found the Leicester Medical

63 Published by Arnold’s friend Thomas Fowler: Medical reports of the effects of arsenic in the cure of agues etc., London, Johnson, 1786.
64 Thomas Arnold, A case of hydrophobia commonly called canine madness from the bite of a mad dog—successfully treated, London, Dilley, 1793. This book was not well received: Maxwell Garthshore wrote to Pulteney “it is such a long and tedious case that I have some difficulty in getting through it besides it appears to me as I know it has to others, that it being a real hydrophobia is not ascertained.” (Letter dated 7 November 1793; Pulteney MSS).
65 James Vaughan, Two cases of hydrophobia with observations on that disease, annexed with an account of the Caesarian section, London, 1778.
66 See Frizelle and Martin, op. cit., note 1 above.
67 For example LRO, Baptism register for St Martin’s Leicester: 5 November 1767, 1 January 1769, 17 December 1769.
68 A copy of the poll for Members to represent the Borough of Leicester in Parliament, Leicester, J. Gregory, 1768.
69 Patterson, op. cit., note 37 above.
70 Advertisement, LJ 15 January 1790.
71 Gardiner, op. cit., note 33 above.
72 See her entry in the DNB.
73 William was an executor of Thomas Arnold’s will.

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Society (primarily a medical library) in 1800, and was a notable local botanist, helping his friend William Withering with his botanical classifications.

His eldest son, Thomas Graham Arnold, named after the Grahams, trained at Edinburgh and in 1793 was president of the Royal Medical Society there. At Edinburgh, he met the sons of his father’s student friends: he shared a house with William Withering’s son, and met those of John Bostock and Andrew Duncan: “…our men will find a mutual tie in the intimacy which substituted among their Fathers.” Thomas Graham Arnold was appointed to the Leicester Infirmary for a time. He lived in a house purchased for him by his father and helped him in his private practice, and at the Infirmary and Asylum, but then he moved to Stamford. His son, Thomas Kerchever Arnold, was a famous theologian and writer of education works on grammar and Latin.

Thomas Arnold named his second son William Withering Arnold, after his old friend. William studied medicine at Cambridge and Edinburgh, before returning to Leicester and assuming his brother’s responsibilities with their father’s practice. The third son, Henry Hamilton Arnold, became a theologian, and also wrote books on Latin and Italian grammar. The inspiration for Henry’s name, and for that of the eldest daughter, Elizabeth Henshaw Arnold, is uncertain. In 1802 Thomas’s wife died. The following year he married Mary Davison at Nottingham, at the age of sixty-one.

From childhood, Thomas Arnold had known John Aikin, the Nonconformist theologian, and later his son John, the physician. He also knew the Reids and their son John Reid, who also wrote on insanity. Though friendly with William Withering, Arnold does not seem to have become involved with the Lunar Society. His friend Thomas Fowler was the physician attending the Retreat at York. He continued to correspond with Richard Pulteney.

77 Letter from Duncan to Withering, dated 30 October 1796 (Withering MSS). For summaries of the careers of Bostock and Duncan see DNB: John Bostock practised in Liverpool; Andrew Duncan became a professor at Edinburgh University.
78 Letter from Thomas Arnold to Pulteney, dated 6 May 1798; Pulteney MSS. DNB.
79 Of the sons, Henry was the main beneficiary of Thomas’s and Mary’s will.
80 Burial Registers, St Margaret’s Parish, Leicester (LRO), 22 February 1802.
81 Marriage Registers, St Mary’s Parish, Nottingham. Mary died in 1843 (will Public Record Office [PRO] Prob 11/1980.379). Her nephew, Robert Davison, was a surgeon in Nottingham. Her brother-in-law was Admiral Sandford Tatham.
82 Thomas referred to these people in his letters (Pulteney MSS). See DNB and Hunter and MacAlpine, op. cit., note 1 above, for further details of them.
84 Gardiner, op. cit., note 33 above, p. 410.
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The selection of his near neighbour, Francis Willis, as the mad-doctor invited to attend George III during his insanity, must have been a professional disappointment for Arnold.86

BELLE GROVE

After moving house several times in Leicester, in 1791, at the age of forty-nine, Arnold moved into Belle Grove, on the north-east outskirts of the town. He later closed the Bond Street madhouse87 and transferred the lunatics to Belle Grove, possibly because of a contraction of trade resulting from the competition from a rival asylum, transferred in 1809 from Warwick to Wigston Magna, four miles from Leicester.88 His will implies that only part of the "dwelling house" at Belle Grove was occupied by his family; he most probably shared the house with his more wealthy patients. His will required that Belle Grove "with all pleasure grounds, gardens, yards, coachhouses, stables, and other outhouses... and also that newly erected building near to... used by me for the reception of Insane Patients"89 be sold. The madhouse was taken over by his friend Dr John Hill, who probably bought the business from Arnold’s family. Hill was a surgeon, who purchased an MD from Aberdeen University under the sponsorship of Thomas Arnold,90 prior to entering the lunacy trade.91

