Review

Did all those famous people really have epilepsy?

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Abstract

Many famous individuals are said to have had epilepsy, and these names often find their way into books and lectures on epilepsy. The goal of this study was to investigate in detail the histories of 43 of those people who had various kinds of attacks, but not epilepsy. They range chronologically from Pythagorus, born in 582 BC, to the actor Richard Burton, born in 1925 AD. Epilepsy was misdiagnosed in 26% who had psychogenic attacks, in 21% with attacks of anguish, nervousness, fear, agitation, or weakness; and in 12% with alcohol withdrawal seizures. In some instances no evidence of any episodic symptom could be found. One unexpected finding was that 40% of these well-known individuals had serious, often life-threatening, physical conditions as infants or very young children. This article is an attempt to correct the record with respect to these people and also to remind us of the many reasons similar misdiagnoses are being made today.

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1. Introduction

Many lecturers on epilepsy begin their talks with a slide that lists a large number of famous individuals who are said to have had epilepsy. This information often shocks the audience and does get their attention, especially because so many famous people are mentioned. The goal of the present study was to explore in detail the histories of many of these individuals, often listed in texts on epilepsy and on the Internet as the very famous who had epilepsy, to determine if they did, in fact, have epilepsy.

2. Method

The Internet was used to gather a large amount of information on each individual, but books on each person in public and university libraries were usually the source of the most detailed data. The references include many recent books, exemplified by those published after 1990 (29%), after 1980 (42%), and after 1970 (58%). Only 23% of the references are older than 1950. In many instances new information has become available so that more complete histories can be compiled on these individuals and a better judgment of their possible epilepsy can be made.

3. Results

3.1. Pythagoras (582–500 BC)

Very little is known about this ancient mathematician, but at least we can state that there is no evidence he had epilepsy. He was born on the island of Samos between the 50th and 52nd Olympiads, a common way of designating ancient dates, and, therefore, around 582 BC. In conflict with the government, Pythagoras immigrated to Croton in Southern Italy, where he founded
a society of disciples, both a religious community and a scientific school. As he wrote nothing, his contributions must have been passed on by others; his major contribution is called the Pythagorean proposition on right-angled triangles \( a^2 + b^2 = c^2 \). His disciples believed that numbers are the substance of all things, even the elevation of the soul to God, and that the study of mathematics is the purifier of the soul. In addition, harmony was divine, because it was a ratio of numbers. Also, Pythagoras was a mystic, believing in the transmigration of souls and the sinfulness of eating beans, never touching white roosters, and never looking into a mirror beside a light(!). At least his religion featuring numbers had found a way to blend the mystery of the divine with some rational thought.

3.2. Aristotle (384–322 BC)

This great philosopher was born in Stagira, a Grecian colony. His father, Nicomachus, was the court physician to King Amyntas of Macedonia, and his mother was the father’s concubine [1]. The tradition was that the father would hand down to the son the skills of a physician, but when Aristotle was only 10 years old, his father died, as did his mother. At 18 years of age he became a student of Plato’s Academy in Athens, later becoming a teacher there in rhetoric and dialectic. When Plato died in 357 BC [1], Aristotle was not named leader of the Academy, and the next year he went to the court of Macedonia to become the tutor of Alexander the Great. Much later in 335 BC, he founded his own school, the Lyceum, in Athens. After the death of Alexander the Great in 323 BC, anti-Macedonian feelings in Athens were so great that Aristotle retired to his family’s home, where he died of a stomach complaint at age 62. Our knowledge of his personality, character, and health is scanty, but he was described as a bit of a dandy, wearing rings on his fingers, had small eyes and a lisp, and cut his hair fashionably short. He was a good speaker, lucid in his lectures and persuasive in conversation. No reference to any type of attack could be found that would provide evidence of epilepsy.

Aristotle’s contributions to science and philosophy, especially deductive logic, are great. His ultimate reality was in physical objects, including the classifications of genera and species. His philosophy became the official philosophy of the Roman Catholic Church. As a summary of his great contributions, aristotelianism became more and more identified with traditional scholasticism.

3.3. Hannibal (Barca) (247–183 BC)

Hannibal was the great Carthaginian general and leader of the famous march across the Alps. He was the son of Hamilcar Barca and, at the age of 9, began to follow his father’s military campaigns. From 18 to 25 years of age, he acted as a military leader under his brother-in-law, Hasdrubal, who was killed in 221 BC; Hannibal was then elected the new commander-in-chief. Three years later he clashed with the Roman army, which started the Second Punic War. At that time, using elephants, he set out over the Pyrenees and through the Alps, marching into northern Italy and invading Roman territory. In 216 BC he established himself 270 miles east of Rome, later attacking Rome unsuccessfully. After peace was established and he returned to Carthage, the Romans pressured him into fleeing to Syria, later to Crete and northern Asia Minor. He would not surrender to Rome and committed suicide by poison.

Regarding the character of Hannibal, the Ancient History Sourcebook, written by Polybius [2] around 200 BC, stated that some considered him “extraordinarily cruel and also grasping for money.” However, as a military commander required to conquer the enemy and feed his army, Hannibal was excused by Polybius for these characteristics. Baker [3] maintains that he was a “man of perfect integrity, who hardly ever lost his temper, who never got drunk, and never drank more than a pint of wine at a time.” This author could find no references to any episode that could qualify as a seizure to justify the diagnosis of epilepsy.

3.4. Alfred the Great (849–899)

Alfred, one of the best kings ever to rule [4], was 4 years old when he was sent by his father, King of Wessex in England, to Rome and was anointed king by Pope Leo IV [5]. His mother offered a prize to the first of her five sons who could learn to read, and Alfred, the youngest, won the prize. Before 7 years of age he traveled again to Rome and was impressed by the contrast between the civilized parts of Europe and his more backward England. He had a severe illness from childhood, prayed for healing, and seemed to rid himself of this illness, only for it to return from the 20th to 40th years of his life [6]. He “would be immediately seized by sudden and overwhelming pain, was constantly afflicted with the most severe attacks. At any moment he would be either suffering the pain which it causes or the gloom which is thrown over him by the apprehension of its coming.” Note that the word seized is used, but these painful episodes of questionable etiology cannot be a manifestation of epilepsy, as pain is extremely uncommon in seizures.

Alfred the Great defended Anglo-Saxon England from Viking raids, formulated a code of laws, fostered a rebirth of religious and scholarly activity, and was in part responsible for founding Oxford University. He exhibited military skill and innovation, sound governance, and the ability to inspire men and to devise plans for the future. Finally, he helped to translate books from
Latin into the Anglo-Saxon language and is generally credited with establishing trial by jury [5].

3.5. Dante Alighieri (1265–1321)

Durante Alighieri was born in Italy to an ancient, but decadent Guelph family, and at his baptism in March 1266 his name was shortened to Dante. At 12 years of age he was promised to Gemma Donati and had several children with her. In January 1290 at 24 years of age he suffered an illness with the most severe pain [7], probably rheumatic fever, which continued for 9 days. While still young, he met Beatrice Portinari and his love for her would be the main stimulus for his later poetry. To take part in public life, it was necessary by law to be enrolled in one of the “arts,” so Dante matriculated in the guild of physicians and apothecaries.

The Guelph party was then split between the “whites” and the “blacks,” and his side lost so he was exiled from Florence, Italy, condemned to be burned to death should he ever return. He withdrew from active participation in politics and, between 1290 and 1300, was said to be “too sensitive for happiness” [8]. A few years later, Henry of Luxembourg became Emperor Henry VII, so Dante was politically back again, hoping that the Emperor would heal the wounds of Italy.

In 1306 Dante began *LaDivina Commedia*, an allegory of human life in the form of a vision of the world beyond the grave, written to convert a corrupt society to righteousness. He related a vision in which he imagined that he passed into hell, purgatory, and paradise guarded first by the Roman epic poet Virgil and then by his beloved Beatrice. As Dante projects himself into Hell, he falls into a “dead faint” and, while imagining unconsciousness, discovers the souls of the gluttonous. It is possible that some readers failed to understand that these were only imaginary visions of Dante and not actual events in his life as a form of epilepsy. After recovering consciousness the narrative reverts to an allegory. From this work and others he is universally recognized as ranking with the former Sophocles and the later Shakespeare, among the few supreme authors of the world.

3.6. Johanne la Pucelle (Joan of Arc) (1412–1431)

Joan of Arc was born to a peasant family in north-eastern France during the Hundred Years’ War between France and England. She was noted to be an exceptional child in her conduct and manner, especially compassionate toward the poor and sick. She was noted for her great piety and her devotion to God and to the Blessed Virgin, and attended mass daily. When Johanne heard the church bells ring, she would fall to her knees and often chose prayer over playing with other children. Her mother Isabelle stated that despite her youth, she would fast and pray with great devotion for those who suffered. Her first encounter with voices and visions occurred when she was only 13 years old. She believed she was told to go into France, lift the siege of Orléans, and have Charles of France, then deposed, crowned as King of Rheims. During the occupation by the English the crown of France had passed from the Dauphin, Charles, to the infant King Henry VI of England. As a 16-year-old girl, she asked to join the forces of the Dauphin, who agreed to her plan of freeing Orléans, which was under siege by the English. Wearing men’s clothes and equipped with armor, she boosted the morale of the troops and, with success, celebrated the victory over the siege, becoming known as the “Maid of Orléans.” Later, other cities were captured and Charles was crowned Charles VII in Rheims in 1429. During the next year, however, she was captured by the enemy, the Burgundians, who turned her over to the Bishop of Beauvais, who was allied with the English. She tried to escape twice, and was accused of heresy. Her insistence on direct communication with God through voices was interpreted as communication with demons. She was charged with 70 counts of sorcery and witchcraft, and was burned to death at Rouen on May 30, 1431. Because she was viewed as a heretic, her remains were cast into the Seine River. Later, she was viewed as a martyr and was beatified in 1909 and canonized as a saint on May 16, 1920 [9].

The possibility that Joan of Arc’s voices and visions were epileptic phenomena has been considered, but clearly auditory and visual hallucinations are very uncommon in epilepsy. Epileptic phenomena are nearly always brief and primitive, like light flashes; the well-formed visions she described lasted hours, rather than just a minute or so [10]. Thus, the extremely pious and religious Joan of Arc likely experienced religious messages, rather than epileptic phenomena.

3.7. Leonardo da Vinci (1452–1519)

Leonardo was born in the town of Vinci near Florence, Italy, the illegitimate son of a wealthy lusty lawyer, Piero da Vinci, and a peasant woman, Caterina [11]. At 20 years of age he entered the artists’ guild, but 3 years later was accused of sodomy, a charge later dismissed in the courts of Florence [12]. At times, Leonardo suffered from intense claustrophobia and also anxiety or feelings of angst. Panic affected him occasionally “like a low fever, an illness of the nerves that shook him suddenly . . . and had spasms of furious sensibility when young pupils behaved lightly” [13]. These feelings are by no means evidence of epilepsy. Another biographer [14] described similar feelings as “a paranoid strain that appeared suddenly at the end of a long period of failure and misery in 1487, like a nervous breakdown when he lost his grip in the world of reality but with a quick recovery.” After 5
years, he suffered another breakdown. In 1513, five years before his death, he had “some sort of stroke” [12], and for years until his death in 1519 he suffered from arthritis with shriveled, useless hands [15].

Leonardo da Vinci was one of the great masters of the High Renaissance, a painter, sculptor, architect, engineer, and scientist. His innovations influenced the course of Italian art for centuries and he anticipated many developments in modern science. His Adoration of the Magi and The Last Supper are world-class masterpieces, as is the most famous painting of all times, The Mona Lisa. His anatomical drawings of humans, animals, and plant life are well known to most scientists, as are his many discoveries in meteorology and geology. His theories are found in numerous notebooks, often written in mirror script because he was left-handed [12]. A creator in all branches of art, an inventor in many branches of technology, Leonardo was truly the Universal Man.

