

## Medical Science and the Romantic Doctor: Mary Shelley's *Frankenstein*

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### **Abstract:**

The focus of this study is to examine and establish the significant yet under-examined relation between the the birth of biological criticism and Romanticism in Mary Shelley's *Frankenstein*. This article seeks to understand how Mary Shelley's first novel draws on the contemporary medical experimentations and writings on the *vitalist* debate and the evolutionary biology. It also attempts to surmise, by drawing on contemporary the pathological experimentations of the sick/ dead body, the post-mortem process and the Foucauldian idea of the medical gaze, how the late 18<sup>th</sup> and early 19<sup>th</sup> century relation between the experimenting doctor in his clinic and the sick patient is manifested in the symbolic relation between Frankenstein and his monstrous creation. In this study, by briefly discussing the concepts of race, colonialism and slave trade, I will also attempt to analyse the significant interface between the late eighteenth century imperial-experiences and the new medical enterprises on disease, sick/ medicalised body and death by the experimenting doctors.

*Keywords:* Medical Science, Disease, Doctor, *Vitalist* debate, Foucault, Biological Criticism, Medical Gaze, Medicalised Body, Colonialism.

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### **I. The Eighteenth Century and the Birth of Biological/ Medical Criticism**

“Apparently, under the influence of Descartes, they (historians) were mechanistic to begin with, and continued to be so to the end of the seventeenth century; then the first efforts of an infant chemistry made its imprint upon them, but throughout the eighteenth century the *vitalist* themes are thought to have attained or returned to their privileged status, finally coalescing to form a unitary doctrine...”  
(Michel Foucault, *The Order of Things*, 137, emphasis mine)

The last half of the eighteenth century witnessed a ground-breaking change in the history of medical science. This study examines how Mary Shelley's *Frankenstein* draws on the eighteenth century advances in biology, medical sciences, several writings and public debate on vitality, classifications of and experimentations with diseases and the sick/ medicalised body. It also

attempts to establish how the late 18<sup>th</sup> and early 19<sup>th</sup> century relation between the experimenting doctor in his clinic and the sick patient is manifested in the symbolic relation between Frankenstein and his monstrous creation. Borrowing on Foucault's idea of the medical gaze, this study analyses how the pathological experimentations of the sick/ dead body and the post-mortem process are central metaphors in Romantic period writing and how the politics of disease and the doctor-patient relation from the viewpoint of medical gaze theory.

In *Order of Things* (1966), Foucault notes that among all divisions of knowledge in the eighteenth century most significant was 'life' itself, and the discipline of biology did not exist before the eighteenth century. Foucault observes— "historians want to write histories of biology in the eighteenth century; but they do not realize that biology did not exist then, and that the pattern of knowledge that has been familiar to us for a hundred and fifty years is not valid for a previous period" (139).<sup>1</sup> With the advent of biological criticism and advances in medical knowledge, a new knowledge system began that opened up new areas which were not predetermined. In the late eighteenth century, Foucault asserts, "a new configuration was to appear that would definitively blur the old space of natural history for modern eyes" (176). Eighteenth century also marked a remarkable shift, as demonstrated by Foucault in *Security, Territory, Population* (1978),<sup>2</sup> from the disciplinary power to the biopower; biopower works as "as a set of processes to be managed at the level and on the basis of what is natural in these processes" (Foucault 70). The eighteenth century saw a rapid experimentation of chemists and anatomists and this involves interventions into individual as well social bodies by the physicians and politicians. Hence, there was direct or indirect intervention or application of state power to the private body or biological life of the individuals. Hence, in the eighteenth century, outbreak of contagious diseases and biopower are instruments of intervention, governmentality and control.

In *Birth of the Clinic* (1963), Foucault argues that with the development of clinic or French teaching hospitals and innovative diagnostic tool of morbid anatomy, medical profession acquired a remarkable disciplinary power. Post-mortem process and interior pathological process of the body exposed to the medical gaze and Foucault draws attention to the disciplinary control, practiced by the medicine. Foucault further states that "The clinic was probably the first attempt to order a science on the exercise and decisions of the gaze" and the clinic "demands as much of the gaze as natural history" (87). In the chapter, entitled, "A Political Consciousness," Foucault informs that there was a great deal of discussion on whether the doctors of the eighteenth century could succeed in grasping the contagious character of the disease or could solve the problem regarding the agent of transmission. The medical gaze questions and challenges what it apparently sees in the corporeal space of physical signs and diseased

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<sup>1</sup>In the fifth chapter, entitled, "Classifying," Foucault categorises the divisions of knowledge and observes how the historians "include the varied forms that were taken by these new sciences of life" (137).

