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# **Illness and Literature in the Low Countries**

From the Middle Ages until the 21<sup>th</sup> Century

With 10 figures

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## Contents

Acknowledgements . . . . .	7
Rick Honings and Bettina Noak	
Introduction . . . . .	9
Gerard Bouwmeester and Mark G. van Vledder	
Medical Actors and Actions in Non-Medical Middle Dutch Literature . . .	19
Hans de Waardt	
Melancholy and Fantasy: Johan Wier's Use of a Medical Concept in his Plea for Tolerance . . . . .	33
Olga van Marion	
Lovesickness on Stage: Besotted Patients in 17 <sup>th</sup> -Century Medical Handbooks and Plays . . . . .	47
Bettina Noak	
Pictures of Melancholia in Four Tragedies by Joost van den Vondel . . . .	61
Ronny Spaans	
Diagnosing the Poetic Inspiration: Medical Criticism of Enthusiasm in the Poetry of Jan Six van Chandelier (1620–1695) . . . . .	81
Helmer Helmers	
Illness as Metaphor: The Sick Body Politic and Its Cures . . . . .	97
Rick Honings and Steven Honings	
The Poet as Patient: The Curious Case of Willem Bilderdijk: A Retrospective Approach . . . . .	121

Arnold Lubbers	
Oddities, or Illness and Health as Topics in the Early 19 <sup>th</sup> -Century Dutch Readers' Digest . . . . .	139
Mary Kemperink	
'Am I not Punished Enough?' Confessions of Homosexuals in Medical Studies Around 1900 . . . . .	159
Frans-Willem Korsten	
Poet-Judge-Physician: Literature as Cicatrix. The Case of Maria Dermoût	181
Sander Bax	
The Legacy of Incomprehensibility: Trauma, Experience and Historiography in Harry Mulisch's Historical Novel <i>The Stone Bridal Bed</i>	199
Wouter Schrover	
Reading Literature through Medical Sociology: The Doctor-Patient Relationship in Thomas Rosenboom's <i>Public Works</i> and a Poem by Neeltje Maria Min . . . . .	217
Liesbeth Minnaard and Joost Haan	
The Shaking Palsy in the Low Countries: Representations of Parkinson's Disease in Dutch and Flemish Prose . . . . .	231
Stephan Besser	
Mixing Repertoires: Cerebral Subjects in Contemporary Dutch Neurological Fiction . . . . .	253
List of Illustrations . . . . .	273
Notes on the Contributors . . . . .	275

## Introduction

In 1807 Willem Bilderdijk published *De Ziekte der Geleerden* (*The Illness of the Scholars*). Amounting to over three thousand lines, the work is to be considered a milestone in the history of the Dutch didactic poem that need not shun comparison with international melancholy literature.<sup>1</sup> The subject suited the poet to a tee. In a colourful manner all his own, he depicted the ‘Iliad of plagues’ that could assail men of learning together with its origins, accompanying symptoms and any remedies developed to cure it. He discussed, for example, melancholy, sleeplessness and the ‘weakening’ of the brain.

Yet the fascination with being ill was hardly a new phenomenon in the nineteenth century. From as early as classical antiquity there has been an interplay between literature and medicine. The first book of Homer’s *Iliad* recounts the plague that swept the camp of the Achaeans, supposedly sent by Apollo out of revenge. While this instance concerns a full-length book, it is the aphorism that is of greater importance as a literary technique for the dissemination of medical knowledge, from the *Corpus Hippocraticum* of antiquity until the *Aphorismi de cognoscendis et curandis morbis* (1715) by Herman Boerhaave. In addition, the subject of illness and its impact on mankind was explored by great numbers of poetic scholars and scholarly poets.

A number of *topoi* keep recurring in the relationship between literature and medicine. Magic has a place in both domains as magical words, sayings and songs were believed to have a healing effect. Since classical antiquity, physicians have been viewed as priests with access to secrets that remain hidden from patients. This is where the distrust of physicians stems from. On the one hand, they are suspected of charlatanism, as if their knowledge were mere bluff; on the other hand, medicine has to the present day been an ‘arcane’ science, riddled with – at least to the uninitiated – incomprehensible notions and concepts. Further, arrogance and greed on the part of physicians already constitute an

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1 Cf. JORIS VAN EIJNATTEN, ‘Bilderdijk’s Head. Meta-medical Reflections of an Afflicted Poet’, in: *Social History of Medicine* 18 (2005), pp. 337–356.

important motif in *De Medicina*, the history of medicine by classical physician Celsus. Another topos concerns the concept of injury (trauma). Again, the *Iliad* sets the tone: the first surgeon is Machaon. He may have been able to dress incurable wounds but he could not heal the trauma of Iphigenia's sacrifice, which was thus left to spread through the doomed history of the Atrides.