3.8. Michelangelo Buonarroti (1475–1564)

Michelangelo came from a noble Florentine family and received training in the palace of the Medici family from a pupil of the master, Donatello. After 1505 he worked for many popes, including Julius II, Leo X, Clement VII, and Paul III [16]. Untiring, he worked until advanced years at great personal sacrifice, but always struggled to attain perfection. His life was one of incessant trials with many bodily infirmities, but he showed remarkable composure and forebearance. This deeply religious artist worked too hard, ate and slept too little, suffering from headaches, catarrh, giddiness, diarrhea, gout, and also depression, but especially from painful kidney stones, at times being unable to urinate [17]. In August 1561 at the age of 86, he had a “seizure while working in fierce heat” [18]. “Heat syncope,” i.e., sudden unconsciousness from cutaneous vasodilation with consequent systemic and cerebral hypotension [19], is a well-known phenomenon and this episode does not likely represent epilepsy. Another reference [20] indicated that he quickly recovered, further evidence that it was likely a (heat) syncopal attack. One brief comment by another biographer [21] from a relatively unknown press was that he was “unable to prevent frequent seizures.” Without mentioning any attacks before or after, that one single comment makes one suspicious about the correctness of the phrase. Thus, two complete biographies mention only one attack, which was likely heat syncope and not an epileptic seizure.

Michelangelo is likely the greatest and most famous artist of our civilization. He created monumental paintings, sculptures, and architectural pieces that are well known throughout the world. His paintings of the Holy Family and of the Sistine Chapel in the Vatican, his sculptures Pietà and David, and the architecture of St. Peter’s Cathedral in Rome have inspired the inscription on his monument, “No praise is sufficient for so great a man” [16].


At 10 years of age Armand-Jean was at the College of Navarre in Paris, completing his secondary education with the expectation of a military career. At age 20, he was treated for gonorrhea inveterate and was considered a womanizer. Although he had a strong constitution, he was driven by a nervous intensity that resulted in bouts of tears which he found humiliating. An illness involving fever began at age 26 and recurred 10 years later, and he suffered from ulcerations. Richelieu had severe pain from hemorrhoids and often traveled lying down. In 1632 he had significant trouble with urinary retention and was not able to urinate for a 6-day period, a problem that recurred in 1634 and 1635. He was also afflicted with rheumatism and toothaches, and he developed pleurisy 6 days before his death. At no time was there clear evidence of epilepsy.

As mentioned earlier, du Plessis was headed for a military career when his brother Alfred resigned his bishopric, so he decided to take up theological studies [22]. He was consecrated as a bishop at 22 years of age and named secretary of state to King Louis XIII at age 31. Six years later he was named Cardinal Richelieu by Pope Gregory XV. The Cardinal had the Sorbonne University entirely rebuilt between 1626 and 1629, promoted the theater, built many magnificent structures, had an impressive collection of art, all of which helped to unify France culturally. The well-known author Belloc [23] named Richelieu the Founder of Modern Europe.

3.10. King Louis XIII of France (1601–1643)

Born at the famous Fontainebleau Castle near Paris, Louis was the first child of King Henri IV and Queen Marie de Médicis. At age 2 he was frequently beaten by his father [22] and also by his governess, when early signs of psychological retardation became evident. He suffered from lifelong gastroenteritis, and in his early twenties tuberculosis became evident. Cardinal Richelieu, his mentor and major minister, claimed that he never saw King Louis XIII in a state other than emotional agitation. From adolescence he was prone to emotional fixation on men, and on his wedding night his own mother had to take him by the hand into his wife’s room and urge him to perform his duty; he also suffered from erectile dysfunction. The wife, Princess Ann of Hapsburg of Austria, produced a son, Louis XIV, but it is, of course, uncertain if Louis XIII was
the biological father. In these circumstances, it is no surprise that King Louis XIII was high strung, moody, ill-tempered, and sometimes violent. Other accounts [23] of his life indicate that he lived with the constant aid of physicians who were successful in preserving his unstable body. He saw ghosts as a child, and so feared the dark that he had attendants with him to watch over his tardy sleep. He had no beard until well into his twenties and his indifference to females was extraordinary. He started the fashion of wearing wigs by wearing one himself to conceal his baldness.

Louis XIII ascended to the throne at age 9 after the assassination of his father, Henri IV. His mother and Cardinal Richelieu acted as his regents until he was 16 years old, when he took the reins of government. Under him a powerful navy was built, the port of Le Havre was modernized, and the development and administration of New France were organized. However, there is no evidence of epilepsy in his history.

3.11. Jean-Baptiste Poquelin-Molière (1622–1673)

Jean-Baptiste became part of a touring company that performed plays and ballets and took the simplified named Molière in 1645. Molière became a great playwright, and was responsible for the well-known Don Juan, The Misanthrope, The Miser, The Doctor in Spite of Himself and many other works. At the fourth performance of his famous play Le Malade Imaginaire he was “seized with a paroxysm of coughing in the final ballet, insisting on completing the show” [24]. He was carried home and died 1 hour later. The only similar comment was that his “health declines made him unable to perform on stage for months” [25]. The final moments of his life were also described by another biographer: “he was seized with a convulsion while delivering the ‘Juro.’ He covered the mischance under forced laughter. Later he had a murderous chill, then a paroxysm of coughing and died soon after” [26]. The terms seized and convolution were used, but forced laughter and coughing covered up the episode in question and these latter events are not consistent with epilepsy. In one other account [27] the term seize was used for his last fit of coughing with blood streaming from his mouth.

3.12. Blaise Pascal (1623–1662)

Blaise Pascal was the third of father Etienne’s children and his only son. At the end of Blaise’s first year he experienced a 12-month period of cramps, which spontaneously disappeared. His sister, Gilberte Pascal Périer, described the events: “He screamed, kicked violently, and fell into a state of agitation. He had neither pulse, nor voice, nor feeling, and became increasingly colder; after a while he returned to his senses” [28]. These episodes occurred when he was in contact with water or when his parents approached each other in his presence. Stephanos and Auhagen [29] reported these episodes as typical of infantile affective spasms (pallid form) and referred to Lombroso and Lerman [30], who further described these as breath-holding spells. These episodes are related to pain, excitement, or frustration that leads to a temporary cardiac arrest and possibly some cerebral hypoxia. The child becomes pale and may lose consciousness with some episiotonos movements. Stephanos and Auhagen [30] speculated that the episodes were related to the mother’s smothering of Blaise with exaggerated care and her clinging to her son whom she strongly eroticized to avoid sexual contact with her husband. From his earliest years, Blaise was sickly, weak, and feverish. At 18 years of age he had a series of functional disorders and episodes of hypochondrial anxiety, often losing his appetite with epigastric pain and unbearable headache (migraine). At 23, his father had a hip dislocation and Blaise began to use crutches at the same time because of some hip complaint, likely a psychosomatic reaction.

In his last 4 years of life his physical condition declined so much he had to give up his scientific work. No new illnesses occurred, but the many ailments that plagued him in youth intensified greatly. In 1662 he was totally emaciated and subject to very painful colic attacks, and on August 19th of that year, at age 39, he died of gangrene of the colon.

In summary, the breath-holding spells do not represent epilepsy and the other illnesses provide no further evidence of an epileptic condition.

The educational and professional life of Blaise Pascal was influenced by his father, a local judge, whose unorthodox views led him to teach his son himself. Etienne decided that his son was not to study mathematics before the age of 15, and all such texts were removed from their house. However, the boy began working on geometry himself at 12 years of age so his father relented and gave him a copy of Euclid, allowing his mathematical ability to flourish.

In December 1639 when his son was 16, Etienne was appointed tax collector for Upper Normandy and Blaise invented the first digital calculator to help his father with his work. At age 30, Pascal published a treatise that was a complete outline of a system of hydrostatics, the first in the history of science; later, Pascal’s binomial coefficients led Newton to discover his general binomial theorem. In 1654 Pascal laid the foundation for, and is considered the father of, probability theory. In October of the same year he nearly lost his life as horses pulling his carriage bolted and the carriage was left hanging over a bridge spanning the Seine. On November 23rd of that year, he pledged his life to Christianity: “If God does not exist, one will lose nothing by believing in Him, while if He does exist, one will lose everything by not believing.”
3.13. Sir Isaac Newton (1642–1727)

Newton was the son of an illiterate farmer who died before his birth at Woolsthorpe, England, and was small enough at birth to “fit into a quart pot.” When he was 2 years old his mother married Rev. Barnabas Smith, who refused to accept Isaac who was then left with his grandparents. When Newton was 10 years old, Rev. Smith died, and his mother returned to his birthplace. Two years later he was sent to grammar school in Grantham, England, and was placed at the bottom of the class, but a playground fight that he won due to sheer spirit initiated his rise to the top of the class. He was denied his mother’s attention and thus his childhood was unhappy, and throughout his life he was on the verge of an emotional collapse. At grammar school he showed an extraordinary inclination for mechanical work, like a windmill powered by a treadmill, run by a mouse. At age 17, his mother called him home to run the farm, but his focus was on gadgets. Newton then set out for Trinity College, Cambridge, in June 1661, and although he did not distinguish himself during the next 3 years and did not secure a fellowship, he was selected for a scholarship in 1664. He pursued a range of topics from mathematics to alchemy and gave new direction to optics, mechanics, and celestial dynamics. Newton was then elected to the Royal Society.

In the first of a series of bitter disputes, Newton locked horns with the celebrated curator of experiments of the Royal Society, the bright, but brittle Robert Hooke. The ensuing controversy continued until 1678, establishing a pattern to his behavior, and he suffered a serious emotional breakdown at that time. Newton’s hatred of Hooke was so encompassing that he withdrew from the Royal Society until Hooke’s death in 1703.

In 1693 Newton suffered a second severe nervous breakdown similar to the one in 1678 and he retired from research. The possible reasons for the breakdown include chemical poisoning as a result of his alchemy experiments, frustration with his research, the ending of a personal friendship with Fatio de Duillier, a Swiss-born mathematician living in London, and problems resulting from his religious beliefs. Newton himself mentioned lack of sleep, which could have been symptoms of mental illness rather than the cause. Also, around this same time, he sent strange and deranged letters to the famous philosopher John Locke. Later in 1696, he recovered and was appointed Master of the Mint. With the death of his enemy Hooke in 1703, Newton was elected president of the Royal Society.

Isaac was often observed deep in thought, and a number of episodes that occurred may have suggested, but did not clearly indicate, a complex partial seizure. Once when he was riding home from Grantham, he dismounted to lead his horse up a steep hill. When he tried to remount, he found that he had only the bridle in his hand; his horse had slipped through and run away. Occasionally when he entertained friends, he would leave them to get more wine, but would be found working on some problem, oblivious to his guests and to the errand he had set out on. When he dined at the high table at Trinity College, Cambridge, he would at times be so absorbed in thought that he would forget to eat his meal.

Newton’s inclusion on the list of famous individuals with epilepsy may well have resulted from a scientific paper that compared his mental disorder with that of a patient with a similar psychiatric history, but the latter patient also had generalized tonic–clonic seizures [31]. Of course, there was similarity in the psychogenic conditions, but not in the seizures. Nevertheless, short notions followed (on the Internet) that incorrectly implied seizures in Newton’s history only because the patient with whom he was compared did have seizures. A brief summary of the aforementioned paper was deceiving and allowed the mistake to occur.