Foucault, Michel. "Classifying". *Order of Things*, pp 136-179. See List of Works Cited.

<sup>2</sup> *Security, Territory, Population*, published posthumously, is based partly on a lecture series given by French philosopher Michel Foucault at the Collège de France between 1977 and 1978, see list of Works Cited.

symptoms.<sup>3</sup> In 1993, noted cultural historian G. S. Rousseau laments that there is no sustained effort to link Romanticism and the development of science and he proposes to approach the late eighteenth and early nineteenth century literature from the viewpoint of science and medicine.<sup>4</sup> This study is an attempt to examine and establish the interface between Romantic imperialism and biological/ medical criticism.

The late eighteenth century and early nineteenth century doctors as well as the Romantic writers of that period were trying to confront sickness, death and disease, and the clinicians began dissecting corpses to gain positive knowledge. Before 1800, British doctors were not allowed to examine patient's body. Romantic medicine was remarkable in that it balances patient's oral narration with the evidence of the body. Victor Frankenstein is a 'Romantic doctor'<sup>5</sup> with a great interest in Romantic materialism and clinical medicine. While the doctors of the century began dissecting the corpses to find the cause of the disease, Frankenstein began experimenting with the corpses, not to find the causes of disease but to drive the disease out from the human frame. In reaction to eighteenth century rationalism and mechanism, Romantic writers turned towards to 'the vital principle of life' giving testimony to the fact that life can't be properly measured against mechanical physics. This might be seen as the starting point of the birth of biology/ bio-politics or the sciences of life in Romantic literature.

## II. Vitality Debate, Life-Organics and the Experimenting Doctor

"Modern medicine has fixed its own date of birth as being in the last years of the eighteenth century"  
(Foucault, *Birth of the Clinic*, xii).

Like other Romantic period writers like Shelley, Coleridge, Wordsworth and Keats, Mary Shelley was deeply interested in contemporary biology and medical sciences and it truly testifies Foucault's claim regarding the epistemological break in criminology and biology in eighteenth century. Mary Shelley had a great interest in contemporary science, medical books and the evolution of medicine, latest progresses regarding the classification of diseases and evolution of medicine including the works of Erasmus Darwin, John Abernethy, Humphrey Davy, and William Lawrence among many others. Marylyn Butler in "*Frankenstein and Radical Sciences*" links the novel to a "publicly-staged debate of 1814-19" between two professors— John Abernethy and William Lawrence at the London's Royal College of Surgeons regarding "the nature and origin of life" which is now known as the "vitalist debate" (Hunter 497).<sup>6</sup> Coleridge approved of

<sup>3</sup> Foucault opines that in the eighteenth century medical tradition "disease was observed in terms of symptoms and signs, establishing the truth of a corpus of knowledge and the possibility of its application." *The Birth of the Clinic*, p 90, see list of Works Cited.

<sup>4</sup> Rousseau, G. S. "On Romanticism, Science and Medicine." *History of European Ideas*, vol. 17, no. 5, 1993, pp. 659-663.

<sup>5</sup> A term used by Foucault in *Birth of the Clinic*.

<sup>6</sup> John Abernethy "sought to unite religious and secular opinion with a formula acceptable to both" and was in the view that, materialist science with its focus on the the organisation and function of living bodies could not explain life itself," for, a mysterious extra/ "superadded"... some "subtle, mobile, invisible substance" force was needed. But William Lawrence "took care to make the materialist position sound like the professional position"; he was "sceptical and discriminating over new evolutionist positions as

