



Margiad Evans (1909–1958): A history of epilepsy in a creative writer

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ARTICLE INFO

Article history:

Received 2 October 2009

Accepted 6 October 2009

Available online 2 November 2009

Keywords:

Cognition

Margiad Evans

Pregnancy

Seizures

Writer

Famous person

ABSTRACT

The author Margiad Evans (1909–1958), a celebrated Anglo-Welsh writer of the 1930s and 1940s, developed epilepsy in 1950, and subsequently wrote accounts of her experiences of seizures, their diagnosis, and their management. These documents are among the first patient accounts of epilepsy, and remain of value today, not least because they prefigure ongoing problems in epilepsy management such as pregnancy and the adverse effects of antiepileptic drugs. They also give some insights into the consequences of epilepsy for a creative writer.

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1. Introduction

Margiad Evans was the pseudonym of Peggy Eileen Whistler (1909–1958), the author of a series of acclaimed novels in the 1930s and 1940s, such as *Country Dance* (1932), *The Wooden Doctor* (1933), *Turf or Stone* (1934), *Creed* (1936), and *Autobiography* (1943), as well as short stories, poems, reviews, and radio broadcasts up to the 1950s. Although perhaps little known today, contemporary critics compared her with writers such as James Joyce and T.S. Eliot [1–3].

In 1950, in her early forties, Margiad Evans developed epilepsy. She subsequently wrote an account of her experiences, published as *A Ray of Darkness* in 1952, and left other material unpublished (*The Nightingale Silenced*) at the time of her death in 1958. These writings provide an early patient perspective on the diagnosis, management, treatment, and complications of epilepsy, with a wealth of subjective detail. She was attended in her illness by two well-known physicians with an interest in epilepsy, Dr Frederick Golla (1878–1968) at the Burden Neurological Institute, Bristol, UK, and subsequently Dr. William G. Lennox (1884–1960) at the National Hospital for Nervous Diseases (as it then was), Queen Square, London, UK. Golla acknowledged *A Ray of Darkness* to be “a work of very great psychological importance” (*John Bull Magazine*, 18 October 1952, p. 8), and Lennox incorporated material from it in his two-volume textbook on epilepsy, as well as a personal tribute to Margiad Evans [4].

Although the subject of ongoing literary criticism [1–3], Margiad Evans's works on epilepsy have hitherto attracted only passing interest from neurologists [5,6], even though *The Nightingale*

Silenced was addressed specifically to medical professionals, motivated by “the desire to put into physician's [sic] hands ... clues to the feelings of such a sufferer as myself.” The purpose of this article is to summarize Margiad Evans's writings on epilepsy, and to pose the question as to whether her illness had any effects, beneficial or detrimental, on her abilities as a creative artist.

2. Methods

Margiad Evans's book *A Ray of Darkness* [7] and the unpublished manuscript of *The Nightingale Silenced* were qualitatively examined for all personal references to epilepsy and epileptic seizures. From these an account was developed of the onset, diagnosis, management, and complications of Margiad Evans's seizure disorder, as well as her subjective responses to epilepsy. An attempt was also made to judge the impact of the seizure disorder on her output as a creative writer.

3. Results

3.1. *A Ray of Darkness*

Margiad Evans's first major seizure occurred on the evening of 11 May 1950 while she was alone in her cottage, the Black House, in the village of Elkstone in Gloucestershire:

[I] looked up at the clock ... saw that it was ten minutes past eleven. The next thing I was still looking up at the clock and the hands stood at five and twenty minutes past midnight. I had fallen through Time, Continuity and Being.

...

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I felt a cold dampness and it came on me stunningly, terrifyingly, that my clothes were wet. My urine had escaped me then. Horrifyingly, in one moment, I realized the incredible, impossible, and ghastly truth—I had neither fainted nor been asleep: I had had an epileptic fit! ... A horrible, perhaps incurable illness lay before me.

In the immediate aftermath, recalled later, her brain “worked ... like an engine misfiring and unsteered.” The seizure “was total blackness, a hole in the self” and a “separation from the will.”

Relatives later suggested that her attack was simply a faint, but in her rebuttal of this Margiad showed a clear ability to differentiate her symptoms from those of syncope:

I had been close enough to it to be absolutely sure that one did not faint as I had fallen. There was a sinking away, a sick feeling, and a remembrance of it afterwards.