### Three research domains

The relationship between literature and medicine has received a relatively great deal of attention in the research conducted over the past decades.<sup>2</sup> Here, only those aspects that are relevant to the present collection are discussed. Despite the fact that since the nineteenth century literature and medicine have come to be seen as separate entities, and the natural sciences are increasingly placed in a positivistic light, the communication between the two areas as sketched above remains.<sup>3</sup> In all likelihood, the two cultures of the *humanities* and the *sciences* have never even functioned as separate worlds. The research on literature and medicine generally distinguishes three lines of approach:

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- 2 For a short overview of the research on medicine and literature cf. CARSTEN ZELLE, 'Medizin', in: ROLAND BORGARDS [e.a.] (eds.), *Literatur und Wissen. Ein interdisziplinäres Handbuch*, Stuttgart 2013, pp. 85–95; HARALD NEUMEYER, 'Medizin und Literatur', in: ANSGAR NÜNNING (ed.), *Metzler Lexikon Literatur- und Kulturtheorie. Ansätze – Personen – Grundbegriffe*, 5th edition, Stuttgart 2013, pp. 504–505. For subjects and authors cf. DIETRICH VON ENGELHARDT, *Medizin in der Literatur der Neuzeit. Bd. I: Darstellung und Deutung*, Hürtgenwald 1991; DIETRICH VON ENGELHARDT, *Medizin in der Literatur der Neuzeit. Bd. II: Bibliographie der wissenschaftlichen Literatur 1800–1995*, Hürtgenwald 2000; BETTINA VON JAGOW and FLORIAN STEGER, *Literatur und Medizin. Ein Lexikon*, Göttingen 2005. Some recent publications on this topic are: SARAH ANDERSON, *Readings of Trauma, Madness, and the Body*, New York 2012; JAN FRANS VAN DIJKHUIZEN and KARL ENENKEL (eds.), *The Sense of Suffering. Constructions of Physical Pain in Early Modern Culture*, Leiden 2009; MARC PRIEWE, *Textualizing Illness. Medicine and Culture in New England 1620–1730*, Heidelberg 2014; ALLAN INGRAM [e.a.], *Melancholy Experience in Literature of the Long Eighteenth Century. Before Depression, 1660–1800*, Basingstoke [etc.], 2011; STEPHANIE SIEWERT and ANTONIA MEHNERT (eds.), *The Morbidity of Culture. Melancholy, Trauma, Illness and Dying in Literature and Film*, Frankfurt/M. etc. 2012. On art and medicine cf. RENÉE VAN DE VALL and ROBERT P. ZWIJNENBERG, *The Body Within. Art, Medicine and Visualization*, Leiden 2009.
- 3 C.P. SNOW, *The Two Cultures and a Second Look. An Expanded Version of The Two Cultures and the Scientific Revolution*, Cambridge 1979. On the communication between literature and medicine cf. BETTINA JAGOW and FLORIAN STEGER, *Was treibt die Literatur zur Medizin? Ein kulturwissenschaftlicher Dialog*, Göttingen 2009.

1.

The functionalist angle is strongly represented in the research. What is studied here is the *literary function* of medical knowledge and the reception of this knowledge in literature. The fact that a great number of authors were themselves physicians or at least possessed medical expertise plays an important role. Well-known German examples are Friedrich Schiller or Gottfried Benn. For Dutch literature, such authors as J.J. Slauerhoff or Simon Vestdijk come to mind. From classical antiquity, medical knowledge was held to be a necessary asset for the moneyed, well-educated (male) elite, and this affected the uses of this knowledge in literature. Conversely, however, literature also fulfils a function in the history of medicine. After all, literary works can be used as a source of information on the state of affairs of the medical sciences in the past; they serve as representations. Indeed, disease and good health are frequently reflected upon in literary texts. Ethical matters, such as the reputation of physicians, their social duty and the balance of power between physician and patient are also often thematised in functionalist research.<sup>4</sup>

2.