Abernethy's formulations and built on his argument in his essay, "The Theory of Life." In March 1816, Shelley and Mary Shelley were living in London when Lawrence lecturing on the materialist case against the spiritual vitalism; moreover, Lawrence was Percy Shelley's physician in the very years of vitalist debate of 1814-19. Lawrence's *Lectures on Physiology, Zoology and the Natural History of Man* (1819) is a sceptical piece of medical writing that throws radical, revolutionary and evolutionary light on many conventional medical ideas; his thought had great influence on the anatomy and physiology in the first few decades on nineteenth century. Both Lawrence's *Lectures* and Shelley's *Frankenstein* are strongly associated with the idea of "aggressive materialism" and as succinctly put by Marilyn Butler, "it would be possible to treat Lawrence's role in *Frankenstein* as a standard case of influence" (Hunter 499). Lawrence's ingenious as well as sceptical lectures had had a great influence on closely-knit Shelley circle which included Shelley, Mary Shelley, Peacock, Hunt and Byron. There are traces of rich literary interactions between Shelley and Lawrence; Lawrence's 1817 lecture on the question of life may have had greatest influence on Shelley's preoccupation with the theme of terror and Gothic.

The popular press publicized the debate between Abernethy and Lawrence as the debate between transcendental religion and material science. While the press supported Abernethy and hailed him as the protector of religion and immaterial soul, Lawrence was vehemently criticised as a French-influenced materialist whose views are denounced as anti-religion. Doctor Lawrence, with his sceptical/ radical outlook towards the conventional medicine and inclination for the ideas of evolutionary medical science, was a truly romantic rebel in nature. His radical views were also not accepted in the orthodox medical world. As a consequence, Lawrence was denied the copyright of his lectures, and he was suspended from the Royal College of Surgeons. While portraying the character of *Frankenstein*, Shelley draws heavily on the unorthodox character and radical views of Doctor Lawrence, since Dr. Lawrence's radical ideas of evolutionary biology and consequential rejection and dismissal of him by the orthodox medical world had great resemblance with Victor *Frankenstein's* radical experiment with chemical medicine and subsequent resentment and revenge by his own creation.

On June 15th, 1816, Byron and Shelley had a discussion, as recorded by Dr. Polidori, whether human being can be imagined in term of mere instrument. The idea of the novel first came across her mind, as informed by Mary Shelley in her "Introduction to *Frankenstein*, Third Edition (1831)," at Lord Byron's suggestion during post-party gathering at Lake Geneva on June 16<sup>th</sup>, 1816 and most of the members of the party agreed to take part in a Ghost story contest.<sup>7</sup> A few nights later, Shelley was thinking about the experiments of Dr. Darwin and a conversation which her husband Percy and Byron had about the nature of the principle of life, and most

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over everything else" and Lawrence's unorthodox evolutionary models, as noted by the historians of science, "opened up the way anatomy and physiology were taught to London medical students in the second decade of the century" (Hunter 497-98). Butler, Marilyn. "Frankenstein and Radical Science." *Mary Shelley: Frankenstein*, edited by J. Paul Hunter, W.W. Norton & Company, 2011. pp 495-510.

<sup>7</sup> Mary, Shelley. "Introduction to *Frankenstein*, Third Edition (1831)," in *Mary Shelley: Frankenstein*, edited by J. Paul Hunter, pp 206-211, see list of Works Cited.

importantly, she reflected deeply on the reanimation of life from corpses. Shelley records in the above-mentioned preface—

During one of these [conversations], various philosophical doctrines were discussed, and among others the nature of the principle of life, and whether there was any probability of its ever being discovered and communicated. They talked of the experiments of Dr. Darwin (I speak not of what the Doctor really did or said that he did, but, as more to my purpose, of what was then spoken of as having been done by him), who preserved a piece of vermicelli in a glass case, till by some extraordinary means it began to move with voluntary motion. Not thus, after all, would life be given. Perhaps a corpse would be reanimated; galvanism had given token of such things: perhaps the component parts of a creature might be manufactured, brought together, and endued with vital warmth. (Hunter 209)

Shelley's idea of writing the story of *Frankenstein* was not only influenced by the early nineteenth century vitalist debate between Abernethy and Lawrence, but also heavily modelled on the idea of life-organics and parent-less birth by Dr. Erasmus Darwin. Erasmus Darwin, who is best known for his ideas on biological evolution as recorded in *Zoonomia* (1794), had great influences on Mary Shelley. In Volume I of *Zoonomia*, he notes that “monstrosities or mutations ... are often inherited ... Many of those enormities of shape are propagated and continued as a new variety...” (*Zoonomia* Book I, 505).<sup>8</sup> Canto I of Darwin's second long poem, “The Temple of Nature”<sup>9</sup> (1803, is devoted to ‘Production of Life’. In this part Darwin describes the origin, and formation of nature-earth—

Nurs'd by warm sun-beams in primeval caves,  
Organic Life began beneath the waves ...  
Hence *without parent by spontaneous birth*  
Rise the first specks of animated earth (I, 233-4, 247-8, emphasis mine).