Sir Isaac Newton’s contributions were amazing. The mathematician Lagrange described Newton’s Principia as the greatest production of the human mind; LaPlace considered him the greatest genius who ever existed. It was Gauss who assigned to Newton the prefix summus. His greatest achievement was his work in physics and celestial mechanics, culminating in the theory of universal gravitation. Newton has been regarded for nearly 300 years as the founding father of modern physical science, but he did not have epilepsy.


When King William III of England was only 3 days old, it was thought that he would die; the child grew even weaker at first and rallied only slowly later [32]. At age 10 he had complications of asthma, violent headaches, and recurrent “fainting fits” and his life was again thought to be in danger. In his teens he developed a chronic cough, largely of nervous origin, but the asthma was so significant, at times, he could not leave his bed for days. Other authors [33] described him in his teens as “subject to headaches, fainting fits, and languors (weakness) lasting up to several days with frequent coughing from his asthma.” Robb, referring to his asthma, claimed he had “gone so far that he was fainting over his work, going around talking to himself, likely from absence of mind, rather than deliberate discourtesy” [34]. This same author said that William III was at times “very faint and somewhat indisposed with extremes of temperature. He also suffered from acute depression and had “violent fits of coughing.” The “fainting fits and languors” and the “fits of coughing” by no means indicate an epilepsy, but instead likely are manifestations of asthma and acute depression.
King William III of England was the son of William II, ruler of The Netherlands, but accomplished, with his wife Mary, far more for the welfare of the British people than most of the preceding kings born in England. William III reformed the nation’s political and financial institutions and accomplished a transition from the personal government of the Stuart kings to parliamentary rule. The constitutional rights of the English people were then set on a firmer basis. William was a dedicated advocate of tolerance, including fair treatment of the people in Ireland, as exemplified in the Toleration Act, which extended the liberty of private worship to dissenters, especially Protestants. Finally, he restored the “balance of power” by overthrowing the predominance of France, uniting his hatred of the popery, and also of France.

3.15. Jonathan Swift (1667–1745)

According to one version of his birth in Dublin, Ireland, Swift was born prematurely 7 months after his father’s death and was conceived before his parents were married. In another version, he was a full-term baby but his father had died 7 months before he was born. Swift described himself as a “weak baby” [34], and when he was a year old he was taken by his nurse without the consent of his mother and returned to her only when he was around 4 years old. From the time he was 16, he became increasingly deaf from Menière’s disease [35,36], with many attacks of giddiness, vertigo, and nausea [37]. His own description was “a hundred oceans rolling in my ears” and the phrase “severe fit of giddiness” was often used [36]. These episodes of deafness lasting 3 or 4 days led to a mood of depression. Later, physical problems included many upper respiratory infections, piles, rheumatic pain in the back, and shingles. By 1740 he was extremely deaf, and had also developed a tumor that almost forced his left eye out of its socket [37,38]. The “fits” of giddiness were clearly a manifestation of Menière’s disease and there was no evidence at all of epilepsy. In 1742 he had a few minor strokes [39]. He died at age 78 leaving most of his money to a hospital near Dublin for “ideots & lunaticks” [40].

Jonathan Swift graduated from Trinity College, Dublin, went to England to work for Sir William Temple, and met Esther Johnson, whom he called “Stella.” Speculation is that he actually married her and she played such an important role in his life that he could not bear to attend her funeral when she died. After working for Sir William he was ordained in the Church of England, ministering to a congregation of only 15 people. He then became politically active between 1707 and 1710 and, at the death of Queen Anne of England, retired to Ireland. His greatest masterpiece was likely *Gulliver’s Travels* (1726), which was very popular with children, but was a satire intended for adults. The travels of Gulliver were supposed to illustrate the many failings, delusions, and frailties of humankind. Using the pen name Isaac Bickerstaff, he ended the career of a man named John Partridge, a self-promoting astrologer, by predicting Partridge’s death. He described the death in such detail that the public believed that Partridge had actually died, as did the Stationer’s Register who removed his name from the rolls. Jonathan Swift was a fashionable and very popular satiric writer.

3.16. George Frideric Handel (1685–1759)

The early life of Handel was relatively free of illness. However, in 1737, at age 52, Handel was diagnosed with “rheumatism” [41], and on April 13th of that year he was said to have had a stroke with paralysis of his right arm [42]. Dr. Wilhelm Reinhard, a Dusseldorf physician, questioned the diagnosis of stroke, especially because of the rapid recovery of full use of the paralyzed arm [43]. On the other hand, the diagnosis of cerebrovascular disease may be correct because of the mental disturbances verging on derangement hinted at by all contemporary witnesses. In two publications the diagnosis of cerebrovascular disease was supported by disturbances of his vision and some minor paralyses [44,45]. Also, some have suggested he suffered from mania. However, no references can be found to seizures among the latter accounts [44,45] and also among other biographies [46,47].

Handel first studied law before turning full-time to music. In 1703 he joined the opera house in Hamburg, Germany, playing second violin in the orchestra. Three years later he went to Italy, rapidly attaining mastery in music and acclaimed as a genius. In 1710 he was invited to write an opera (Rinaldo) for London, and settled there permanently. Nine years later he became the musical director of the Royal Academy of Music, and in 1727, for the coronation of George II, he wrote anthems that have been sung at every British coronation since. Handel’s dramatic gifts found wider and more expressive outlets in the oratorio form, and after a stroke he wrote the Messiah and, for this work, is known throughout the world. Handel’s popularity dominated English music for nearly 150 years after his death.

3.17. William Pitt, Earl of Chatham (1708–1778)

Pitt the Elder, educated at Eton and Oxford, entered Parliament at 27 years of age and became a major figure in the British government at that time. His health was a very important factor in his effectiveness. In 1766, according to Chatterton he became “excitable, morose, a sullen melancholic with exhibitions bordering on megalomania” [48]. His disordered mind, referred to as “gout in the head,” manifested itself in capricious taste, such as desiring strange foods, shutting himself up for
weeks, and being generally intolerable. In October 1768 he had a severe attack of gout, which had plagued him since his twenties, but the gout attack seemed to drive away his mental malady. “His spasms of gout were not just a private or personal incident, but were part of a national drama” [48]. Another author similarly stated, “When he ceased to suffer from gout, he became melancholic and nearly insane; when, after many weeks, the excruciating pain returned, his mind became clear again and he was able to attend to business” [49]. His episodes of gout, at times called spasms, and the episodes of relief, characterized by strange behavior, are not evidence of epilepsy. There is no known relationship between gout and epilepsy at this time.

Pitt was very important to the English, but also to the Americans. He had selected Brigadier General John Forbes to lead an expedition against Fort Duquesne (in Pennsylvania) in his quest to secure the new American possession for the British and not the French. On November 27, 1758, Forbes wrote him about securing the fort at “Pittsburgh” (named for Pitt himself). Also, he argued strongly against war with the American colonies, proclaiming, “You cannot conquer the Americans.” Regarding the Boston Tea Party, he said, “This tumult in Boston should not be taken advantage of in order to crush the spirit of liberty among the Americans” [50].

3.18. Samuel Johnson (1709–1784)

Johnson was not a healthy infant and his survival was in question. Later, he was scarred from scrofula (cervical tuberculous lymphadenitis), suffered a loss of hearing, and was blind in one eye, mainly from contact with a tuberculous nursemaid. Once when a babysitter failed to pick him up on time from nursery school, Johnson decided he would get home on his own, crawling on all fours and protesting when he saw the babysitter following him.

Dr. Milo Keynes has vividly described other physical disorders of Samuel Johnson, including dyspepsia, emphysema, chronic bronchitis, gout, a stroke, dropsy (edema), and a “morbid melancholy” [51]. In particular the “convulsive movements and vocalizations” are of special interest.

The abnormal movements began early, and at 7 years of age his general appearance was described “as little better than that of an idiot.” The “convulsive starts and odd gesticulations” were described by friends when Johnson was only a young man; most everyone was surprised at his superb intellect and eloquence, but more so by his tics and gesticulations. These movements included grimacing, mouth opening, eye blinking, lip twitching, and shoulder, arm, and leg jerks, according to Keynes. A vivid portrait was given by friend Fanny Burney: “His mouth is continually opening and shutting, as if he were chewing something, twirling his fingers, twisting his hands, his vast body is in constant agitation . . . his feet are never a moment quiet and his whole great person looked often as if it were going to roll itself quite voluntarily from his chair to the floor” [52]. In a more detailed account by Frances Reynolds, “As for his gestures with his hands, . . . he would hold them up with some of his fingers bent . . . sometime at his breast in motion like those of a jockey in full speed . . . stretching out his arm with a full cup of tea, . . . twisting himself round with his face close to the back of his chair and finishing his cup of tea” [53]. Lord Chesterfield summarized the body of Johnson: “His figure (without being deformed) seems made to disgrace or ridicule the common structure of the human body. His legs and arms . . . are constantly employed in committing acts of hostility on the graces” [54].

Other eccentricities include involuntary vocalizations, talking to himself, moves, ejaculations, grunts, hummings, whistles, and blowing out his breath like a whale. Reynolds also noted the complex obsessional–compulsive behavior of Johnson. He had an “odd habit of always measuring his way out of a room with his feet. He would start off, step by step, until he reached the doorway. If he arrived there on the ‘wrong’ foot, he would go back and do it again until he came to the door on the ‘correct’ foot” [53]. He also had “compulsive habits of never walking on the cracks between paving stones and touching every post along the street. If he missed a post he would keep his friends waiting until he went back to touch it.”

Lord Brain believed that because these movements were not involuntary, they revealed a psychic pattern, not due to organic brain disease, and disagreed with the diagnosis of Tourette’s syndrome [55]. However, Murray [56] and Meyer and Rose [57] make a strong case for Gilles de la Tourette’s syndrome. These movements are excellent examples of “convulsory movements” that in older times may have been viewed as epilepsy, but are not related to this diagnosis and instead represent Tourette’s syndrome. Nevertheless, Samuel Johnson was one of the greatest writers of the 18th century and produced a complete edition of Shakespeare, sermons, biographies of poets, and discussions of political changes in Britain.


Rousseau was quoted as saying “I was born feeble and ill” [58]. He had a deformity of the urinary tract. This problem caused him a great deal of pain in later life, affecting his sexual activity in a way that added to his humiliation. Other authors stated, “He was an extremely sensitive child, sickly, suffering from a cruel malady that was to plague him later in life, causing frequent and painful micturition, likely hypospadias. His ill
health, originating with his nerves then reacted on his nerves again in a vicious circle” [59]. He discovered that he had every known ailment and detected with despair the symptoms of each one, falling victim to acute neurasthenia and a belief he had a tumor of the heart [59]. His urinary tract deformity led to uremic poisoning, bringing on “faintness, palpitations, dizzy fits, general exhaustion, and weakness of limbs,” finally turning him into a hypochondriac [60]. He fell victim of fever, at times coughing up blood. Crocker [59] summarized his neurotic traits as a pattern of an obsessive personality. In another book Charpenter [60] claimed that one could find him in a state of “convulsive agitation,” which so distorted his features that one could scarcely recognize him as the whole of his face was contorted in a truly horrible expression. He would spin around on his chair, fling his arms behind it, and, thus suspended, assume the oscillatory motion of a pendulum. His “dizzy fits” and “convulsive agitation” by no means constitute evidence of epilepsy.

Rousseau was a philosopher and an author, beginning life with a mother dying at birth and a father who deserted him. In Venice he was secretary to the French ambassador, later writing his famous works in response to the artificiality and corruption of the social customs of the time. His “nature gospel” of education was the inspiration for worldwide pedagogical methods. His work Social Contract emphasized that all individuals are born free and equal, and became the textbook of the French Revolution.