A second angle is provided by *cultural studies*. In the background stand the various ‘turns’ in the cultural studies of the past decades, such as the *linguistic turn* or the *affective turn*. Culture is perceived as a fabric of linguistic expressions that has come about according to discursive rules. In this manner, the functionalist separation of literary and medical texts is removed; medical texts too are texts that go back to a certain cultural discourse. Hence, methods of discourse analysis – building on the theoretical principles of Michel Foucault – play an important role. This also comprises the idea of disease as cultural construct, as, for instance, in the research by Ludwik Fleck. Studies on the functions of corporality, research into traumata or the development of particular metaphors for the discussion of disease are also considered part of this domain. Since text and culture are closely interwoven, medical concepts define social and political observation, and vice versa.<sup>5</sup>

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4 Cf. F. MEULENBERG, J. VAN DER MEER and A.K. ODERWALD (eds.), *Ziektebeelden. Essays over literatuur en geneeskunde*, Utrecht 2002; SOFIE VANDAMME, *Koele minnaars. Medische verwoording en literaire verbeelding van ziekte in verhalen*, Leuven 2007.

5 Cf. MICHEL FOUCAULT, *Naissance de la clinique – une archéologie du regard médical*, Paris 1963 and *Les mots et les choses – une archéologie des sciences humaines*, Paris 1966; LUDWIK FLECK, *Denkstile und Tatsachen. Gesammelte Schriften und Zeugnisse*, Berlin 2011.

3.

Connected with the second angle is the idea that the linguistic articulation of medical knowledge has *a poetics of its own*. The methodological merits of literary analysis, particularly in the field of narratology, are brought to bear on medical texts: historical, ancient or Biblical exemplum literature, casuistry, *medical case histories* or *medical observationes*. Although these genres ranging from classical antiquity to the (post-)modern period define the observation of medical phenomena, historical differences in writing about disease are indeed perceived. Moreover, a direct interaction with literary texts takes place here as well. The influence of the Freudian *case histories* on the literature of the fin de siècle is a case in point.<sup>6</sup>

### Content of this collection

In this collection, all these angles recur in the approaches adopted by authors as they discuss texts roughly ranging from the Middle Ages up to the twenty-first century. A central place is especially allotted to texts from the Low Countries: from mediaeval non-medical literature, early-modern works by learned poets and physicians, texts from the Enlightenment (when literature and knowledge entered into a fruitful symbiosis in the learned societies) and from the nineteenth-century Romantic period, to subjects from the twentieth and twenty-first century. The various perspectives and subjects of the various contributions are sketched against the backdrop of the angles mentioned above. Thereby the collection covers a wide range of different sorts of texts and genres. It might be needful to remember that the concept of an autonomous literature (although always under discussion) is the product of cultural processes in the 19<sup>th</sup> and 20<sup>th</sup> century. In the research about the topic the mentioned broad choice of texts proved to be very useful. As could be seen in the following delineation of the articles it challenges chronological and thematic boundaries and opens up a differentiated view on the relationship between illness and literature.

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<sup>6</sup> Cf. NICOLAS PETHES and SANDRA RICHTER (eds.), *Medizinische Schreibweisen. Ausdifferenzierung und Transfer zwischen Medizin und Literatur (1600–1900)*, Tübingen 2008; YVONNE WÜBBEN and CARSTEN ZELLE (eds.), *Krankheit schreiben. Aufzeichnungsverfahren in Medizin und Literatur*, Göttingen 2013.



1.

The articles by Gerard Bouwmeester and Mark van Vledder, Arnold Lubbers and Wouter Schrover address the socio-cultural position of medicine and of physicians, and the role of literature and the literary field in the dissemination of medical knowledge. They thus follow the functionalist paradigm. In their corpus-based study 'Medical Actors and Actions in Non-Medical Middle-Dutch Literature', Bouwmeester and Van Vledder examine the social position of physicians and the status of medical knowledge in mediaeval texts. Their conclusion is that even in the Middle Ages, the physician's position was a controversial one. While the physician held a high social position as adviser to the king and, even, as a political agent, there were, on the other hand, warnings against fraud, together with pleas in favour of medical knowledge on the part of laymen. Knowledge of medical sciences was considered a competence that was of great importance to civilized persons from the upper classes.