LATER YEARS AT THE LEICESTER INFIRMARY

A key figure in Thomas Arnold’s later dealings with the Infirmary was James Vaughan’s son, the Rev. Edward T. Vaughan, the leading conservative Anglican cleric in Leicester. Edward became a subscribing Governor to the Infirmary in 1802, shortly before a special committee was set up to look again at its finances. He sat on this committee alongside Arnold, who was then sixty. The committee found no evidence of extravagance, but the Rev. Vaughan, unusually, became a regular attender at the weekly Board Meetings. Thomas Arnold’s secretive methods of management were dealt a body-blow in 1809, when the Asylum Treasurer disappeared, and was found to have misappropriated five hundred pounds of the Asylum funds without Arnold’s knowledge. The republication of his Observations in 1806, and Arnold’s 1809 publication describing his humane methods of management,92 can be seen both as a means of boosting business at Belle Grove, and a defence against criticism of his management of the Leicester Asylum.

86 Ida MacAlpine and Richard Hunter, George III and the mad business, London, Allen Lane, 1969. It was remarkable that George III was treated by a provincial psychiatrist at all. He himself spoke of Thomas Arnold, and knew of his work. George III’s physician at this time was James Vaughan’s son, who may well have influenced the choice of mad-doctor.
87 The Bond Street asylum closed between 1804, when it was described by S. Watts, and 1813, when a surviving rate book declares it unoccupied.
88 See Carpenter, op. cit., note 1 above. Wigston House also had Nonconformist connections, and in 1851 was managed by Charles Smith Bompas after the decline of his Fishponds Asylum (1851 Census).
89 Will, Thomas Arnold MD, proved 17 April 1817 at Doctors Commons (copy at LRO). PRO Prob 11/1591.
91 See Carpenter, op. cit., note 1 above, for details of Belle Grove’s later history.
92 Thomas Arnold, Observations on the management of the insane, and particularly on the agency and importance of humane and kind treatment in effecting their cure, London, Phillips, 1809.
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In 1811, when Arnold was sixty-nine, Edward Vaughan tried to break the Arnold family's monopoly of the Infirmary by changing the rules to admit a third physician, in addition to Thomas and his son William Withering Arnold. This attempt failed. In 1814, at a Board meeting not attended by Thomas, Vaughan requested a copy of the Asylum rules and established that the Board ultimately had as much power over the Asylum as it had over the Infirmary, although the Governors had not visited the Asylum since its opening. He arranged for deputations of the Governors to visit the Asylum. At first Thomas Arnold accompanied them, but at later meetings Vaughan requested visits only when Arnold was not at the meeting, so the delegations went unaccompanied. After a few cautious reports of satisfaction, a delegation reported that the building needed repair.

The 1815 General Meeting that received this report was held at a time of great public interest in the maltreatment of lunatics in madhouses. The well-attended meeting resolved to set up a special committee to review not only the Asylum’s rules, but its management and the number of patients that it held. The same meeting then accepted Thomas Arnold’s letter of resignation and the chairman was instructed to write and thank Arnold for his services—although the wording he was told to use was reserved, and the meeting declined to appoint Arnold’s nominee, John Hill MD, as Asylum Physician. The dilapidated state of the asylum, even behind its high wall, must have been obvious to all.

The special committee included Edward Vaughan, and it immediately co-opted two of his brothers, Sir Henry Halford and Sergeant Vaughan, to bring its number to ten. The committee also took the advice of Sir Henry Halford’s father-in-law, who had been involved with the Bedford Asylum. There is no record of any formal meeting with Thomas Arnold, or discussion of his management with him. The committee’s report was restrained, and refrained from commenting on Arnold’s style of managing patients. It detailed the chronic under-use of the Asylum and its dilapidated fabric: the courtyard and privy used for keeping rabbits; the disuse of the bath-house erected at Arnold’s request. The state of the building, which fortunately “was more favourable than [the committee] had expected”, suggests that Arnold spent little time at the Asylum, at least during the final years of his appointment, and that it was being run, unsupervised, by the attendants. At the committee’s recommendation, the Asylum rules were changed to bring it firmly under the governance of the weekly Board Meetings of the Infirmary, because “no officer should be involved with an unascertained and uncontrolled power”. However, the meeting which approved the committee’s report also appointed Arnold “Physician Extraordinary” to the Asylum. The responsibilities of this post were not defined, and Arnold does not appear to have visited either the Asylum or the Infirmary after his resignation.

