

**MEDICINE**

# Mad King George: The Melancholy Monarch

**Chuck Lyons examines the madness of King George III and the changes in treatment his mental illness brought about**

GREAT BRITAIN'S GEORGE III (1760-1820), known to history as "Mad King George", suffered throughout the latter part of his life from spells of madness. During these attacks, he was often deranged, sometimes speaking for many hours without pause and foaming at the mouth. As the attacks became worse he was often restrained in a strait jacket or tied to a chair and sometimes gagged.

By the end of his life, his madness had become permanent.

Before his own diagnosis, however, he was, on at least three separate occasions, touched by the madness of others.

In one instance, an attempt was made to stab him, and in another, a rock was thrown at his royal carriage. Finally on 15 May 1800, in a twisted suicide plot, a man fired a pistol at the king in the Drury Theatre. The erstwhile assassin said later that he believed if he tried to kill the king he would himself be killed and that he had been commanded by God to sacrifice himself.

All three attackers were judged insane, but their madness, George's gracious forgiveness of his attackers, and the stories that circulated about the King's own madness, led to changes in the care and treatment of mentally ill persons — and to the legal definition of insanity — that we are still experiencing today.

Because of this, one British psychiatrist has called George's illness "the most famous and most momentous in (British) history."

George was born 4 June 1738,

French, Latin, history, music, geography, commerce, agriculture, and constitutional law, as well as the finer arts of dancing, fencing, and riding. He succeeded to the Crown

when his grandfather, George II, died suddenly on 25 October 1760.

George III, the third Hanoverian to rule Great Britain, was to sit on the British throne for almost 60 years, the third longest-reigning British monarch. (He was replaced as the second-longest by Elizabeth II on 12 May 2011). He was king during the Seven Years War (known as the French and Indian War in North America), the American Revolution and the Napoleonic Wars, and fathered 15 children by his wife, Queen Charlotte.

His first attack of madness occurred in 1788, when he was at the age of 50.

Queen Charlotte told a companion then that the king's eyes "looked like black currants" and that he was foaming at the mouth. He appeared to recover from his illness and in the following 12 years suffered only slight attacks.

He suffered a major reoccurrence in 1804, and then in 1810, he suffered a total relapse, from which

he was never to recover. It became apparent that George's illness was, this time, permanent, and by 1811, he had succumbed so completely, that a Regency was established with his son, who would later



King George III in a portrait by Allan Ramsay, 1762.

in London and grew to be a shy and reserved child. He was said to be able to read and write in English and German by the time he was eight and studied chemistry, physics, astronomy, mathematics,

## MEDICINE

become George IV, serving as regent. A Regency Council was also formed at that time to advise the queen on the care of her husband. The council was chaired by the Archbishop of Canterbury who received daily "bulletins" from the king's physicians.

Public bulletins were also issued but were aimed more at allaying public fears than providing information.

"The report of the physicians is worded as foolishly as ever," Lord Grenville commented on one such bulletin.

At the time, the cause of the king's malady was a mystery to his physicians. Modern scientists have suggested, however, that he was suffering from the inherited blood disease porphyria, and it has been noted that sev-

eral of George's ancestors suffered from similar attacks— notably James I, Mary Queen of Scots, and Frederick the Great of Prussia — establishing a basis for the hereditary diagnosis. This theory has been widely accepted, but other modern medical practitioners have disagreed, suggesting the king suffered from mania, bipolar disorder, or even arsenic poisoning. Ironically, arsenic is known to have been given to the king together with antimony to control his attacks.

In 1941, a German doctor blamed the king's illness on little more than overwork.

"Self-blame, indecision, and frustration destroyed the sanity of George III," Dr. Manfred Guttmacher wrote. "He took the job of kingship too seriously."

Whatever the underlying cause, George spent the remainder of his life, after 1811, confined to



Above: Painting, c.1749, showing George (right) with his brother Prince Edward, Duke of York and Albany, and their tutor, Francis Ayscough, later Dean of Bristol. Left: The Three Youngest Daughters of King George III. c.1785 Oil on canvas by John Singleton Copley.