3.20. James Madison (1751–1836)

The fourth U.S. President, James Madison, was born in Virginia and as a young man was described as “pale and sickly” [61] or “feeble, pale, and sickly” [62]. He attended Princeton University and “overstudy and lack of exercise took such a toll of his health that five years passed before he had full recovery” [63]. He had early attacks which he considered as “epileptic breakdowns” [64]. This young scholar suffered from a functional ailment which biographer Ketcham called “epileptoid hysteria.” Madison himself referred to this problem as “a constitutional liability to sudden attacks, somewhat resembling epilepsy, and suspending intellectual function” [62]. His unwillingness to call the disorder epilepsy, his tendency to manifest the disorder usually during strain and tension, and his own inclinations toward hypochondria strengthened its cause as functional [62]. Later, Madison referred to the times of tension and strain as leading to “bilious indisposition.” Another historian, Brant stated that “His mature age at onset and the complete disappearance of them identify the illness as “epileptiform hysteria” [64]. In the final 6 years of life mental agitation brought on physical collapse [64], along with severe rheumatism and chronic “bilious fever” and anxiety. Another historian stated that in his sixties, hardly a month passed when Madison did not complain of “high fevers, diarrhea, and seizures similar to those suffered by epileptics” [65]. However, it seems clear that these attacks were psychogenic and not epileptic.

James Madison was an important part of the Constitutional Convention and has been called the “Father of the Constitution.” In addition, he helped to frame the Bill of Rights, and asked Congress to declare war in 1812 when our seamen were oppressed by the British, resulting in an upsurge of nationalism in America. In a note opened after his death, he stated, “The advice nearest to my heart and deepest in my convictions is that the Union of the States be cherished and perpetuated.”

3.21. Ludwig von Beethoven (1770–1827)

Beethoven had no episodes that could be considered seizures. The only reference to epilepsy in his life derives from his acquaintance with Bettina and Antonie Brentano, sisters, in May 1810. On March 8, 1813, Antonie gave birth to Karl Joseph, who, at 4 years of age, was diagnosed with a progressive neurologic disease, characterized by mental retardation and seizures. Some speculation that Beethoven could have been the father of the child stems from the fact that on Beethoven’s death, three letters were found that had never been sent; these letters were addressed to “My Immortal Beloved” and had been written on July 6 and 7, 1812. The evidence that Antonie von Birkenstock Bentano is the “Beloved” is that Beethoven often visited the Birkenstock mansion where she lived, often played the piano for her when she was ill, wrote an affectionate dedicatory message to her daughter on June 26, 1812, was in Prague when she was there in July 1812, stayed in the same guesthouse in Karlsbad on July 25, and traveled together with her in early August [66]. Beethoven composed the song An die Geliebte (“To the Beloved”) in December 1811 and in the corner of the manuscript in Antonie’s handwriting are the words, “Requested by me from the author on Mar 12, 1812.” Thus, although epilepsy was not part of Beethoven’s life, it was diagnosed in the son (possibly his own) of a lady who was his “Immortal Beloved.”

Beethoven was born in Bonn, Germany, on December 17, 1770. His father was a court tenor and his grandfather a Kapellmeister. As early as 4 years of age Ludwig showed great interest in music and, at 17 years of age, performed in Vienna before Mozart whose prophetic words were, “Keep your eyes on him; someday he will make a stir in the world.” He returned to Vienna 5 years later, began lessons with Haydn and so impressed King Frederick William II that the King tried to induce the young master to settle in Berlin. In 1808 Jerome Bonaparte, King of Westphalia, also sought to attach him to his own court. In 1798 his hearing began to fail and in 1819 he became totally deaf, but during
this time he wrote some of the greatest musical selections the world has ever heard. Some critics have called him the greatest composer of all times. Beethoven died in 1827.

3.22. Sir Walter Scott (1771–1832)

Scott was born in the Old Town of Edinburgh, Scotland, and was described as a “sickly boy,” placed for health reasons on his grandfather’s farm. The change in location did not prevent him from contracting polio at the age of 18 months, resulting in the permanent lameness of his right leg [67]. In 1817 he had the first of a series of “severe seizures of cramp” in the stomach [68]. These attacks turned out to be kidney stones, leaving Scott in pain sometimes for 8 hours at a time [69]. In 1830 he had more than one “paralytic seizure” [60,70], actually strokes, and during the next year he had a cerebral hemorrhage that resulted in his death the following year. It seems clear that the seizures of cramp and paralytic seizure are not epilepsy, but instead kidney stones and strokes.

Sir Walter Scott was a great novelist and poet and wrote the well-known Ivanhoe, Life of Napoleon Bonaparte (nine volumes), The Bride of Lammermoor, and many other masterpieces.

3.23. Niccolo Paganini (1784–1840)

As a solo player Paganini was the greatest violinist the world has ever known or probably will ever know [71]. He revolutionized violin techniques, created the legend of the mystical romantic violin virtuoso, and was capable of practically superhuman violin playing.

He was a sickly child of nervous and delicate constitution [72]. At 4 years of age, he suffered the first of his many debilitating illnesses, and was given up for dead. His sudden return to awareness after one attack was considered a miracle, and he later overcame these devastating attacks of pain and nausea [73]. In Rome he was compelled, because of illness, to remain silent for an entire year, and during his travels, on several occasions was nearer to death than life [74]. In Turin he played before Princess Paolini Borghese, suffered a severe attack of an intestinal illness, and was left with an emaciated appearance for the rest of his life. The loss of his teeth in 1828 made his face appear sunken, which added to his ghostlike image. At times, he collapsed at the end of a concert because of his weakened condition, and the latter phenomenon likely led to the incorrect speculation that he had epilepsy. When his son Achille, born on July 23, 1825, fell and broke his leg, Paganini held him on his lap for an entire week, becoming very ill himself with some “disease of the leg,” as good an example of probable psychosomatic reaction as can be found [73]. Paganini would arrive at a concert in a black coach, drawn by black horses, and would perform in all black clothes. These events sparked stories that he was a sorcerer in league with the devil, who stood near his elbow directing his arm and finger movements. One story was that he had been imprisoned for murdering one of his many mistresses and used her intestines as strings on his violin [75]. Actually, his absence from the concert scene was due to his living in a retreat with a titled lady in a castle in Tuscany [73].

There is good reason to believe he had Marfan’s syndrome because of his long fingers (longer than those of a medium-sized hand), the laxity of his wrist and his shoulders, and his cadaverous appearance [74]. He also had tuberculous colitis, strong emotional reactions, and syphilis from his many amorous escapades. He died on March 27, 1840, in Nice, France, from cancer of the larynx.

In summary, no author has ever mentioned any episodic symptoms that could be considered a seizure: Paganini occasionally collapsed after concerts from chronic weakness.

3.24. George Gordon, Lord Byron (1788–1824)

In 1913, Dr. Matthew Woods was a member of the National Association for the Study of Epilepsy and the Care and Treatment of Epilepsies (forerunner of the American Epilepsy Society) [76]. He may have been responsible, in part, for diagnosing Lord Byron as having had epilepsy. Woods pointed out that Byron’s mother “was subject to hurricane bursts of temper,” and a performance in Edinburgh, of the actress Mrs. Siddons “so impressed her that she went into convulsions and came near causing a panic in the house.” Also, Byron’s father was an alcoholic, and the so-called epilepsy of the poet, according to Woods, was “likely due to this alcoholism.” Dr. Woods also claimed that if either parent were intoxicated during conception, the offspring thus conceived would likely be epileptic.

Dr. Woods stated that Lord Byron “was born in convulsions” and with a club foot, and to the doctor, Lord Byron’s pictures indicated “facies epileptics,” the face of an epileptic. In boyhood, the most trivial accident provided “deprivations of sense and motion resulting in his standing still and loss of consciousness.” Also, like his mother, Byron was so moved by actor Edmund Kean in Massinger’s Sir Giles Overreach that he was “thrown into convulsions.” While watching Afieri’s Mirror, Byron was again thrown into convulsions, afterward stating, “I do not mean by that word a lady’s hysterics, but an agony of reluctant tears and a choking shudder which I do not often undergo for fiction.” Byron’s most famous writing was Childe Harold, and his friend, Hobhouse, wrote elaborate notes on his copy, including a note about “attacks of petit mal or swoons.” Byron’s
own description was “a sort of gray giddiness, then nothingness and total loss of consciousness.” Although suspicious, there is no definite evidence of seizures.

One of the most controversial attacks of Lord Byron was described by one Mr. Galt, who said that “his eyes and forehead discovered that he was agitated by strong feelings, suddenly complained of weakness of the legs, then rose, but finding himself unable to walk, he called for aid and immediately fell into a violent convolution and was placed on a bed. While the fit lasted, his face was hideously distorted but in a few minutes the convolution ceased and he began to recover his senses; his speech returned and he soon rose, apparently well.” Another witness added; “He was suffering from some nervous agitation. The fit was short and in a few minutes his speech and senses returned.” The possible psychogenic aspects of this attack are most suspicious.

In Missolonghi, Greece, he had an attack “after his first disappointment there.” A Mr. Fletcher claimed it ran its course in about 15 minutes. Later, Dr. Woods claimed “the poet had five epileptic fits in 15 days” around the time of his death in 1824. However, these so-called fits cannot be confirmed by any other biographer known to this reviewer.

These statements of Dr. Woods are now evaluated. Not only was it claimed that Byron “was born in convulsions, but the poet stated that his own daughter, Ada, whom he never saw after she was six weeks old, was born in bitterness and nurtured “in convolution” [77]. However, no evidence exists that she ever had a seizure [77]. Not only did he have an attack while watching the play Mirra, but in Bologna, he went into a “convulsion” at the theater. His companion, Countess Teresa Guiccioli, attributed the attack to his admiration of the powerful performance by Madame Pelzet, but also to a reaction to a summer of considerable emotional strain. Byron himself wrote about the attack in Missolonghi on February 15, 1824, and said, “whether epileptic, paralytic, or apoplectic—not decided by two medical men who attended me or whether it be of some other nature; it was very painful. Had it lasted a moment longer it must have extinguished my mortality.” He also said he did not foam at the mouth and the attack lasted 3 minutes. He further commented that “I have been violently agitated with more than one passion recently . . . and have also been in an anxious state” [78]. The pain in this episode was also mentioned by other authors [79], and still others commented on his “bouts of dizziness and unpleasant nervous sensations, resembling fear” [80]. Grosskurth added that the constant pressure of his circumstance was that his erratic and abstemious diet, including excessive alcohol consumption, left him totally debilitated and later he was very depressed [81]. His awareness of the pain during the “convulsion” and his extreme emotionalism surrounding the attack on February 15, 1824, and other attacks as well, would lead to a diagnosis of psychogenic attacks.

On April 15, 1824 he had a raging thirst, violent spasms of coughing, moaning, shivering, and was delirious and “the great” poet died 4 days later. No other author spoke of definite epileptic seizures at his death, which was likely due to meningo-encephalitis associated with malaria [82].

In summary, Lord Byron had a number of attacks, likely psychogenic in nature, and the evidence is insufficient for the diagnosis of epilepsy.