93 Minutes LRO 13D54/2/2, dated 20 September 1811.
94 Minutes LRO 13D54/2/2, dated 25 January 1814 and 1 February 1814.
96 Minutes LRO 13D54/2/3, dated 22 September 1815.
97 Recorded in minute book, LRO 13D54/3, dated 17 November 1815.

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Thomas Arnold: a provincial psychiatrist

Arnold, then seventy-three, appears to have totally retired from public life until his death on 2 September 1816. He was buried at his local parish church. His lengthy will directed that his funeral “be conducted with as little parade and expense [as is]... consistent with propriety as I would not have that which could serve the living be wasted on the dead”. For similar reasons he directed a simple memorial: “If my works are of value they will be my best memorial, if not let my name sink into its merited oblivion”.98

His obituary was enthusiastic:

In his neighbourhood, and among an extensive circle of private friends, no man could be more sincerely or more deservedly beloved; while in his public character, he always proved himself an unshaken friend of civil and religious liberty, and the anxious promoter of every design which tended to ameliorate distress. In a word he was an enlightened ornament of his native town, and his station in society will not easily be filled again by a similar union of estimable qualities.99

ARNOLD’S PRACTICE

Unfortunately there is a dearth of records concerning Arnold’s patients. It would have been usual for a provincial house like his to admit pauper patients, paid for by their parishes. Some madhouses relied on this component of their trade for the mainstay of their income.100 Certainly Belle Grove was licensed in 1837 to receive thirty pauper patients,101 and this licence was probably the same in Arnold’s time. It is known that his Bond Street house took paupers, for his 1785 advertisement refers to “the low terms on which [Arnold] usually receives parish paupers”,102 and the Rev. Robert Hall, who was a patient in 1804, talked of overlooking “the ward in which were a number of pauper lunatics, practicing all manner of ludicrous anticks”.103

For a time Arnold also admitted charity cases: from 1785, two were admitted free of charge and ten admitted at eight shillings a week (the same as at the Manchester and York Asylums);104 from 1790, four were admitted free, and fourteen at eight shillings a week.105 Though there is no record of when the admission of such charity cases was stopped, it was probably soon after the opening of the Leicester Asylum in 1794.

Arnold admitted a larger number of comparatively wealthy private patients. The County Register106 records the names of those admitted between 1801 and 1812 and shows that he admitted at least 142 such cases over almost 11 years, giving him one of

98 Will, op. cit., note 89 above. The death duty valued his estate at under £3000 (PRO, IR 26/697. f101–104).
100 See Parry-Jones, op. cit., note 20 above.
101 ... Houses licenced for the last five years ... British Parliamentary Papers, House of Commons Session 1842 (2) xxxiv 3.
102 LJ, 4 May 1785.
104 LJ, 4 May 1785.
105 LJ, 8 June 1790.
106 PRO MH51/735: The County Register of the Royal College of Physicians. The list of patients is probably incomplete, for see comments in: Third Report from Select Committee ... Regulation of Madhouses, British Parliamentary Papers, House of Commons Session 1814–15 (296) iv 959 p. 166; and also papers for 1825 (501) xxi 65. The earlier volume of this register is now missing.
TABLE: ANNUAL ADMISSIONS TO THE LEICESTER ASYLUM AND TO THOMAS ARNOLD'S PRIVATE ASYLUM

<table>
<thead>
<tr>
<th>Year</th>
<th>Leicester Asylum*</th>
<th>Private Asylum**</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Admitted</td>
<td>Discharged</td>
</tr>
<tr>
<td></td>
<td></td>
<td>cured</td>
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<tr>
<td>1795</td>
<td>7</td>
<td>3</td>
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<td>1796</td>
<td>14</td>
<td>7</td>
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<td>1797</td>
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<td>14</td>
<td>14</td>
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<td>1802</td>
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<td>1803</td>
<td>14</td>
<td>6</td>
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<tr>
<td>1804</td>
<td>7</td>
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<td>19</td>
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<tr>
<td>1815</td>
<td>29</td>
<td>15</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>330</td>
<td>209</td>
</tr>
</tbody>
</table>

Percentage of discharged: 65% 27% 8%

* source: Annual Reports LRO 13D54/7 (the data refer to admissions and discharges between July of previous year, to June of stated year).