Wouter Schrover's article 'Reading Literature through Medical Sociology: The Doctor-Patient Relationship in Thomas Rosenboom's *Publieke werken* (*Public Works*) and a Poem by Neeltje Maria Min' highlights similar questions. Here, the main starting point is the subject of 'power', a far from unimportant one in the history of medicine. In his analysis of the power of physicians Schrover uses the concepts *Aesculapian*, *charismatic* and *social power*. Dependence on physicians increased, as did the helplessness of the sick. Especially in the nineteenth century, which is also the setting for Thomas Rosenboom's *Public Works*, progress in medical knowledge is achieved at the expense of lower-class patients. An important tool with which to break the power of the medical sciences and the medical elite is irony. In the sonnet 'My body is crawling with streptococci' by Neeltje Maria Min, the irony of the already deceased 'I' constitutes a last resort to protect some personal dignity from the clutches of the doctor (and 'healthy' fellow beings!).

Up-to-date medical knowledge, of the connection between macrocosmos and microcosmos, for instance, already plays a role in the mediaeval texts, revealing a social interest in natural sciences that at an early stage becomes part of popular culture. In other words, scientific interest is not a phenomenon exclusive to the Enlightenment or the nineteenth century. How this interest takes shape in the nineteenth century in book clubs in the United Kingdom of the Netherlands between 1815 and 1830, is the subject of Arnold Lubbers's contribution 'Oddities, or Illness and Health as Topics in the Early 19th-Century Dutch readers' digest'. Apart from books on general knowledge and reference books on health, it is especially two major discussions, hotly debated in early-nineteenth-century Europe, which resonate in the book clubs: those on *animal magnetism* and on *cowpox vaccine*. With respect to the first debate, the influence is notable of

authors translated from the German, such as the influential publication by C.A.F. Kluge, *Proeve eener voorstelling van het dierlijk Magnetismus* (*An attempt to present animal Magnetism*, 1812) or C.W. Hufelands *Belangrijke waarnemingen omtrent het slaapwandelen, of het droomleven, zonder den invloed van het magnetismus* (*Important observations concerning somnambulism, or the dream life, without the influence of Magnetism*, 1817). In the Dutch discourse there is admiration to be found for the reputed treatment successes of mesmerism, besides criticism (on religious grounds) of these methods. A similar discussion takes place with regard to the *cowpox vaccine*. While inoculation was promoted by the government, Abraham Capadose expressed his fierce opposition to the scheme.

## 2.

The subsequent articles in the collection have been influenced by the said cultural studies approach. The contribution by Helmer Helmers, 'Illness as Metaphor: The Sick Body Politic and Its Cures', shows how medical concepts helped shape the political metaphors of the early-modern period. Here, too, classical tradition plays a decisive role. The Galenistic paradigm of the harmony of the body fluids is brought to bear on the state. Disturbances in this order result in the *body politic in crisis* as analysed by Helmers. The influence of Paracelsian medicine can be detected in political concepts purporting to remove such 'foreign social phenomena' as deviant convictions or political opponents (i. e. *the xenobiotic other*) from the body politic by means of iron and fire, thereby echoing the surgical practices of the day. In curing the body politic, the healing powers of the royal charisma may perform an important role. Medical metaphors may, in this manner, contribute to the development of a national ideology.

Attention is also given, in this collection, to mental disorders and delusions, from the early-modern period to the present day. Even more so than purely physical illnesses, failings of the human brain seem to appeal to many an author's imagination. Again, precursors can be found in classical antiquity. As the contribution by Ronny Spaans, 'Diagnosing the Poetic Inspiration: Medical Criticism of Enthusiasm in the Poetry of Jan Six van Chandelier (1620–1695)', shows, poets and Humanist theologians and physicians from the early-modern period reflect upon the Platonic inheritance of the *furor poeticus*, both at the literary, ethical and medical level. Around 1648, the learned Humanist, writer and pharmacist Jan Six van Chandelier sketches in his poem *Verrukkinge der Sinnen* (*Rapture of the Senses*) a satiric and self-critical image of inspired poethood. To him, poetic ecstasy is a form of frenzy that may impair the health of poets and readers alike. Yet the idea of literature as remedy is here as well. Against wordly

passion stands Christian enthusiasm; early-modern man had to learn the difference between the Christian rapture that could only benefit mental health, and delusions and melancholy that were thought to be prompted by the devil.