On 12 May 1950, the day following the seizure, Margiad was seen by her general practitioner, who prescribed Luminal (phenobarbital) and arranged a referral to “Professor T ... a man of international reputation” at the “Neurological Institute outside Clystowe,” in fact Professor Golla at the Burden Neurological Institute, then located outside Bristol. The published history of *The Burden* notes that “Golla’s reputation and interest in the subject [epilepsy] and the availability of brain recordings [EEG] attracted a great number of referrals” [8]. Golla saw Margiad on 8 June 1950, and following an EEG he confirmed the diagnosis of epilepsy, which he thought might be due to “a slight scar on the brain from an old injury.” Margiad’s response to this diagnosis was unsparing:

I walked out of the Institute as a person harbouring epilepsy, it was true, but free of false hopes and quite clearly defined as myself.

Further seizures prompted the addition of Epanutin (phenytoin) to the Luminal.

Two additional problems soon became apparent. After commencing the Luminal, Margiad noted that “I was never so tired in my life,” but by 29 September 1950 she reported that she was “4 months gone with child”:

Epilepsy and pregnancy. The shock of waking every morning to such a grim problem of life.

Concerns that the epilepsy might be hereditary, although there was no family history, were finally overcome by the general practitioner, who called on Margiad at home to read:

a passage from *Nervous Diseases* by the Professor of Neurology at London University, which he said was the last and most up-to-date work on epilepsy.
... there was in reality only the very slightest danger of its being hereditary.

Her baby daughter was born uneventfully, but after a postpartum fit “I was never again able to feed my child.”

The second problem concerned the adverse effects of the anti-epileptic medications:

[S]ince taking drugs I cannot keep awake for those free quiet hours which were my most creative. True my power of concentration is lost also.

...

[T]he drugs I have to take to prevent the discharges of the epilepsy make me apathetic, have faded and dulled and dimmed the powers of imagination and concentration.

Nonetheless, Margiad was able to write *A Ray of Darkness*, as well as a radio broadcast on epilepsy entitled “A Silver Lining,” which was transmitted on the BBC Radio Light Programme (19

March 1953) and in which she attempted to explain what happened in an epileptic fit and urged a more positive response to epilepsy.

3.2. *The Nightingale Silenced*

In *The Nightingale Silenced*, probably dating from 1954–1955, Margiad Evans states “I was my own witness,” but her attempts to analyze her symptoms in greater depth proved difficult, “for though the evil thing called epilepsy exists, language for its extremely tenuous phenomena is difficult to find.” Her recognition of this difficulty, perhaps true for all patient accounts of subjective phenomena, is stated almost at the outset of the manuscript: “My task is to be the very difficult one of giving an outside inside story.” Nonetheless, reading the manuscript wearing one’s neurological spectacles, it is evident that her seizures manifested both motor and psychic phenomena, of which the latter were considerably more distressing.

Some “convulsions were confined to mental sensations only,” in which fear was the predominant and overriding feeling:

An appalling terror amounting to panic seemed to emanate from every piece of furniture, every book, every saucepan. These things might have been dangerous animals, only I knew that they did not want my body: it was my mind they wanted to destroy.

...

I was ... incapable of controlling the sudden panic ... every object became impregnated with terror. ... The term “restless horror” is nearer to an approximation of the utterly evil, utterly causeless, panic I was in... There was not the slightest outward sign of an epileptic state ... except this causeless fear and a certain blurring of the consciousness as though the brain had been wiped over with a dirty wet rag.

There are more descriptions along these lines (“panic without cause”), but “As soon as the attacks began to subside the panic disappeared.” Reflecting on her seizures, Margiad states that “could fear ... be wiped away, the seizures would not matter very much.”

Some attacks were also accompanied by motor phenomena, always affecting the left side of the body: there was a “strange stiffening of the left side of my body,” and after a severe fit “I was very slightly paralysed in the left side and hand.” Speech difficulty was also noted on occasion: “I was silent ... for nearly two minutes.” Of particular note to a writer, she could not write during attacks: “to continue to write is impossible even though I am right handed and the right hand is not usually disabled.” Possible autonomic features are also mentioned: “it was as though a ghost walked through me chilling every chamber of my body.” “I feel as if the hair on my head was whitening ... and my body withering.”

Her mental response to the antiepileptic drug therapy was equivocal: at one point she is “grateful for the treatment” but at others “cannot work against drugs.” Mysoline (primidone) was used in addition to Luminal and Epanutin for a period when “my left arm would shoot into the air every three to five minutes.” She even reflects that:

[A]lthough I should perhaps have died mentally last summer without ... these drugs, it is better to die than to continue so wearily, dulled, blunted, stricken.