** source: County Register

the busiest provincial asylums recorded in the County Register (see table). In 1837, Belle Grove was still licensed for twenty private patients. The patients themselves were certified by doctors from Leicester (46), the rest of Leicestershire (26), Nottinghamshire (31), Northamptonsire (9) and Derbyshire (6). Thirty-five were certified by Mr Paget, a Nonconformist who worked alongside Thomas Arnold at the Infirmary.

The catchment area for private patients seems to have been determined by the location of other private madhouses. Very few patients were referred by doctors from

107 See note 101, above.
108 See note 106, above.
counties where the County Register records private madhouses (apart from Leicestershire). None were referred from Staffordshire, only three from Warwickshire, and the only patients from Lincolnshire were referred by his son at Stamford. Similarly, Thomas obtained very few patients from long distances, despite any reputation he had acquired through his publications: only eight were sent by doctors living more than fifty miles away.

The charges for private patients at Arnold’s asylum, like others, varied. One letter of referral quotes a charge of two guineas per week.\textsuperscript{109} The charge for John Howard’s son was £606, for about 118 weeks of care.\textsuperscript{110} These fees were fairly average for the contemporary lunacy trade. Patients were probably charged by the quarter: this was the general method,\textsuperscript{111} and some evidence for Arnold charging in this manner is the advertisement put out by his close neighbour and rival, William Ingle, that “instead of taking patients by the quarter (as is the custom of other Houses) I propose lessening the expence, by admitting recent cases by the week”.\textsuperscript{112}

Like several other madhouse proprietors, Thomas Arnold published a description of how the insane should be treated.\textsuperscript{113} In his rarely-quoted book, Observations on the management of the insane, he expounded the following key principles of care:

\begin{quote}
From long experience I can assert, without hesitation, that if the following rules be carefully observed by such persons as under-take the cure of the insane, they will tend greatly to advance their success.

1. Very particular care should be taken that they neither injure themselves nor others; nor be subjected to any probable means of injury.
2. Such controul should be made use of as may tend to correct, and will at least prevent, many improprieties... which might arise from the want of it; but no severe coercion, or painful chastisement should, on any occasion, or under any pretence whatever, be used or inflicted.
3. No pains should be spared to produce their ready and quiet... submission to all due controul. Authority over them is absolutely necessary... On the other hand,
4. Their minds... should be soothed and comforted... by kind and gentle treatment...
5. Great pains should be taken to gain their esteem and confidence, and to convince them that all that is done, is with a view to their welfare, and proceeds from real regard and good will.
6. Having obtained their esteem and confidence, it will be proper to secure... their obedience to orders...
7. Their use of proper exercise must be diligently regulated and exacted...
8. They should be allowed, under certain circumstances... various amusements and recreations of mind and body.
9. [They Should, in general, be separated from their friends and servants and never be visited by strangers or for idle curiosity.]
10. Patients of different sexes should have no communication whatever; and patients of the same sex should be classed and associated, so far as association is necessary and proper, according to the nature of their several cases.
\end{quote}

\textsuperscript{109} LRO Misc. 374.
\textsuperscript{110} Parry-Jones, op. cit., note 20 above, p. 125.
\textsuperscript{111} Ibid.
\textsuperscript{112} \textit{L.J.}, 23 December 1786. See Carpenter, op. cit., note 1 above, for a full transcription of the advertisement.
\textsuperscript{113} See Parry-Jones, op. cit., note 20 above, pp. 90–3.
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11. [They] should in general be plentifully supplied with simple, mild and nourishing food...

... ...

Of the advantages of this mode of kind and indulgent treatment of the insane, united with... firmness... I have had the experience in my own house... of two and forty years: and to this management, together with the administration of such medicines as long use has proved to be efficacious, may I think, fairly be attributed a very successful practice, in which two-thirds [of the patients were cured].

This statement of management principles can be dismissed as a proprietor's misleading advertisement, attracting business by showing that the insane would be treated kindly. It could also be claimed that the principles were guided by the popularity of The Retreat. However, there is evidence that Thomas practised what he preached, even aside from the discharge statistics of the Leicester Asylum (see table).

Many of Thomas's principles reflect those promulgated by other contemporary writers. In his book he stated that only the violent patient should be restrained, and that this restraint should be by means of the strait waistcoat, augmented where necessary by soft, strong straps and fastenings. When stipulating the equipment needed for the new Leicester Asylum, in 1792, he listed strait waistcoats, and some straps and fastenings. This idea of restraint followed that of his mentor Cullen, who taught that in the face of violence and anger restraint was therapeutic, and that it should be complete, using the strait waistcoat.