Four of the collection's contributions analyse the melancholy concept in the early-modern period and the nineteenth century. In his article 'Melancholy and Fantasy: Johan Wier's Use of a Medical Concept in his Plea for Tolerance', Hans de Waardt examines how the concepts *imagination*, *brain* and *demonic possession* are handled in the famous work *De praestigiis daemonum* (1563) (*Delusions of Demons*) by Johan Wier. Although Humanist circles did not rule out the possibility of demons seizing the human body, it is not so much the direct action of anthropomorphic satanic powers that is involved here as medical concepts of evil powers. Demons were deemed capable of disturbing the human brain by effecting a disturbance of the *humores* in the body. This led to illnesses which could then be diagnosed and treated by physicians. In imitation of such (neo-)Platonic theoreticians as Marsilio Ficino, Johan Wier views the devil as an abstract idea that may cause disease in the human mind but cannot be present as a living person capable of entering into a pact with people. He instrumentalizes this idea in order to argue against the persecution of witches, which was advocated by the church in this period.

The possibility that demons may act on the human body and thus cause mental illness was also acknowledged by the British scholar Robert Burton in his book *Anatomy of Melancholy* (1621), a work that was also influential in the Netherlands. Here, it provides the theoretical underpinning of the subsequent articles. In her article 'Pictures of Melancholia in Four Tragedies by Joost van den Vondel', Bettina Noak shows that the concept of *demonic possession* is still active in the seventeenth-century author Vondel, although ultimately it is the Humanist-medical approach that prevails with him. His predilection for dichotomies not only emerges in the structure of his plays but also in the way in which he deals with the 'melancholy' syndrome: on the one hand, he examines the melancholy of unbelievers and tyrants and, on the other, that of martyrs. The contribution uses four analytical concepts: the sickly imagination of the *conscience* in the downfall of the tyrants, the cannibalistic *incorporation* that connects the poet with, especially, religious delusion, the martyr's *ego impoverishment* and, lastly, chances of a *breakthrough* in the melancholy disposition through faith in the *Christus medicus*.

With lovesickness the subject of her contribution, Olga van Marion examines in 'Lovesickness on Stage: Besotted Patients in 17th-century Medical Handbooks and Plays' one specific aspect of melancholy that was also discussed extensively in the medical literature of the early-modern period. A dichotomic structure is also discernible in the Humanist concepts on love and its medical effects: Burton distinguishes between *nuptial love* and *tyrant love* or *heroical*

*melancholy*, in other words, honourable love versus deluded love. Sufferers from tyrannical love present particular symptoms, in his view: a quickened pulse (*pulsus amatorius*), blushing, sweating or paling in the presence of the beloved and panting. These topoi are deployed in both G.A. Bredero's tragi-comedy *Lucelle* (1616) and Theodoor Rodenburgh's *Vrou Iacoba* (1638). While love-struck male characters present all the symptoms described here, the female protagonists display what is, according to Van Marion, a specific form of love melancholy: noxious vapours in the female brain cause a flood of tears.

Melancholy was also a *hot item* during the Romantic period. In their 'The Poet as Patient. The Curious Case of Willem Bilderdijk: A Retrospective Approach', Rick Honings and Steven Honings analyse how Bilderdijk the patient can be diagnosed with the use of modern-day psychiatric insights. Time and again he complained about all kinds of physical and mental ailments, expressing a wish to die soon. Just like authors from the early-modern period, he adduced religious reasons to account for illnesses; in his view, they could be traced to the Fall of Man. Exercising all due methodological caution (it is dangerous to diagnose someone from the nineteenth century) Rick and Steven Honings lay Bilderdijk on the exam table. They sketch a picture of a patient who as early as childhood developed a personality disorder (*pervasive developmental disorder*) because of his limited social contacts, and ever since suffered from persistent depression and a longing for death. Later in life Bilderdijk may have suffered from bipolar disorder, with manic and productive periods alternating with periods of depression.

### 3.

Historical exempla and medical case histories constitute important genres in which literary techniques and medical knowledge are bound up. A different type of text is the *confession*, which goes back to Saint Augustine. In her contribution "'Am I Not Punished Enough?' Confessions of Homosexuals in Medical Studies Around 1900" Mary Kemperink discusses the genre of the *confession* in medical studies on homosexuality. She is critical of Foucault's opinion that the evolution of the concept of 'homosexuality' was a mere tale of power and suppression. In contrast, Kemperink argues that the evolution of a clearer image of homosexuality was brought about by cooperation between patients and physicians, with literary techniques being of overriding importance. She examines this discourse by means of confessions in three influential publications: Richard von Krafft-Ebing's *Psychopathia sexualis* (1903), Dr. Laupt's *Tares et poisons* (1896) and Magnus Hirschfeld's *Ursachen und Wesen des Uranismus* (1903). The confessions are to illustrate the worked-out concepts of homosexuality but in the

texts, they assume a literary life of their own. They are rendered by first-person narrators through interior monologue, rhetorical questions, metaphors, symbols and rhetorical topoi. These narratives are further connected with then prevailing genres, such as the adventure story, the love story, the naturalistic or the decadent novel. Patient narratives are thus literalized besides being infused with medical knowledge, which makes the question whether we are dealing here with medical case histories or, rather, literary stories with a medical purport almost unanswerable.