Darwin's poem describes the natural birth process, “unknown to sex” (II, 64); in canto IV he delineates the philosophy of organic happiness. These lines clearly have strong resemblance with the novel's parent-less birth-process of the hideous progeny. Victor denies the natural process of birth—the biological union between man and woman, and the most important part of the process of a birth, i.e. a female womb. “Science is”, as Jonathan Bate claims in his article, “*Frankenstein* and the State of Nature,” “set in opposition to the female principles of maternity and natural landscape. The bond with both biological mother and mother nature is broken” (589). *Frankenstein* is set against this ‘normal’ principle of life and it is indeed a cult work, way ahead of its century of production, since it pioneers the modern-day parentless births at the Doctor's laboratory/ clinic where Romantic Doctors like *Frankenstein* perform more sensible, if not biological, roles in the process of birth and generation.

### III. Medical Gaze

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<sup>8</sup> For further reading on Erasmus Darwin's influence on Romantic poets see King-Hele, Desmond. *Erasmus Darwin and the Romantic Poets*. Macmillan Press Ltd., 1999.

<sup>9</sup> Darwin's extra-ordinary poem was not well received in the literary circle for its radical views and especially for its denial of the role of God in the process of creation.

Janis Mclarren Caldwell argues in *Literature and Medicine in Nineteenth Century Britain* how “death permits the pathological anatomist to read the disease process backward in time granting him the *power of seeing and knowing* the previously invisible and inviolable” (emphasis mine, 5).<sup>10</sup> What is unique and hitherto under-examined area in Frankenstein scholarship is the medicalised ‘power of seeing and knowing the previously invisible,’ as mentioned in the above quotation. Victor’s painstaking experimentation with dead bodies in his laboratory or symbolic clinic with an eye to read the disease-process backward in time is itself a ground-breaking ingenious idea, since it attempts to engage with diseased or dead time in order to render it an epic parentless birth. Here I want to return once again to *The Birth of the Clinic*, for, it is one of those first books which point towards the medical revolution in the last half of the eighteenth century; this book is at the analytical heart of this examination since it first indicates the twin birth of biological criticism and Romanticism. In this seminal study on the evolution of medical science, clinic-culture and medicine, Foucault asserts that “The clinic was probably the first attempt to order a science on the exercise and decisions of the gaze” and the clinic “demands as much of the gaze as natural history” (87). In the chapter, entitled, “A Political Consciousness,” Foucault informs that there was a great deal of discussion on whether the doctors of the eighteenth century could succeed in grasping the contagious character of the disease or could solve the problem regarding the agent of transmission. The medical gaze questions and challenges what it apparently sees in the corporeal space of physical signs and diseased symptoms.<sup>11</sup> Foucault further reaffirms: “the formation of the clinical method was bound up with the emergence of the doctor’s gaze into the field of signs and symptoms” (91). Frankenstein’s medical gaze into the body of his experimentation and the outward look of the invented Creature are quite noteworthy. Throughout the novel the creature’s physicality is subject to the rational gaze of the doctor/ society. Because of the yellowish-blackness in colour and hideous look, the monster is not acceptable to the normal Western gaze; he is acceptable only to a blind old man, named, De Lacey; to the world of ‘seeing’ he is an outsider.

One of the thought-provoking points that Foucault focuses on in the above mentioned book is the fundamental relation between “the perceptual act and the element of language” (95). The following quotation is worth mentioning, for in the later parts of this essay, it will help us to understand Frankenstein’s discursive and reflective perception about the monster and to decipher the medical language of the text—

The clinician’s gaze and the philosopher’s reflexion have similar powers, because they both *presuppose a structure of identical objectivity*, in which the totality of being is exhausted in manifestations that are its signifier-signified, in which the visible and the manifest come together in at least a virtual identity, in which the perceived and the perceptible may be wholly restored in a language whose rigorous form declares its origin. The doctor’s discursive, *reflective perception* and the philosopher’s *discursive reflexion on*

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<sup>10</sup> Caldwell, Janis Mclarren. “Romantic Materialism.” *Literature and Medicine in Nineteenth Century Britain*, pp 1-24. See list of Works Cited.