3.25. Percy Bysshe Shelley (1792–1822)

Shelley was born into an aristocratic family and was sent first to the famous Eton school, but his odd behavior earned him the nickname “Mad Shelley.” He later attended Oxford University, but was expelled mainly because of a pamphlet he wrote, The Necessity of Atheism. His personal health troubles began around 1812 when he started to suffer “nervous attacks” for which he took laudanum (tincture of opium). On January 19th of that year he claimed that he heard a noise, went to the door, was struck to the ground by someone, and stunned by this blow. One month later on February 26th, he claimed that an assailant attacked him, placed a knee on his body, so that later he suffered from “fits of pain” from these two attacks. One of his biographers, Holmes, mentioned that “his mental anxiety and physical discomfort of his stomach, accompanied by his minor spasms, groundless terrors, vertigo, and delirium set up nervous attacks” [83]. Shelley tried to relieve these attacks with laudanum, which then produced “morbid trains of fantasy, suspicions, and fear.” On February 22, 1815, one of his children was born, but he was too agitated and exhausted to see the infant because he had been ill for several days. Four days later he had another “spasm,” which continued for hours. Later, he was told he had abscesses in his lung. White explained these spasms: “His nerves, which nature had formed sensitive to an unexampled degree, were rendered still more susceptible by his state of health” [84]. In a bout of hypochondria, Shelley imagined for weeks that he was developing elephantiasis after sitting on a coach next to a woman with fat legs. These “fits of pain,” “nervous attacks,” and “minor spasms” are not evidence of epilepsy.

This great poet had so many tragedies in his life that “nervous attacks” would have been anticipated. At Eton, he was taunted relentlessly by schoolmates, and he was expelled from Oxford University. In 1811 he married a 16-year-old girl, Harriet Westbrook, and so his father immediately withdrew his inheritance in favor of a small annuity. The next year he had the well-known “assault” at his front door. In 1813 his young wife had two pregnancies, but, meanwhile, Shelley had fallen in love with another woman (Mary Godwin) and threa-
tended suicide when she and her father decided that she should not see him anymore. However, Mary became pregnant at the time his own wife Harriet gave birth to a son Charles. Mary then gave birth to a tiny girl who died within a few weeks, but she became pregnant again and gave birth to a son, William. Mary's sister then committed suicide as did Shelley's wife Harriet, mainly because she was pregnant from an affair with a military officer. Shelley then married Mary, who became pregnant and delivered a daughter, Clare. In 1818 he left for Italy where he became involved with another woman (Claire Clairmont), who had given birth to Lord Byron's daughter during the previous year and who then became pregnant again, likely by Shelley. The baby was sent off to foster care and died at the age of 2. During the same year, daughter Clare died in Mary's arms while Shelley tried to find a doctor. During the next year his son William died but son Percy was born. Stress took its toll on Shelley, who at 28 years of age was described by his cousin as emaciated, stooping, and with grey streaks in his hair. In that same year wife Mary became pregnant again but suffered another miscarriage, leading Shelley to have disturbing recurring nightmares and hallucinations and to consider again suicide. Shelley could not swim and on July 7, 1826, an afternoon storm sunk his boat and he drowned. So ended the tragic life of a great poet. Most of Shelley's poetry reveals his philosophy, a combination of belief in the power of human love and faith in the ultimate progress of humankind. His lyric poems are superb in their beauty, grandeur, and especially mastery of language.

3.26. Louis Hector Berlioz (1803–1869)

Hector Berlioz was born in France and experienced strong emotions even in early childhood. As a child, he would weep while listening to passages from Virgil, and later these strong emotions played a significant role in his love life. At first, his unrequited love for the Irish actress Harriet Smithson represented a problem, especially since Smithson had been told that Berlioz was an epileptic, if not actually psychotic [85]. His well-advertised romantic passion did nothing to lessen his reputation as a fundamentally eccentric and maverick talent. After Harriet Smithson rejected him and accused him of not loving her, he took an overdose of opium [86]. Later he became engaged to Marie Moke, but Moke's mother quickly married her off to a piano maker. Residing in Rome at the time, Berlioz planned to trade the idea. He then eventually married Smithson, but the relationship quickly fell apart. He frequently had a "frightful state of nervous exaltation so he could not carry on a conversation of any reasonableness." He had also stated, "Obsession is wearing me out, all my muscles twitch like a dying man, am constantly on the verge of tears, and so depressed I wished to die." He found himself increasingly subject to "fits of spleen" (irritation) overwhelmed by a terrifying feeling of total isolation. Although certain pieces of music could bring on an attack, other music also kept these attacks at bay. Music and love contributed to the high frequency of such attacks. When the "fit" came on him and a sense of isolation took hold, he had only one remedy, a walk in the countryside. Berlioz identified two kinds of "fits of spleen": one active, passionate, and malignant, and the other morose and wholly passive when he had a desire to be left alone. He claimed that his neurologic pains with an intestinal component became worse than ever with compound debilitation and demoralization and almost constant pain. His biographer, Cairns, maintained that "his pathology had a powerful psychosomatic element" [86]. Although the phrase "fits of spleen" was used, these attacks of Hector Berlioz were clearly psychogenic and were not manifestations of epilepsy.

Berlioz had a keen affection for literature and many of his compositions were inspired by famous literary works. Examples are his Damnation of Faust from Goethe's Faust, Harold in Italy from Byron's Childe Harold, and Romeo et Juliette from Shakespeare's tragedy of the same name.

3.27. Edgar Allan Poe (1809–1849)

Poe's childhood was full of sadness, especially because he never knew his father, David, an alcoholic, who left his mother, and she died when Edgar was only 2 years old. A nursemaid fed Edgar and his sister bread soaked in gin and sometimes laudanum to put them to sleep when restless. Thus, Poe's alcoholism began in infancy. The Allans of Richmond took Edgar into their home, in which slaves were a source of stories about the dead and dying. Thus, 6-year-old Edgar was once "seized with terror" [87] as he passed near a graveyard, convinced the spirits would get him. This phrase "seized with terror" by no means refers to epilepsy. As a teenager he fell in love with a young girl named Elmira, who never received Edgar's love letters as both sets of parents intercepted them. When she did not receive replies to her letters, Elmira became engaged to another man, and this caused Edgar to begin his first serious drinking at age 17 [88]. He had little resistance to alcohol and easily became violent and irrational when he had even one drink: depression followed. One drink could change him from a mild man into a quarrelsome inebriate [89]. At age 21, he was appointed to West Point, but soon was tried at a court martial for many missed drills, parades, and classes. Two years later he discovered both opium and a young lady named Mary.
Deveraux, but the affair ended because of his frightening behavior when he was under the influence of alcohol and drugs. Periods of abstinence from alcohol were periods of indulgence in opium [88]. Thus, alcohol was the curse of the Poes [90]. Two years later another disappointment occurred when his rich adoptive father died, leaving him nothing of value. Now he added laudanum to his armamentarium of drugs. In 1835 at 26 years of age, he married his 13-year-old cousin, Virginia, who later developed the then mysterious disease of consumption, driving him further into heavy drinking.

Notwithstanding the tragedies and heavy drug abuse, Edgar Allan Poe became a successful writer and poet. In 1843 he was invited to give a lecture in Washington, DC, and was to be received by the president at the White House. A few nights before his arrival, Poe was persuaded to have a few drinks at a dinner party, leading to heavier drinking. His lecture was eventually cancelled, and when he did appear at the White House he was drunk and made a fool of himself. Two years later his wife Virginia succumbed to tuberculosis. In 1847 13-year-old cousin, Virginia, who later developed the then mysterious disease of consumption, driving him further into heavy drinking.

3.28. Alfred Lord Tennyson (1809–1892)

Alfred Tennyson was the fourth of 12 children of his father George, who had to enter the ministry to make a living because his own father violated tradition by making his younger son his heir. When baby Alfred was baptized, the Rector claimed, “During three times after convulsions he was thought to be dead.” However, another authority claimed that the doctors told the Rector’s mother that the “fits” were not epilepsy. Father George, a man of violent temper, felt impoverished and with a fear of mental illness in his family, his case was made worse by excessive drinking, as was the case of brother Arthur, whose alcoholism resulted in institutionalization in 1843 for 6 months. His brother Edward had to be confined to a mental institution for most of his life and Alfred himself spent a few weeks under doctor’s care for mental problems in 1843. As one of Alfred’s brothers, George, was considered to have seizures, Tennyson was morbidly fearful of falling victim to epilepsy or insanity. However, Levi made clear that no brother had epilepsy [93].

Alfred visited a mental health sanitarium run by Dr. Matthew Allen, who persuaded Alfred to invest in a scheme that then went bankrupt. With little money, Alfred could not marry and ended his engagement to Emily Sellwood in the 1830s. Also, during that period his closest friend, Arthur Hollam, whom he had met at Trinity College, Cambridge, suddenly died. The deep depression that followed required medical treatment. Later in 1850, Tennyson married Sellwood. Alfred’s brother Charles had married Emily’s sister Louisa, but this marriage was unhappy, especially because Charles was an opium addict, which caused his wife to have a nervous collapse. Thus, Alfred Tennyson was surrounded with drug addiction and mental disorders and he developed hypochondrical tendencies. His chain smoking and a bottle of port, especially to overcome shyness, did not help his condition. Although consumption of a whole bottle in one day did not result in outward signs of drunkenness or hangovers [93]. Alfred was known to go into long-lasting trances, especially at the onset of a gout attack, but these trances were the result of stimulation of his imagination, not a confused state, and were the “clearest of the clearest” [94]. This great clarity of mentation is inconsistent with epilepsy and without further evidence of any type of seizure, Alfred cannot be said to have had epilepsy. He died in 1892 from influenza and gout [95].

Even with such despondency, Alfred Tennyson was productive and was named Poet Laureate in 1850. In 1876 he was honored with the rank of baron. His world-class poems include The Charge of the Light Brigade, Sir Galahad, The Lady of Shalott, and Ulysses.

3.29. Robert Schumann (1810–1856)

Schumann, a well-known composer, was in love with Clara Wieck in 1835, but her father did his best to separate them. They pledged themselves in 1837, but were
often apart, and as a result Schumann suffered from deep depression. They finally married in 1840. He and Clara moved to Dresden in 1844 and his deep depression continued. In 1854 he began to suffer hallucinations, attempted suicide, and entered an asylum, where he died in 1856, likely from the effects of syphilis [96]. Thus, Schumann had a history of deep depression, but not epilepsy.

Schumann studied law at first, then music, and in 1834 founded a music journal. His compositions were mainly for piano, later writing 150 songs. As a pianist/composer, he made the piano partake fully in the expression of emotion in such songs. In 1841 he turned to orchestral music, the next year to chamber music, and then to choral music, finally writing an opera in 1848. Six years before his death, he became the Musical Director of Düsseldorf.

3.30. Charles Dickens (1812–1870)

The major biographer of Dickens, John Forster, described Dickens “a very small and a very sickly child” [97]. Achroyd described him as “a very nervous and sensitive boy” [98] and Hibbert said that he was “pale and sickly” [99]. Certain episodes occurred at 12 years of age when Dickens began working at Warren’s blacking factory, labeling pots of bootblack. The episodes involved falling to the floor and the “fit lasted all afternoon. It was the harbinger of a pain in his left side which would recur at periods of anxiety throughout his life” [98]. Hot water bottles were often placed at his side to give him some relief [100]. Hibbert claimed that one day, Dickens “sat at his bench and suffered a violently painful seizure which made him roll on the floor in his agony” [99]. Kaplan claimed that these were attacks of renal colic from an inflamed kidney on his left side [101], and Johnson used the phrase “attacks of a mysterious spasm and fever from seizures of an old illness with excruciating pain” [102]. The attacks in question were, of course, renal colic, not epilepsy, as they involved long-lasting pain, which almost never occurs in epileptic attacks. Dickens also suffered from swelling of his left foot, a pain, which almost never occurs in epileptic attacks. The attacks in question were, of course, renal colic, not epilepsy, as they involved long-lasting pain, which almost never occurs in epileptic attacks.

Charles Dickens, one of the most well-known writers, was responsible for David Copperfield, Great Expectations, The Pickwick Papers, The Old Curiosity Shop, A Tale of Two Cities, Olivier Twist, and many other works.