4. Discussion

Margiad Evans’ accounts of her epilepsy dating from the 1950s prefigure some of the current challenges in epilepsy management today, such as epilepsy and pregnancy [9] and the cognitive effects

of antiepileptic drugs [10]. These accounts also challenge skills of clinical localization in the era before structural brain imaging: although the motor phenomena are clearly lateralizing, the psychic phenomena of ictal fear are less so [11]. In his textbook, Lennox states of Margiad Evans: “a gliomatous brain tumour . . . lay behind both seizures and, after a dozen years [sic, in fact eight], death. The temporal lobe was not involved” [4]. The exploratory surgical intervention that allowed this diagnosis left Margiad Evans partially paralyzed down her left side (Michael Williams, personal communication, 5 June 2009).

Another question of topical interest concerns the impact of neurological disease on creative faculties [12]. What effect, if any, did the epilepsy have on Margiad Evans as a creative writer? Golla thought this was positive: “where writers of genius have been sufferers [of epilepsy], it is fascinating to trace how greatly their sensibility and creative activity have been enhanced by the liability of their nervous system to respond as a whole. . . the expression of her total personality has been facilitated by the malady” (*John Bull Magazine*, 18 October 1952, p. 8). Golla may have had Fyodor Dostoevsky (1821–1881) in mind when writing this. According to *A Ray of Darkness*, Golla suggested to Margiad Evans that she read the works of Dostoevsky, presumably because he was another author with epilepsy, who had managed to incorporate his knowledge of epilepsy into several of his novels [13–15]. Evans apparently declined Golla’s suggestion, at least initially, although Dostoevsky is mentioned in both *A Ray of Darkness* and *The Nightingale Silenced*. In the latter he is described as “the greatest descriptive writer of epilepsy.” Of her own writing, Evans mentions “an older incomplete fragment of a novel about an epileptic man.”

At times, Evans herself seems to concur with the possibility that epilepsy facilitated creativity in her own work: she speaks of writing “many poems in the hospital ward” not to mention “hundreds of letters.” “In my writing . . . words and phrases began to race over the pages without stopping,” although she notes a “fatal voluminousness” in her output. She speaks of a “quickness of mind” and of an “intuitive imagination” as an attribute of “horror-stricken sufferers.” Moreover, epilepsy as a sign of “otherness” may have been a stimulus to her writing, as much as acknowledged factors such as nationality and gender.

On the other hand, Evans admitted that if the “cloud of epilepsy” affects poetry favorably, then its effect on prose was adverse. Empirically, she published no books after *A Ray of Darkness*, and despite the “many poems” written, she states that “the only poem I wrote in the hospital I really liked I lost,” possibly the one entitled *Cassandra Desolated*. A projected work on Emily Brontë, an author in whom Margiad Evans had a long-standing interest, was abandoned. In part this reduced output might be attributed to the self-acknowledged adverse effects of her drug therapy, and possibly also to the accelerated forgetting which may be a feature of epilepsy [16], or to the progressive nature of her brain tumor.

Of *A Ray of Darkness* William Lennox stated:

I am aware of only one author, the English Margiad Evans (Mrs. Michael Williams), who has given an open and unequivocal book-length account (1953) [sic, should be 1952] of epilepsy personally experienced. Hers carries the bonus of being beautifully and deftly expressed.

Such could not be said of *The Nightingale Silenced*, which is clearly a less coherent work, difficult to read and interpret, and with repetitions, some almost verbatim, which may explain why it remains unpublished more than 50 years after the author’s death. These observations compel the conclusion that the progressive nature of the brain pathology underlying her seizures robbed Margiad Evans of her creative powers as well as, eventually, her life. Nonetheless, her work may still contribute to our understanding of the experience of epilepsy today. The last word may be left to William Lennox [4]:

What for her is “a ray of darkness,” for the thoughtful physician can be a shaft of light into the emotions and questionings of his [sic] distressed patient. He may observe the impact of epilepsy on a brave person whose mind is steeped in nature and, like Job’s, is trying to fathom the reason that lies behind calamity.

Acknowledgment

Thanks are due Jim Pratt, Peggy Williams’ nephew, for permission to quote from his typescript of *The Nightingale Silenced*.

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