<sup>11</sup> Foucault opines that in the eighteenth century medical tradition “disease was observed in terms of symptoms and signs, establishing the truth of a corpus of knowledge and the possibility of its application.” *The Birth of the Clinic*, p 90, see list of Works Cited.

*perception* come together in a figure of exact *superposition*, since the world is for them the analogue of language. (Emphasis mine, 96)

This passage, to my mind, is extremely insightful, since it indicates a subtle relation between a doctor's reflective perception and the philosopher's discursive reflexion, and it also intriguingly focuses on medical linguistic journey from the *presupposedly* identical objectivity to the exact *superpositioning* of the perception and the reflection on perception. Central in Victor's experimentation is the philosophical reflexion on the contemporary medical perception. Christopher Lawrence in *Medicine in the Making of Modern Britain, 1700-1920* (1994), describes how in the eighteenth and nineteenth century, the British society was going through radical changes in the field of medicine. Lawrence reveals that—

Patients could be physically examined with impunity. Their bodies could be touched and listened to. Corpses, where the causes of diseases were sought, were available in their thousands. Here doctors developed instruments and techniques for physical examination<sup>12</sup> ... which they used to seek out and picture among the living the *causes of disease they had already observed the dead*. (24, emphasis mine)

The eighteenth century doctors, as stated above, strived to find the cause of disease from their observations 'among the dead'. While discussing the birth and childhood of the monster, Gayatri Chakravorty Spivak in her essay, titled, "*Frankenstein and Critique of Imperialism*" compares Victor's *Frankenstein's* laboratory as "an artificial womb" and refers to the monster as "bodied corpse" (Joshi 301)<sup>13</sup> This link between the body and the bodiless is significant from the viewpoint of medical history of time, for, it pushes the medical time to move backward in physical time. Spivak further elaborates the notion of gaze and history—

If the exchange between the nameless monster (without history) and Victor *Frankenstein* is a finally futile refusal of withheld specularity, the situation of the gaze between pterodactyl (before history) and a "national" history that holds tribal and non-tribal together, is somewhat different. (Joshi 309)

Hence, the situation of the medicalised gaze between the 'before history' and 'national history' has a significant role to play in this novel. This gaze is not rational; it is, to go back to Foucault once again, a medical gaze between the coloniser and the colonised. The relation between Victor *Frankenstein*, the creator and the monster, Victor's creation can be interpreted in terms of the relation between doctors and his patients / objects of experiment. Victor *Frankenstein's* is the case of Romantic doctor, as stated earlier, who with an aim to banish disease from human frame, discovers the causes of life from the corpses.

#### IV. Sickness, Fever, and Race

<sup>12</sup> The stethoscope, invented in 1816, is best known example

<sup>13</sup> Spivak, Gayatri Chakravorty. "*Frankenstein and Critique of Imperialism*." *Mary Shelley: Frankenstein*, edited by Joshi, Maya, Worldview, 2012, pp 301-311.

If we read the novel carefully, we will notice that there are references to sickness and fever for a number of times. In chapter two of volume one, Elizabeth catches the scarlet fever and when she is under treatment and on her way to recovery, Victor's mother enters "the chamber long before the *danger of infection* was past. The consequences of this imprudence were fatal. On the third day my (Victor's) mother sickened; her fever was very malignant and the looks of her attendants prognosticated the worst event" (27, emphasis mine). Frankenstein loses his mother because of the infectious scarlet fever and there was, as feared by Frankenstein, always "the danger of infection" (27). One of the reasons behind Victor Frankenstein's creation the, as already mentioned earlier is to "banish disease from the human frame, and render man invulnerable to any but a violent death!" (25). On the contrary, what he creates is a monster that threatens as well as destroys, firstly the human frame of the creator himself, and then his kith and kin one by one. In his PhD thesis, titled, "Gothic Journeys: Imperialist Discourse, the Gothic Novel, and the European Other," Charles Michael Bondhus shows how gothic novels like William Godwin's *Caleb Williams*, Ann Radcliffe's *The Romance of the Forest*, *The Mysteries of Udolpho*, *The Italian*, and Mary Shelley's *Frankenstein* concern themselves with "Intra-European travel", "discursive relationship to empire," and "Britain's perception of other European nations during the late eighteenth and early nineteenth centuries" (7). Like most scholars in this particular field, Bondhus fails to point toward the way how disease and circulation of disease shapes this European imperialist relation with the 'other.' As a diseased uncanny,<sup>14</sup> the monster disrupts the boundary line between the coloniser and the colonised. Victor Frankenstein could not banish disease as he aimed prior to the creator's birth; rather, like an epidemic it traverses the land of diseased colonial 'others' and enters the West to destroy the European Race.