Windsor Castle blind, deaf, beset with rheumatism, dementia. The bedeviled George III died on 29 January 1820, having suffered from his illness for the better part of 25 years.

By that time, the madness of three of his subjects had also touched him.

The first of these brushes with insanity concerned Margaret Nicholson, a 35-year-old woman who had been dismissed from her employ as a maid for having a love affair with a fellow servant and supported herself by doing needlework. On 2 August 1786, in the 17th year of George's reign, she approached the King as he alighted from a carriage at St. James's Palace. She came forward on the pretext of presenting him with a petition, which she held in one hand. In the other hand, she held an ivory-handled dessert knife with which she lunged twice at the king's chest as he reached to accept her petition, which was, in fact, a blank piece of paper.

She was quickly brought under control, and George was unhurt in the attack.

"The poor creature is mad," he is alleged to have said about

Nicholson. "Do not hurt her, she has not hurt me."

A subsequent search of Nicholson's lodgings uncovered a series of odd letters, in which she claimed to be the rightful heir to the British throne. The press at the time made much of her being abandoned by her lover and pointed to the desertion as the cause of her madness.

When she was interrogated, she claimed to be a virgin and also claimed to be the mother of Lord Mansfield, the recently-retired Lord Chief Justice, and of Lord Loughborough, the Lord Chancellor of Great Britain, both of whom were older than she was. Her landlord, a stationer called Jonathan Fiske, stated that she was industrious and sober. She denied wanting to assassinate the King, insisting that she had only meant to frighten him.

Nicholson was certified insane and committed to the Bethlem Royal Hospital, generally known as "Bedlam," for life.

Five months later, the King was attacked again.

On 21 January 1790, John Frith threw a stone at King George's coach as it traveled to the opening of Parliament. As in the earlier Nicholson case, investigators found that Frith had sent numerous petitions to Parliament. In those petitions, he said he had been illegally deprived of his livelihood as a lieutenant in the army and had been forced to retire. Evidence against him had been made up, he claimed, and "supernatural agents" sent to whisper in his ear.

When questioned, Frith, like Nicholson, denied wanting to hurt the king, and insisted he was only trying to draw attention to his cause. He also claimed, however, that people looked to him as a messiah and that when the moon was in the south, its effects were so powerful that he was unable to sleep near heavy buildings. He was also declared insane and remanded first to Newgate Prison, and then in December 1791, to

Bethlem Royal Hospital.

As in the Nicholson attack, the King, who was devoutly religious, was credited with treating Frith with forgiveness and forbearance.

On 15 May 1800, the King experienced another—and by the far the most serious—attack.



A print of George III in later life, from an engraving by C. Gurney.

George was attending a performance at the Drury Lane Theatre in London, and just as he entered the royal box, with the national anthem striking up, James Hadfield rose from the audience and fired a pistol at him. The shot missed the king by about 14 inches.

Hadfield, it turned out, had suffered severe head wounds while fighting with the 15th Light Dragoons against the French at the 1794 Battle of Tourcoing. He had later become involved in a religious sect, the Millennialist Movement, and came to believe that the Second Coming of Christ would be

advanced if he himself were killed by the British government.

"Never shall I forget His Majesty's coolness," wrote Michael Kelly, who was a singer in that night's performance of the *The Marriage of Figaro*. "The whole audience was in an uproar. The King on hearing the report of the pistol retired a pace or two, stopped, and stood firmly for an instant, then came forward to the front of the box, put his opera glass to his eye, and looked around the house without the smallest appearance of alarm or discomposure."

This attempt on his life served to again elevate George III's esteem with the public, due to the coolness he had shown, insisting the Drury Theater event continue as planned and even, some reports said, falling asleep during the performance itself.

Hadfield was tried and acquitted on grounds of insanity, but in a verdict that was to have significance in jurisprudence.