The development of a new concept of disease is also the subject of the article by Joost Haan and Liesbeth Minnaard: 'The Shaking Palsy in the Low Countries: Representations of Parkinson's Disease in Dutch and Flemish Prose'. They demonstrate that the representation of the 'shaking palsy' stands in a long tradition that goes back to Shakespeare. In their contribution, they analyse six Dutch texts. Parkinson's disease proves to be an interesting subject since a complex of physical and mental problems are observed in the clinical picture. The novel *Duivelskermis* (*Devil's Carnival*) by Gerrit Krol imparts a meaning all its own to the subject of *demonic possession*: the hallucinations that go with the syndrome bring about changes in the characters. Their perception of reality, of time and space, is no longer reliable and they are haunted by visions and distortions. Their 'healthy' environment is consequently suspicious of the patients. The enlightening work that the medical sciences ought to carry out to promote the rights of these sick people does not achieve the desired effect so that the patients are completely at the mercy of the physicians. Their distress sometimes stems from inner and physical injuries sustained in the past and may be transmitted to the next generation, as the unprocessed traumatic experiences in Jeroen Brouwers' *Bezonken Rood* (*Sunken Red*) show.

The last three articles in this collection focus attention on trauma and how to combat trauma. In his article 'Poet-Judge-Physician. Literature as Cicatrix: The Case of Maria Dermoût', Frans-Willem Korsten examines the role of the author against the background of the concept of the 'cultural physician', as developed by Nietzsche and Deleuze. According to Korsten, Dermoût not only writes *case histories* but these have a simultaneous healing effect as well: as they are being narrated, they can heal wounds. The decisive figure of thought in the article is the *cicatrix*, which not only denotes a scar marking an injury that will disappear over time but 'material in its own right': newly grown tissue to cover an old wound. Literature becomes a tool for justice: normally silent distress is finally given a voice.

The question whether it is possible to put into words the unutterable and unrepresentable of war experiences is the main subject of the article by Sander Bax: 'The Legacy of Incomprehensibility: Trauma, Experience and Historiography in Harry Mulisch's Historical Novel *The Stone Bridal Bed*'. Taking the

concept of *traumatic memory* for his starting point, he shows how Mulisch uses the modern myth in order to still express the unutterable in his novel *Het Stenen Bruidsbed* (*The Stone Bridal Bed*). In autobiographical texts Mulisch himself underlines literature's ability to 'keep open' events from the past, to make them present for readers, while the literary work as such proves to be a complete whole. Against the background of *memory studies* and *trauma theory* Bax demonstrates the ability of the medical but also, in particular, narrative trauma concepts to offer a framework for the expression of traumatic experiences. In recounting the traumata from the past, myth plays a crucial role. It may represent a 'liminal experience' and be the narrative of an extreme crossing of borders that can only be clad in the a-historical form of the myth. In *The Stone Bridal Bed* Mulisch deploys Homer's *Iliad* and *Odyssey* in order to still give expression to the unutterable war experiences of main character Norman Corinth.

A new form of *memory culture* is what Stephan Besser proposes in his article 'Mixing Repertoires: Cerebral Subjects in Contemporary Dutch Neurological Fiction', which ends this collection. The fascination with the workings of the human brain also comes to the fore in contemporary novels. Besser studies three: Robbert Welagen's *Porta Romana*, Jeroen van Rooij's *De eerste hond in de ruimte* (*The First Dog in Space*) and Yves Petry's *De maagd Marino* (*The Virgin Marino*) – including their use of the concept of *brainhood* against the background of some influential theoretical concepts from the *neurocultures*.

Thus, this collection offers fourteen articles that showcase a multitude of subjects and approaches yet have in common that they all highlight the relation between disease and literature. This entails a first-ever overview of Dutch-language research in this field, whereby in some cases actual cooperation was entered into with experts from the medical sciences. Of course, we do not pretend to sketch an exhaustive picture of this research area. We merely wish to demonstrate that this is a fascinating subject that merits more attention – and we sincerely hope that this collection will boost further research into the subject.