3.31. Søren Aabye Kierkegaard (1813–1855)

Kierkegaard, considered by many as the Father of Existentialism [103], was born in Copenhagen, Denmark, as the seventh child of a wealthy businessman. His father Michael, however, was raised as a shepherd boy, and had experienced great suffering and loneliness while alone on the heath. As a child, he cursed God for all of his hardships, and at age 12 was sent to live with his uncle in Copenhagen, later succeeding as a businessman. His second wife had become pregnant by Michael while she was a servant girl, and along with his father’s curse to God, Søren considered God’s revenge, as he watched five of his six siblings die, as did his mother, before he was 25 years old [104]. His childhood was lonely [105]; he was frail, never robust, had a hunchback and uneven legs [106], and was considered unfit for the Danish Royal Guards [107]. Concerned about the divine curse on the whole family and inheriting his father’s melancholy, sense of guilt, and anxiety, he also fortunately inherited his talent for philosophical argument and creative imagination. By the age of 17, he could read Hebrew, Greek, Latin, German, and French, as well as his native Danish. A few years later he became deeply spiritual and completed the prerequisites for ordination in the Lutheran Church, but never actually was ordained. At age 27, he was engaged to Regine Olsen, but later became very upset when he had to break off the engagement. His physical condition was poor, as he had many upper respiratory infections, at times coughing up blood, and he also had a reactive digestive system. In September 1855, he was sitting on a sofa and fell to the floor. He did not lose consciousness, but experienced an overpowering sense of weakness. Especially because Søren did not lose consciousness and felt very weak, this episode cannot be considered epileptic. Days later in October he collapsed on the street, was taken to Frederiks Hospital in Copenhagen, and announced that he had spent all his money and was willing to die. He died a few days later, likely from a staphylococcal infection of the lungs at the early age of 42.

Although Kierkegaard was a frail and weak individual, worried about God’s revenge, he authored many different works of literary, philosophical, cultural, and religious criticism. Another category of his writing focused on the boundaries between different spheres of existence, such as the aesthetic and the ethical, qualifying him as the Father of Existentialism.

3.32. Hermann Ludwig Ferdinand Von Helmholtz (1821–1894)

Hermann von Helmholtz’s was born to Ferdinand Helmholtz and Caroline Penn, a relative of William Penn, founder of Pennsylvania. As a young boy, Hermann was “very delicate, almost an invalid, which restricted his activity and bed rest was necessary to conserve his strength” [108]. One editorial similarly stated that “he was a sickly child and a considerable portion of his early years was spent as an invalid” [109]. Other reports were that “as a young child he was delicate and seemed to have learned slowly” [110] and...
“for the first seven years he was a weakly boy, confined for long periods to his room and frequently in bed” [111]. However, no author has ever mentioned any spell, attack, or seizure even suggestive of the diagnosis of epilepsy.

Helmholtz studied physics at the Potsdam Gymnasium, then medicine in Berlin in 1837. During and after his service in the Prussian army he was engaged in research, leading to his ideas on conservation of kinetic energy. He published important work on physiological optics and received great acclaim for his invention of the ophthalmoscope in 1851. In Heidelberg in 1862, Helmholtz refocused his attention on musical theory and the perception of sound. Moving to Berlin, he concentrated on electrodynamics, and an accidental shipboard fall led to a concussion and a stroke in 1894, from which he died. Helmholtz devoted his whole life to revealing the unifying principles underlying nature.

3.33. Gustave Flaubert (1821–1880)

Flaubert was born in Rouen, France, to an anatomy teacher, Dr. Achille Cleophas Flaubert, and an overprotective mother, an 18-year-old orphan, Anne Caroline. He spent his childhood in delicate health and was not expected to survive; his sister, who developed tuberculosis, died when she was giving birth at 21 years of age. Two other siblings also died young. When Gustave was 3, Julie Hebert was hired as his nurse, and she found Gustave to have, at this young age, a huge emotional inner life with passionate friendships. At 9 years of age Flaubert entered the College Royal de Rouen, like a military school, and began his writing career, producing comedies on “stupid things a friend of his father says” and an obscene essay on constipation. In the next year he began a day school, and began seeing himself as superior or at least different, experiencing melancholy, restlessness, seething with desires, and dreaming of passions. At 13 years of age he wrote a review that compensated for his disgust with life’s “cruel joke,” admitting to suicidal urges at that young age. Other writings dealt with his expressed vulgar rage at mediocrity, and older friends added to this frustration by teaching him sexual cynicism. A defining moment was falling in love at 15 years of age with Elisa Schlesinger, the 26-year-old mistress of a music publisher [112]. Two years later Flaubert wrote with admiration that Rabelais and Byron were the only two authors who had written in a spirit of malice toward the human race and with the intention of laughing in its face. In 1842 he began the study of law in Paris, claiming “I can see nothing stupider than the law” and also, “How can one complain of life when there is still a brothel ... and a bottle of wine with which to lose one’s sense.” During the next year, he failed his law exams.

Women played an important role in his life, which Flaubert viewed as consisting of three eras: the first era with his love Madame Schlesinger [112] was as an active emotional life that came to an end when he was 22 [112]. The second era was defined by nervous attacks beginning at that very time.” And the third era comprised the time after the onset of these attacks. Also, after having lost his virginity at 18 to a 35-year-old Creole, Eulalie Foucaud, and stopping his visits to the brothels at which he had contracted syphilis, he had no sex for 2 years from 1843 to 1845. It was a fateful January day in 1844 in a cab on the road to Honfleur, when he stated at age 22: “Images pour out of you like a stream of blood and everything in your head is giving off at once, like 1,000 fireworks.” He fell backward in the cab onto the floor and lay there, as if dead. His brother Achille was there and later addressed Gustave as Mon Cher Cadu (“my dear ruin”), Achille did not believe his brother had an epileptic attack [113]. In a letter to a friend, Ernest Chavalier, the next month on February 1, 1844, Gustave wrote, “I had a cerebral congestion, a kind of apoplexy in miniature, accompanied by nervous symptoms which I continue to display because it’s good form to do so. I’m in a rotten state at the slightest excitement—all my nerves quiver like violin strings, my knees, my shoulders, my belly trembles like leaves. I very nearly popped off in the midst of my family with whom I had come to spend 2–3 days to recover from the horrible scenes I had witnessed at the Hamards in Paris.” These were scenes of frantic grief. He would lie on his bed shouting out, “I’m holding the reins, here comes the wagon, I can hear the bells jingling, I can see the lantern in the inn,” then make a terrible cry and have a seizure [113]. His friend, Maxine DuCamp, stated, “Suddenly without apparent cause, Gustave raised his head, became quite pale, felt the aura, that mysterious breath that crosses the face like the flight of a spirit, his expression was filled with anguish and he raised his shoulders in a gesture of heartbreaking discouragement.” He would say, “I have a flame in my eye.” In 1846 he met poetess Louise Colet, and later, when “overcome with a murderous rage,” dismissed her, called on Maxine DuCamp at 11:00 PM and had one of his attacks within 10 minutes. After the fourth day of a long journey and strenuous day on the road with DuCamp he had another attack. In a hotel with Louise Colet she said, “He begged me not to call for help with the noises in his throat, foam coming out of his mouth, the marks his nails left on my arm. He came around in 10 minutes, vomiting. However, I assured him that his attack lasted only a few seconds and that he had not foamed at the mouth. I feel profound compassion and tenderness for him. He does all he can by the way he lives to bring them on again, stays up all night, overworks, and is in a perpetual overexcitement.” Furthermore, it was a friend, Alfred LePittevin, who
The most well-known work, *Madame Bovary*, Flaubert's devotion to perfecting his literary craft became an example for many later writers.

The major question in this discussion is whether Flaubert's attacks were epileptic seizures. His early life was filled with intense emotion and despair and he even considered suicide at 15 years of age. He viewed the early third of his life as belonging to his first love, Elisa Schlesinger, and that relationship terminated at age 22 when he had his first attack. His brother Achille, present at this first attack, did not believe he had epilepsy. Believing that Gustave was dead, his brother did not describe any major movements during that attack, nor did any other witness at any other time. Every attack that was described seems to have occurred directly after an intense and sad emotional experience. Important was the testimony of Flaubert himself in letters that he was aware during these attacks, feeling that it would have been easier on him if he had been unconscious, rather than suffering through these attacks with awareness. Some of the formed hallucinations involved both visual and auditory images in a coordinated story and such hallucinations are very uncommon in epilepsy. Especially with “all of his nerves quivering like violin strings” and overexaggeration of “100,000 images cavorting about,” Flaubert likely had psychogenic attacks. Finally, the 16 years free of attacks were likely his calmest periods, and if these attacks were epileptic, his lifestyle would have brought on more seizures.

Flaubert also had intense migraines, as “not a day goes by that I don’t see . . . a burst of fireworks passing before my eyes” or a “flame in my eye.” His report of “seeing yellow as a premonition of his attacks” is also likely a manifestation of migraine, which upset this extremely agitated soul so much that it brought on his psychogenic attacks. In 1982, Gastaut and Gastaut [115] reported that Flaubert had seizures associated with a lesion in the left temporal area, but since 1982 much more information has been published on this well-known novelist to more strongly suggest psychogenic, not epileptic, attacks.

3.3.4. Leo Tolstoy (1828–1910)

Born in Russia, the fourth of five children, Tolstoy was brought up by relatives after his parents died. He studied law, but never earned a degree. Around this time his brothers took him to a brothel and for 3 years he became involved with prostitutes and alcohol [116]. The gonorrhea that resulted in 1847 was appropriately treated. After contracting heavy gambling debts, he joined an artillery regiment, fighting in the Crimean War in 1855. During the next year his brother Demitry died of tuberculosis. Four years later, founding a school, he had a relationship with a married peasant who bore him a son, and in 1862 he married another
woman, named Sonya, aged 17 years, and began their stormy marriage. His fourth son, Petya, died 18 months after his birth in 1872, and his fifth son, Nicholas, died 1 year after his birth in 1874. The third daughter was born prematurely and did not survive. In 1886 Alexis died at the age of 15, and 2 years later the last of 13 children, Ivan, was born. In 1878 Tolstoy converted to Christianity, but was excommunicated from the Russian Orthodox Church in 1901 after writing Resurrection. Tolstoy had formed a close relationship with an army officer, Chertkov, who had been exiled but returned in 1907, but Chertkov and Sonya, Leo’s wife, became bitter enemies, as Sonya and her husband continued their difficult relationship.

All of his many troubles led Tolstoy to make such statements as “I’ve been tormented by anxiety and overcome with fear, despair, and terror” [117]. For example, in 1869 he had “attacks” of anguish, would awaken and not know where he was, claiming that “a fit of spleen seized me.” From his youth he had suffered from seeing the physical and intellectual destitution of the peasants, but claimed “these fits were temporary.” In letters to his wife Sonya, there are excellent descriptions of nervous depression, claiming, “I feel physical anguish, like a fever.” In fact, an inflamed duodenum was diagnosed, and one biographer, Edwards, stated that his depression was often associated with chronic indigestion and many years of painful stomach disorders [118]. Physical disorders continued and in June 1901 he had an attack of angina pectoris and was close to death with malaria. The next year he developed pneumonia and typhoid fever, and in the years before his death, he also had phlebitis and fainting spells, likely related to his cardiac disorders. The “attacks of anguish,” “fits of spleen,” and other physical difficulties described are not evidence of epilepsy. However, on October 3, 1910, he developed a very high temperature [119] and severe chills [120]. His wife said that his left arm, leg, and face twitched, he woke up, felt better, and then collapsed on the bed, unconscious. He had five convulsions that evening, each lasting 2 to 3 minutes. On November 7, 1910, he died of pneumonia. Although the latter episodes were probably seizures, in a dying man they were likely reactive attacks, associated with a very high fever, rather than a manifestation of epilepsy with its spontaneous seizures.