Hadfield's barrister, Thomas Erskine, the leading barrister of that era, called into question the then-current definition of legal insanity, namely that a defendant must be "lost to all sense ...incapable of forming a judgment upon the consequences of the act which he is about to do". Hatfield's

case obviously did not fit that standard; he had knowingly intended to kill the king. Erskine contended, however, that Hadfield's delusion though, unaccompanied by the legally required "frenzy or raving madness", was nonetheless evidence of insanity.

Two surgeons and a physician testified that Hadfield's delusions were the consequence of his head injuries, and the judge, Lloyd Kenyon, declared the verdict "was clearly an acquittal", but "the prisoner, for his own sake, and for the sake of society at large, must not be discharged."

In 1843, 23 years after George's

## MEDICINE

death, these legal reforms in thinking about the mentally ill were further modified in the McNaughton case.

Daniel McNaughton, a Scotsman, had come down to London, stationed himself in Downing Street, and shot at Prime Minister Robert Peel and his secretary, Edward Drummond, killing Drummond. At his trial, McNaughton was found “not guilty on grounds of insanity” and shuffled off to Bedlam. His trial, however, resulted in the formation of the McNaughton Rules, which again changed the legal definition of insanity and established the principle that a person was insane if they did not “know the nature and quality of the act he was doing, or, if he did know it, that he did not know what he was doing was wrong.”

With some modifications over the years, this standard is still in use today.

Following his trial, Hadfield was sent to Bethlem Royal Hospital, which in itself held significance, and remained there for the rest of his life.

Up to that time, defendants acquitted of crimes by reason of insanity had often been released to the safe-keeping of their families. Following the Hadfield verdict and bowing to public pressure, however, Parliament speedily passed the Criminal Lunatics Act of 1800, which provided for the indefinite detention of insane defendants. (Nicholson and Frith apparently could be committed to Bethlem because they had no family or at least no family willing to take them in).

But the changes that came about because of George’s madness and the attacks on him went beyond just the courtroom.

The most important of these long range effects was that the picture of their kind and well-liked king being restrained in a strait jacket, gagged, and tied to a chair or bed did not sit well with the English people. It called public attention to the methods of treating the insane that were then in effect and pointed out the flaws in



Johann Reil in a portrait from 1811.

that treatment. Those methods had changed little since the beginning of insanity legislation in Britain in the 14th century.

Various pieces of legislation were passed to change these methods of care and treatment beginning at the end the 18th century and continuing into the middle of the 19th century. This legislation dealt largely with the provision, control, and inspection of asylums, which previously had been privately owned and which had operated with little or no supervision. George Rose, one of George III’s close personal friends, persuaded Parliament to set up the Committee on Madhouses, which he chaired and which has been credited with launching the “asylum era” in the treatment of the insane that has persisted into our own time.

In 1838, France also enacted a law that regulated asylum admissions and asylum services across the country, and by 1840, asylums operating on therapeutic principles — as opposed to simple confinement — existed throughout Europe and the United States. By the late 1890s, and early 1900s, the number of persons confined to mental institutions had skyrocket-

eted to the hundreds of thousands. The United States alone housed 150,000 patients in mental hospitals by 1904.

In addition, medical science began to see mental illness as a separate and self-contained illness rather than as “hysterical” symptoms caused by some physical illness — very often diagnosed simply as “fever.” This realization in turn gave impetus to the development of a medical specialty concerned with mental illness.

Johann Reil, a German physician, coined the word “psychiatry” in 1816, and became one of the first university teachers of psychiatry when appointed professor in Berlin in 1810.

“The greatest overall service (George III’s) malady rendered psychiatry was that it dragged the ‘mad business’ out of obscurity and ill-repute into the limelight of respectability,” two British psychiatrists wrote in 1968.

And, underscoring the changes that had come about, another British doctor remarked in the 1880s, on the mechanical restraints the King had been subjected to, that “there was nothing in his condition which could be considered at the present time a sufficient reason for (their) application.”

That was George’s legacy.

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