Similarly, Arnold echoed Battie in advocating the total separation of the madman from his friends, servants, and the outside world, and in recommending a simple diet and amusements for the insane. He insisted that a high wall be built around the Leicester Asylum to ensure this seclusion.

The ideas of mildness, humanity, and the treatment of patients as children is also in keeping with the writings of William Perfect, who preferred a strait waistcoat, isolation, good diet, and kindness to shackles and public display.

Arnold's methods also echoed those of Benjamin Faulkner, who wrote:

In my house, all unnecessary confinement is avoided. The physician, having prescribed a diet adapted to the state of the body, I endeavour to second his purposes by presenting objects of amusement, directing the attention, and humouring the imagination in those little sallies which sometimes indicate a desire for mental exertion. Exercise, when they will bear it, is given them; and every appearance of restraint avoided. Coercion is never used, but when absolutely requisite, and is abandoned as early as possible. Every indulgence, so far as is consistent with physical and medical operation, is allowed; and it will not be wondered at, thus treated as a

114 Arnold, op. cit., note 92 above, pp. 10–13, 55.
117 See Parry-Jones, op. cit., note 20 above, p. 171.
119 See note 116, above.

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rational creature, with attention and humanity, amused and managed with art, the patient should regain his rational faculties, recur to his former habits, and gradually become himself again.\(^{121}\)

They also reflected those of Joseph Mason Cox, who wrote of the physician as a guardian angel.\(^{122}\) Cox, though, was vaguer in detailing what he used for restraint:

> In a great variety of maniacs, the employment of medicine is either improper or impracticable; and here our curative attempts must be confined to what is called Management, . . . more is always to be done by firmness and tenderness than by violence and harshness . . . That there are cases perfectly unmanageable without bodily restraint, and all the different means of security, must be acknowledged.\(^{123}\)

Arnold, like Cox, used subterfuge at times:

> a patient . . . imagined he had a leg of mutton hanging from his nose, and walked nearly double to prevent the dangling joint hitting against his knees. The cure was simple; he was taken into a dark room, where a person was stationed with the reality, and on just cutting off the tip of his nose, the mutton was let fall on the floor. On opening the window-shutters the patient was convinced he had got rid of his load, and walked in an upright posture ever afterwards.\(^{124}\)

Thomas Arnold's book was published before Samuel Tuke's book on The Retreat,\(^{125}\) which brought the latter to popular attention. Prior to this the main description of The Retreat was that of Delarive, who wrote first of Arnold's humane regime at Leicester before describing The Retreat, which applied humane methods of management to all its patients.\(^{126}\) As Arnold had explained: "Chains should never be used but in the case of poor patients, whose pecuniary circumstances will not admit of such attendance as is necessary to procure safety without them."\(^{127}\)

Arnold, like Tuke, explicitly stated that patients should be treated as children and not as brutes. The manner in which their practices differed was in their emphasis on how the system cured people. Arnold, like other proprietors keen to attract custom, stressed his personal importance, as the proprietor, in curing patients using the techniques he enumerated: he stated that his individually-prescribed medications and medical treatments formed an important part of treatment. Samuel Tuke, however, ran an asylum exclusive to Quakers and had no need to attract custom from the general public. He had little interest vested in presenting himself as the key element in

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123 Ibid., pp. 46–7.
124 Gardiner, op. cit., note 33 above, p. 409.
127 Arnold, op. cit., note 92 above, p. 17.
his methods of cure, and so he emphasized the importance of the design and operation of the institution as a whole in curing insanity. Tuke's writings on the management of the insane became popular because they implied that they could be extended to other asylums and other proprietorships, whereas other writers, such as Arnold, hinted at the opposite.

Thomas Arnold's methods of managing the insane, and the ethos behind them, are similar to those other contemporary writers and practitioners claimed to apply in the madhouse business. Just as he earlier catalogued the causes and nature of insanity, so he later catalogued his style of practice. This style of management, first suggested by Battie, received general acceptance from later authors, who elaborated the system: insanity could be conceptualized using Lockian ideas; the cure of insanity relied on techniques of management, with or without the judicious use of personal, or classical medications; the management was best effected by professionals, and was characterized by gaining ascendancy over the patient using restraint, firmness, benevolence and comparative seclusion together in a supportive environment. Under this management, the insane person would have the strength, and could be educated, to correct his insane thoughts and become the victor in the battle with insanity. This style of management did not receive popular recognition and approval until the publicists stopped stressing their own personal curative skills when describing the moral management of the insane.