Count Leo Tolstoy gave the world War and Peace and Anna Karenina and, through these two novels, is known as a great writer.

3.35. Charles Lutwidge Dodgson, Lewis Carroll (1832–1898)

The famous author of Alice’s Adventures in Wonderland and Through the Looking Glass was the first-born male in a family of 14. After Rugby School and Christ Church College, Oxford University, he became a mathematics teacher, and later was ordained as a deacon, but never preached because of a stammer. Carroll was known to have migraines and also was involved with cocaine, cannabis, and opium, all of which, some believe, provided the stimulus for his comic fantasies. The only reference to epilepsy among nine biographies was one that claimed that in 1872 Carroll had witnessed a man on the street in an “epileptic fit” and was inspired to buy some bones and an anatomy book [121]. Only one biography describes some type of attack of Carroll [122]. On January 20, 1886, Lewis Carroll wrote: “On the morn of the New Year I had an attack, which left me with a sort of headache and not feeling my usual self for a week or 10 days. It seems to have been but a mild attack. I must have fainted, just at the end of morning chapel, as I found myself, an hour afterwards, lying on the floor of the stalls and had probably struck my nose against the hassock, as it had been bleeding considerably. It is, of course, possible it may have been epileptic and not fainting, but Dr. Brooks thinks the latter.” In six days he was not free of his headache and the doctor was not so certain about it being a fainting attack. The fact that the attack was on New Year’s day argues strongly that withdrawal from drugs taken on New Year’s Eve may well have been involved, especially because of his known drug involvement and because such attacks usually occur the day after ingestion of the drug [123]. The longlasting headache that Dr. Brooks thought might change the diagnosis to epilepsy is very rare with real epileptic seizures, as postictal headaches usually (81%) last less than 6 hours and only a few (8%) last more than 24 hours [124]. His history of migraine and drug use may well explain this one attack, including the longlasting headache. His brother Skeffington was reported to have had an epileptic attack on June 23, 1881 [122], and, if true, would at least establish that a sibling had a seizure, but the diagnosis of migraine and drug withdrawal remains most likely in the case of Lewis Carroll.

Alice in Wonderland is as well known to English-speaking children and adults as any other work, and for this masterpiece alone Carroll is highly honored.

3.36. Alfred Nobel (1833–1896)

In the first years of his life Alfred Nobel nearly shared the fate of five of his brothers and sisters who died as small children. His own childhood was marked by illness, physical weakness, and deprivation, and only because of a devoted mother did he survive his early years. At 18 years of age Nobel wrote an autobiographical poem that included, “My cradle looked like a death-bed … I scarce could muster strength to drain the breast, and the convulsions that followed, till I gasped...”
upon the brink of nothingness” [125]. Although the etiology of these episodes is uncertain, they probably were febrile seizures in infancy, especially because they were never mentioned by any biographer [126–128]. Pauli described him as a “weak, sickly child and illness dogged him in childhood, adolescence, and maturity” [127]. A weak spine forced him to lie on a couch for days and he often suffered from headaches, arthritis pains, and cardiac spasms. Some doctors said he also had rheumatic gout and others called it gouty rheumatism [126]. Toward the end of his life he was diagnosed with advanced calcification of the aorta. Alfred Nobel had a stroke on December 7 and died on December 10, 1896.

Alfred Nobel played a major role in previous, but also present society. Early in his career he began experimenting with explosives and built a factory to manufacture the newly discovered liquid compound nitroglycerin. Finding a safe way to control the explosive’s detonation, he invented the blasting cap in 1865, and 2 years later his second important invention was dynamite. It is perhaps an irony that in 1890 Nobel’s physicians recommended that nitroglycerin be used as a remedy for his own angina, but he declined it. Besides explosives, Nobel was responsible for many other inventions, registering more than 350 patents in various countries. Today he is best known for the Nobel prizes, as he left the bulk of his great fortune in a trust to establish what came to be the most highly regarded of all international awards.

3.37. William Morris (1834–1896)

William Morris’ childhood was at first happy because he was spoiled by everyone in his household, but later he became temperamental and remained so throughout his life. For example, he would throw his dinner out of the window if he did not approve of the manner in which it had been prepared. Those rages were of concern to him. He was interested in all things medieval, and his doting father actually bought him a pony and a miniature suit of armor so he could pretend to fight a battle in the depths of nearby Epping Forest. In 1853 he entered Exeter College, Oxford University, and met Edward Burne-Jones, who would become a business partner in artistic design, along with Dante Gabriel Rossetti. Morris married Jane Burden, one of Rossetti’s models, but Rossetti then had a long affair with Morris’ wife. Two daughters, Jenny and May, were born to Morris and his wife. May became the leading weaver in England, but May was diagnosed with epilepsy. Because of his daughter’s diagnosis, Morris wondered if some of his “rages” were a sign of epilepsy. Thus, the evidence is insufficient to diagnose epilepsy in William Morris.

Morris became one of the most brilliant and innovative progenitors of modern graphic design and can be considered the principal founder of the British Arts and Crafts Movement. In 1877 he founded the Society for the Protection of Ancient Buildings, the forerunner of the British National Trust. In 1890 he founded Kelmscott Press and translated large numbers of medieval and classical works. After the death of Tennyson 2 years later, he was offered the Poet Laureateship, but declined this honor. He died in 1896 from “having done more work than most ten men” [129].

3.38. Algernon Charles Swinburne (1837–1909)

Swinburne was born in London in to an aristocratic family; his father became an admiral in the British Navy and his maternal grandfather was Earl of Ashburnham. His mother and father were actually second cousins. One medical biographer has concluded that he had anoxic brain damage at birth, based, in part, on a statement by Swinburne that he “all but died, certainly not expected to live an hour” [130]. Other evidence was his hyperkinetic behavior, as exemplified by a comment from a relative: “He was restless beyond words, hopping about the room unceasingly.” Also, his choreiform movements and tics were well described by another biographer: “He was impulsive with nervous mannerisms, drawing down his shoulders stiffly, giving quick vibrating jerks with his hands, or suddenly kicking his legs or twisting his feet in excitement when sitting down” [131]. One physician explained the movements as a “sign of an excess of electric vitality.” He had a large head for a small body of 5 ft 4 in; the high cranial vault may have been a sign of arrested hydrocephalus. Swinburne had very bad handwriting at first, possibly a sign of poor motor coordination, and often covered up one eye when reading, an indication of a visual disturbance. He did not fare well at the Eton school, often beaten with birch branches for misbehavior and for unknown reasons was sent down (expelled) from Oxford University. The writer (not actor) Richard Burton, introduced him to brandy in the early 1860s and this became his favorite drink. In 1865, at the age of 28, alcoholism became a major problem and he could not stop drinking. He was described the next year as a drunkard, wild drunk, dead drunk, “having violently bilious attacks, fainting fits, and diarrhea.” At that time Swinburne considered himself a hopeless drunk [131]. The family said the fits were the result of epilepsy, but as the medical biographer stated: “This was a euphemism to conceal his alcoholism” [130]. Heavy drinking preceded the occasions when he lost consciousness. One editorial stated: “Swinburne indulged in vast quantities of brandy, which brought on epileptiform seizures” [132]. Even a small amount of brandy converted him into a drunk. Further evidence in favor of alcohol withdrawal attacks, rather than epilepsy, is that the attacks stopped
Tchaikovsky was the second of six surviving children of his father, Ilya, a manager of the Kamsko-Votinsk metal works in Russia and his mother, Alexandra Andreyevna Assier. Her father was Andrey and her grandfather was Marquis Michel d’Assié, said to have had a nervous disorder that resembled epilepsy or “a tendency to epilepsy” [133], possibly related to Peter’s nervous tendencies. Peter’s mother married her husband (after his first wife died) in 1833 when she was 20 years of age, 18 years younger than her husband, and was described as “a nervous epileptic,” but, like her granddaughter, without clear evidence of seizures. Peter seemed to have inherited “the tendency to real or imagined illness, fits of hysteria, and deep depression.” As a youngster he was very sensitive; the slightest scolding would reduce him to a flood of tears. Warrick claimed he was “prone to the nervous attacks that had beset him all of his life and had once come near to causing a total breakdown” [133]. Although he loved his mother dearly, she was cold, distant, and self-absorbed, concerned about her position in Votinsk society, hated the small town, and wanted to return to St. Petersburg. In 1843, inspired by her love of French culture, she hired a French governess, Fanny Dürback, to assist Peter in his education. As a 22-year-old French Protestant, she was cold, distant, and self-absorbed, adding to his poor health, but he was equally famous as a poet and a critic, savagely attacking the Roman Catholic Church and celebrating Orsini, the Italian patriot who tried to assassinate Napoleon III in 1858. His criticism was perceptive, but suffered from excessive praise of the things he liked and vituperative attacks on the things he did not like. Swinburne died in 1909 of influenza.

3.39. Pyotr (Peter) Ilyich Tchaikovsky (1840–1893)

At age 19 Peter graduated from the School of Jurisprudence. His job in the Ministry of Justice was hardly interesting enough to prevent his increasing absorption with music. He was so focused on music that once he absentmindedly tore pieces from an official document, munching at them steadily, and, recovered his senses only to find that he had consumed the whole document. Although one could try to make a case for a complex partial seizure, this likely is the closest episode to any type of attack and is not sufficient evidence of epilepsy. At 22 years of age he entered the St. Petersburg Conservatory of Music, graduated in 1866, and then began his serious compositions. Ten years later Nadezhda von Meck, widow of a wealthy industrialist, commissioned Tchaikovsky to compose chamber music, continued to support him for 14 years, after 1100 letters (!), but never met him.

In 1877 he married one of his students (Antonina Milyukova). He felt trapped by the relationship, especially because she was a nymphomaniac and he was basically a homosexual, and attempted suicide by wading into the frigid waters of the Moscow River. Two years before, he had an unsuccessful love affair with the prima donna of an Italian opera company, Désirée Artôt. Even the happy summers spent at his sister’s house were spoiled by an overwhelming sense of guilt when he fell in love with her son, young nephew “Bob” (Vladimir) Davydov. Later, he had a sexual affair with a male member of the royal family, and many scholars believe that a small group of individuals convinced him that he must commit suicide and he did so in 1893, either by drinking tap water known to be laced with cholera or by drinking poison.

Bowen and von Meck [134] have described Tchaikovsky’s last hours before death [134]. Von Meck was the widow of Vladimir von Meck, favorite grandson of Nadezhda, who financially supported Peter for 14 years. Their claim was that the composer was “very ill with possible cholera and stiffened in his first convulsion. During the night his suffering increased and the convulsions were followed by helpless weakness before he died.” Convulsions just hours before death, from either poison or cholera, do not establish an epilepsy. New data show that injecting cholera toxin into a rat hippocampus induces a chronic epileptic focus [135], with the main action on G-proteins and second messenger systems, rather than on synaptic transmission [136]. However, seizures from cholera hours before death do not establish epilepsy.

Peter Tchaikovsky was certainly the greatest master of classical ballet, and produced outstanding symphonies, great operas like Eugene Onegin and The Queen of Spades, and was truly a great composer. He did not, however, have epilepsy and none of four well-known biographies [137–140] mention the possibility of epilepsy.

when his legal advisor and companion, Theodore Watts-Dunton, persuaded him to stop drinking in 1879.

Swinburne possessed a curious combination of frail health and strength, publishing more than 35 books, 14 volumes of poetry, and more than 12 volumes of criticism. His clear masochistic tendencies—he admired Marquis de Sade—added to his poor health, but he was equally famous as a poet and a critic, savagely attacking the Roman Catholic Church and celebrating Orsini, the Italian patriot who tried to assassinate Napoleon III in 1858. His criticism was perceptive, but suffered from excessive praise of the things he liked and vituperative attacks on the things he did not like. Swinburne died in 1909 of influenza.