From the very beginning the wretched creature suffers from the pain of 'colonial consciousness,'<sup>15</sup> and not only does he rebel against his creator, but also orders him to fulfil his desires. From the structural point of view the novel can be treated as a perfect example of intentional fallacy<sup>16</sup>; the creature flees from the control of its creators and as a symbolic spectre of slave trade history, he takes revenge on his creator and ravages his family in the disguise of an infectious disease. Mary Shelley lost her mother only when she was ten days old because of puerperal fever and lost her two children while staying in Italy. Fear of 'banishing diseases' from the human frame was self-inherent from Mary Shelley's part. Out of this self-inherent fear of disease and death, Frankenstein like his author, wanted to 'banish' the monstrous disease from the human life and began experimenting with dead bodies, just like Shelley's whole life from her

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<sup>14</sup> I have used the phrase 'diseased uncanny' in slight alteration of the critical idea of 'colonial uncanny'. See Swati Chattopadhyaya, "Colonial Uncanny" in *Representing Calcutta: Modernity, nationalism and colonial uncanny*, Routledge, 2005.

<sup>15</sup> It's a phrase used by Elizabeth A. Bohls in *Women Travel Writers and the language of Aesthetics, 1717-1818* (1999). Bohls explains nicely— "...staring into his pool, he (monster) captures the bitter pain of those who internalize values that demean them. His *colonized consciousness* renders a tragic double vision of Western culture from inside and outside at once" (emphasis mine, Bohls, 241). See Works Cited.

<sup>16</sup> The term, coined by W. K. Wimsatt, Jr. and Monroe C. Beardsley in *The Verbal Icon* (1954), indicates an inherent problem to judge a literary work by the intent of the artist/ author or a reaction against what the author intended at the time of writing. See Works Cited.



birth to her death was mainly an epical pre-occupations with diseases and deaths— of her mother, husbands, sons and her own insanity towards the end of her life. Invoking the internal calendar used in the novels and on manuscript evidence, Anne K. Mellor in her essay, “‘Making a ‘Monster’: an introduction to *Frankenstein*” surmises that “Victor Frankenstein’ death, the creature’s promised suicide, and Wollstonecraft’s death from puerperal fever can all be seen as the consequences of the same creation, the birth of Mary Godwin-the-author” (Schor 12).<sup>17</sup>

During the painstaking process of creation, Frankenstein suffers from diseased imagination and consequent feverish delirium, and post-birth of the creation, he remains sick. Sandra Gilbert and Susan Gubar in their study, titled, “Mary Shelley’s Monstrous Eve”<sup>18</sup> describes how the creative myth was suggestive of feverish and diseased process—

His “pregnancy” and childbirth are obviously manifested by the existence of the paradoxically huge being who emerges from his “workshop of filthy creation,” but even the descriptive language of his creation myth is suggestive: “incredible labours,” “emaciated with confinement,” “a passing trance,” “oppressed by a slow fever,” “nervous to a painful degree,” “exercise and amusement would . . . drive away incipient disease...” (*Mad Woman in the Attic*, 259)

During the research-phase about the origin of creation and during the birth-process of the creation, Victor experiences trance, fever, pain and other bodily symptoms of sickness to some great extent. In *Literature of Terror*, David Punter also insists that: “Frankenstein’s researches take him unhealthily through engagement with death and sickness, in that he has to find the parts of the monster’s future body in charnel-houses and morgues” (170). Before the Creature’s birth Frankenstein remains frequently sick with both physical and mental diseases. He relates feverishly—