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3.40. Henri-René-Albert Guy de Maupassant (1850–1893)

This French author was born in Dieppe, France, from noble paternal ancestors and a maternal grandfather who was godfather of the famous writer Gustave Flaubert. After his parents separated when he was 11 years old, he grew up in Normandy, but continued to live with his devoted mother. He entered a seminary but managed to have himself expelled, which led to a marked hostility toward religion. When the Franco-Prussian War broke out, he volunteered and fought gallantly. After the war, he went to Paris as a clerk in the Navy Department. Gustave Flaubert took him under his protection and acted as a literary guide, introducing him to other writers, like Emile Zola and Alexandre Dumas. He began to write successfully, but spent much of his free time in pursuit of women and, from his twenties, suffered from syphilis, which led to a degenerative mental disorder. Guy de Maupassant had severe headaches, which he called migraines, that may have been related to syphilis, and as a painkiller he inhaled ether, which had a relaxing and hallucinatory effect [141]. In addition, he had severe gastrointestinal distress, especially in 1889, and his progressive mental confusion resulted in attempted suicide in 1892. He was committed to a private asylum at that time and died the next year.

This reviewer can find no references to any form of epilepsy in Guy de Maupassant, despite his use of hallucinatory ether and also because seizures are very uncommon in syphilis [142].

Guy de Maupassant was considered a great writer of short stories, novels, and especially horror fiction. His nightmarish stories are reminiscent of those of Edgar Allan Poe or Stephen King’s *The Shining*. Maupassant’s most upsetting horror story, *Le Horla*, was about madness and suicide, and the protagonist was likely a syphilitic, similar to the author.


Agatha Christie, the Queen of the Golden Age of Novels, was born to a well-to-do family in Devon, England, but never attended school and was taught by a governess. To express her feelings she turned to music and later to writing. At age 24 she married Archie Christie, handsome World War I fighter pilot and war hero. In November 1926 her mother, to whom she had been close, died, and, more importantly, 1 month later her husband Archie was found to be having an affair with a young woman named Nancy Neele. On Friday, December 3, 1926, Archie had gone to spend a weekend with Nancy and at 9:40 PM that night Agatha announced that she was going out for a drive [143]. The next day, her car was found abandoned several miles away with some of her clothes and identification scattered around inside. Speculation was that either Agatha had committed suicide, and a nearby lake, called the Silent Pool, was dredged, or that her husband had murdered her. She had written several letters to her husband before vanishing and also one to her brother-in-law, indicating that she was going on a vacation in Yorkshire. As many as 15,000 volunteers searched for her in the surrounding countryside. In fact, she had gone to Yorkshire to a health spa in Harrogate and signed in on the morning of Saturday, December 4th, under the same last name as her husband’s lover, Neele. The family went into seclusion with several doctors and put out the story that Agatha had suffered amnesia, bought on by the grief over her mother’s death. Virtually no one believed this story, and, even if true, it would not be evidence of epilepsy. Only in the past 6 years has a book written by Jared Cade [144] spelled out the truth after careful consultation with Mrs. Judith Gardner, whose family helped Agatha plan and plot her disappearance. This plan was designed to humiliate her unfaithful husband, but it backfired and she was too ashamed that her private revenge had become public property. She later found temporary happiness after a divorce from Archie with her marriage in 1930 to Professor Max Mallowan, a young archeologist, 16 years her junior and a fellow of All Souls College at Oxford University. Unfortunately, she later found that her second husband had had a long-standing relationship with his assistant, Barbara Parker, but she could not bring herself to a second divorce. It seems coincidental that Agatha’s only daughter, Rosalind, had a son, Matthew Prichard who wanted to meet his grandfather, Archie Christie, and on the day they agreed to meet, Archie collapsed and died a few days later.

Some of the greatest mysteries were written by Dame Agatha Christie; they include *Murder on the Orient Express*, *Witness for the Prosecution*, *Lord Edgware Dies*, and 63 other fascinating novels.

3.42. Truman (Streeckfus Persons) Capote (1924–1984)

Truman was the son of Arch Persons, a clerk for a steamboat company, and a 16-year-old beauty queen, Lillie Mae Faulk. The unhappy marriage disintegrated when Truman was 4 years old and he was brought up in Alabama by elderly relatives. When his mother remarried later and committed suicide, Truman moved to New York and adopted his stepfather’s surname, Capote. After two schools in New York and public schools in Greenwich, Connecticut, he ended his formal schooling at age 17. He found work at *The New Yorker* magazine, attracting attention with all of his eccentricities, his small 5 ft, 4 in stature, his writing, and, later, his work in the theater and films. Soon his long-simmering problems with alcohol and drugs grew into addictions and his general health deteriorated; he also suffered from
tic dolores [145]. In addition, he had serious disputes with other writers. On August 1, 1981, Capote had a convulsion and was taken to Southampton Hospital; a second attack occurred in September that landed him in New York Hospital for 6 days. He had “pointedly disregarded the admonitions of his doctors, who blamed the attacks on alcohol” [146]. Capote continued to drink, and on June 3, 1984, a Dr. McCormick picked him up to take him to Pennsylvania, but the shaking was so intense the doctor had to buy him a pint of vodka to avoid another withdrawal seizure. Thus, Capote did not have epilepsy, but did have alcohol withdrawal seizures.

Truman Capote was a successful writer, and became very well known for his book In Cold Blood, which was universally praised.


Richard Walter Jenkins was one of 13 children born in Pontrhydyfen, Wales, to mother Edith and coal miner father Dic. This group was a small army as much as a large family. In a very detailed biography by Bragg Richard is quoted, “We were very poor,” a problem made worse, because father Dic was a man with “hollow legs” [148], was a huge drinker, a “twelve pints a day man, often away for nights on end and incapable of passing a pub.” It is quite likely that Richard inherited his alcoholism from his father. In his teens Richard spent much of his time in the pubs, drinking great quantities of beer, especially after rugby matches in which he was the star. As Brady indicated, “He drank most of all to align himself with the legendary drinking miners” [147]. At 19 years of age at Exeter College, Oxford University, he was known as “Beer Burton” [148], consuming two pints in only 10 seconds.

Richard needed guidance and a mentor and a drama teacher named Philip Burton needed a pupil with great dramatic talent. Thus, Richard Jenkins became Richard Burton out of the deep respect he had for his mentor, who remained a close friend throughout his whole career. Even in the second decade of his life Richard began to drink enormous quantities of alcohol and had at that time a few seizures. He had been told he had “an occasional tendency to epilepsy,” first appearing around 20 years of age. However, it becomes clear that the proper diagnosis was not epilepsy, but alcohol withdrawal seizures. As stated by Bragg, “He had been found shaking uncontrollably in the wings (of the theater), given a couple of brandies, and sent on. Drink had only been the fatal cure. Alcohol had been the best medicine at hand” [147]. Thus, if epilepsy had been the appropriate diagnosis, alcohol would have exacerbated the problem, but temporarily “cured” the problem of alcohol withdrawal attacks. Richard Burton consumed great quantities of alcohol throughout his career. He would often drain three bottles of vodka in an afternoon. A year before he died in 1983 during the filming of Wagner, in which he played the title role of the great composer, he had to be hospitalized twice “when he felt it coming on.” He had given up drinking earlier but during Wagner he started to “drink now and then,” circumstances under which alcohol withdrawal seizures do occur.

At Exeter College, Oxford, the don of Drama, Professor Nevill Coghill, described Richard as a “genius,” Sir John Gielgud, actor and director, said, “I had never to tell him anything except to stop your yawning when it was lunchtime.” And drama critic Harold Hobson said, “He brought his own cathedral on with him.” Clearly, Richard Burton was a great actor.

4. Discussion

These 43 famous historical figures were said to have had epilepsy, but actually did not. Not only does this article serve to correct the misdiagnoses that have found their way into many important books on epilepsy, like those of Lennox [149] and Engel [150], and, especially, on the Internet, where a list of 73 well-known individuals can be found. The majority of these famous persons did not have epilepsy. As Dr. Peter Fenwick has stated, “It is likely that the earlier accounts of temporal lobe epilepsy and temporal lobe pathology and the relationship to mystic and religious states owe more to the enthusiasm of their authors than to the true scientific understanding of the nature of temporal lobe functioning” [151]. Our list can serve an important purpose other than correcting history, that is, specifying the numerous reasons why so many patients with various afflictions are incorrectly diagnosed with epilepsy and even prescribed antiepileptic drugs. The following list, arranged chronologically by birth, reminds us of the many different episodic symptoms that were incorrectly considered epileptic.

1. Pythagorus (582 BC) No episodes of any type
2. Aristotle (384 BC) No episodes of any type
3. Hannibal (247 BC) Pain
4. Alfred the Great (849) Imaginary visions of self fainting
5. Dante (1265) Religious auditory and visual hallucinations
6. Joan of Arc (1412) Angst and spasm of “furious sensibility”
7. Leonardo da Vinci (1452) Heat syncope
8. Michelangelo (1475) Nervous intensity with tears
9. Cardinal Richelieu (1585) Violence, moodiness, and many intense fears
10. Louis XIII of France (1601)
In summary, the most common symptoms leading to the misdiagnosis of epilepsy were anxiety or psychogenic attacks (11), alcohol withdrawal seizures (5), and pain (3). In two cases each, hallucinations, coughing, gout, weakness, and family history accounted for the misdiagnosis. In only one instance each were religious visions, heat syncope, and breath holding. Menière’s disease, cerebrovascular accident, Tourette’s syndrome, febrile attacks, kidney stones, amnesia, and near-death episodes mentioned. In four cases, no episodic symptoms at all could be found. If these historical data could be applied to present-day practice, it would be anticipated that more than one-fourth of patients with a misdiagnosis of epilepsy have a psychogenic etiology and nearly one in eight have alcohol withdrawal attacks. Although conditions today are very different compared with the many eras sampled in this review, the reported 20–30% of epileptologists who do not correctly differentiate psychogenic from epileptic disorders [150] is similar to our 26% today. The 12% of incorrect diagnoses from alcohol withdrawal attacks in this report is similar to the 10% of the adult population who, in the 1950s admitted consuming large amounts of alcohol [149].

An unexpected finding among our 43 famous people without epilepsy is that 40% of them had severe health problems as an infant or small child. Chronologically according to birth, these are Alfred the Great, Pascal, Newton, William of Orange, Swift, Johnson, Rousseau, Madison, Scott, Paganini, Tennyson, Dickens, Kierkegaard, Helmholtz, Flaubert, Nobel, and Swinburne. In some instances these physical problems required them to remain confined to their rooms, where they followed intellectual pursuits. In other instances they may have overcompensated to overcome their infirmity.

There are some important positive lessons to be learned from this study with respect to the requirements for the proper diagnosis of epilepsy. Essentially all epileptic attacks should involve some change in awareness on the part of the patient, with the exception of simple partial seizures, which are relatively rare, occurring in as little as 4% of adults with epilepsy [152], at times involving a progressive lesion [152]. In the present group there were many instances in which the individual admitted awareness, while many different movements or symptoms were present. The length of the attack was often an important clue that the attack was psychogenic and not epileptic; most complex partial or generalized tonic–clonic seizures are only 1 to 2 minutes long, whereas most psychogenic attacks are longer than 5 minutes, persisting at times for hours [153]. Attacks of pain were described, especially in this group of highly sensitive and talented individuals, but the word pain cannot even be found in the index to a large comprehensive textbook of epilepsy [154]. The description by either the individuals who had the attack or their biographers...
often contained the word fit—“fit of pain,” “anxiety fit,” “fit of spleen”—improper conclusions were then drawn to diagnose epilepsy.

References