[n]o one can conceive the variety of feelings which bore me onwards, like a hurricane, in the first enthusiasm of success. Life and death appeared to me ideal bounds, which I should first break through, and pour a torrent of light into our dark world. A new species would bless me as its creator and source; many happy and excellent natures would owe their being to me. (58)

Victor’s is a project of pouring ‘light into the dark world’ and the lines, mentioned above clearly sound as the dominant coloniser’s voice of creating and civilising the new species or race. In great detail, Victor describes his monomania regarding the creation process to Walton and how he was seized by a Romantic imagination which was essentially feverish and diseased—“Every night I was oppressed by a slow fever, and I became nervous to a most painful degree; a disease that I regretted more because I had hitherto enjoyed most excellent health” (p. 38), and this fever continues till his death— “this was the commencement of a nervous fever, which confined me for several months” (43). While explaining the scientific contexts and creative process of the monster’s birth, Andrew Smith asserts that—

<sup>17</sup> “‘Making a ‘Monster’: an introduction to *Frankenstein*.” *The Cambridge Companion to Mary Shelley*, edited by Esther Schor. Cambridge UP, 2003, pp 9-25.

<sup>18</sup> Sandra Gilbert and Susan Gubar. “Mary Shelley’s Monstrous Eve.” *The Madwoman in the Attic: The Woman Writer and Nineteenth Century Literary Imagination*. Yale UP, 2000, pp 241-273.

Frankenstein focalizes a language of creativity which makes him resemble the Romantic writer who celebrates the power of the imagination, and who strives after beauty even whilst in this instance it leads to the creation of ugliness because the imagination is diseased and feverish. (168-69)<sup>19</sup>

Because of the physical monstrosity of the Creature, many critics identify the Creature with 'other' and he is often more identified with the race of Afro-Caribbean slaves. Immanuel Kant's identification of races can be invoked here. In his study on race, Kant points towards the skin colour and facial expression for the specific race signifiers.<sup>20</sup> He categorises races mainly on the basis of skin colours, linked largely to the geographical areas they belong to— white, yellow, black, and red, which are analogous to European, Asian, African, and American.<sup>21</sup> With sharp focus on the monster's skin colour from his very birth and his particular pattern of behaviours, there is a clear indication towards a certain non-European race and towards imperialistic relation with this 'other' race. Imperialism brings contact with other and contact opens up exposure for the non-European other whose history always the enlightenment thought tries to marginalise and erase— it is the enlightenment phobia for the romantic other or what Brian Niro terms as "politics of paranoia" (*Race*, 84).<sup>22</sup> Niro succinctly observes that "Shelley's *Frankenstein* is caught between the perils of progress and the decline of a society in degeneration" (84). The colonial contact with the decline, degenerated society, and diseases is symbolically manifested in *Frankenstein*.

## Conclusions

The last years of the eighteenth century experienced the ingenious usage of radical scientific discourse and the constitution of pathological anatomy and new medical language. In this article, I showed how Mary Shelley's *Frankenstein* draws on the contemporary colonial expansion as well as the medical experimentations and writings on vitalist debate and the evolutionary biology. In this study, by briefly discussing the idea of medical gaze and the concept of race in the late eighteenth century and by pointing to the slave trade, I also attempted to establish the implicit interface between the imperial-experiences and the experimentations on disease as well death by the Romantic doctors like Victor Frankenstein.

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<sup>19</sup> Andrew Smith. "Scientific Contexts." *Cambridge Companion to Frankenstein*, edited by Andre Smith, pp 151-183, see list of Works Cited.

<sup>20</sup> Kant, Immanuel. "On the Different Races of Man," "On Natural Characteristics, so far as They Depend upon the Distinct Feeling of the Beautiful and Sublime," and "On Countries that are Known and Unknown to Europeans." *Race and the Enlightenment: A Reader*. Edited by Emmanuel Chukwudi Eze. Blackwell, 1997, pp 38-64.

<sup>21</sup> Kant himself refers to these races as "(1) the race of Whites, (2) the Negro race, (3) the Hunnic (Mongolian or KaLast Manuck) race, and (4) the Hindu or Hindustanic race." Kant 1997, p 41.

<sup>22</sup> For further study see Niro, Brian, "The Enlightenment and the Fabrication of Race." *Race*, pp 54-91. See list of Works Cited.

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**BIO- NOTE**

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