The Role of Dr. Francis Willis in the Madness of George III

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Abstract

In the well-known story of the illness of King George III, what is often overlooked is the part played by Dr. Francis Willis, an inconspicuous doctor who with great success ran an asylum in Lincolnshire. In November 1788, he was called to attend the King whose mania was becoming uncontrollable. Because of his interventions there was a slow but marked improvement. The King's recovery in 1789 increased Willis' reputation and expanded his practice.

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In the well-known story of the illness of King George III (1738–1820, what is often overlooked is the part played by Dr. Francis Willis (1718–1807; Fig. 1). He is sometimes confused with his more famous but unrelated namesake, Thomas Willis (1621–1675), the physician and natural philosopher. Indeed Francis would be unheard of were it not for his medical attentions to the King in 1788, revived by Alan Bennett's play *The Madness of George III* and film *The Madness of King George*. The much publicised papers of Hunter and McAlpine implicated porphyria variegata as the cause [1, 2]. But this has been widely disputed [3, 4], with a tentative diagnosis by the Archaeologist Antiquarian, T.J. Peters repeating ear-

lier opinions [5] of recurrent mania due to the onset of bipolar disorder [6, 7].

George III's illness, already recorded in several biographical accounts [8], is only briefly summarised as background. Nicknamed "Mad King George" (Fig. 2), he suffered mild bouts of illness early in his reign; in 1765, he had "a violent cold," insomnia and stitches in his breast, and possibly depression. The first major episode happened between October 1788 and March 1789, when he was aged 50. He suffered acute mania with "incessant loquacity" lasting almost 6 months, preceded by jaundice possibly owing to gallstones. Dr. Francis Willis and his sons John and Robert were summoned to attend the King in this and in subsequent attacks of mental illness. Thus, the House of Commons passed the Regency Bill to allow succession to the throne if the monarch were incapable. But the King recovered: the Bill was withdrawn.

A second episode of mania occurred in January 1801, and a further brief attack in 1804 [6], during which he often had to be physically restrained. During these bouts he was withdrawn from daily business, out of the public eye, at the secluded Kew Palace, near Richmond.

Further, his vision deteriorated and by 1810 he was almost blind from cataracts. From 1817 he was also afflicted by deafness. The role of these 2 symptoms in his mental disorder was an issue, and this matter was frequently argued by his apothecaries and physicians. Cataract sur-

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Fig. 1. Dr. Francis Willis, by John Russell, 1789. Copyright National Portrait Gallery, London.

gery was debated but eventually rejected mainly on the advice of Matthew Baillie and Sir David Dundas, Sergeant Surgeon to the King.

In October 1810, after the death of his daughter Amelia, he relapsed with episodic maniacal behaviour, which persisted until his death in 1820. The Prince of Wales was appointed Regent in February 1811.

Much of his medical care rested with the physician extraordinary to George III, Sir Henry Hallford (1766–1844), a greatly esteemed London physician who became the longest serving President of the Royal College of Physicians, and physician in ordinary to his successors – George IV, William IV and Victoria. Many physicians were involved in the royal family's health; they included William Heberden Jr., Matthew Baillie, Sir George Baker

Fig. 2. King George III. Bettmann/Getty Images.

and Henry Reynolds. Royal courtiers frequently were obliged to seek other physicians to find remedies for the King's erratic and serious bouts of mania and misery.

Francis Willis (1718–1807)

It was during the most serious and persisting attack that Francis Willis, at the advanced age of 70, was called to treat the King on November 28, 1788. He was the third son of John Willis, a vicar of Lincoln Cathedral, and Geneva Darling of Oxford [9]. After studies at Lincoln College and St. Alban Hall, he proceeded MA from the Brasenose College Oxford, where he became a Fellow in 1740 and later, Vice-Principal [10]. Willis was ordained as a priest and became Rector of the College living of Wapping (1748–1800). He resigned his Fellowship in 1750.

Apparently he practised Medicine without a license, although this was not unusual in his day,¹ before being granted the Oxford degrees of BM and DM in 1759. He worked tirelessly in the founding of Lincoln General Hos-

¹ As late as 1856 only four per cent of practitioners had a medical degree from an English university.

pital, where he was appointed physician in 1769. He established a good reputation:

It is said that the great success that attended the eminent Dr. Willis had its origin in an experiment tried upon a tradesman of Lincoln, who on becoming insane was taken to Dunston, where the treatment of his malady was such that in a short time he was enabled to return to this city and resume his duties behind the counter. *Stamford Mercury, Friday 05 August 1859*

Patients attended him from far away, forcing him to move to a larger house in Greatford near Stamford, where he set up a private lunatic asylum. When George III had his first attack of madness in 1788 [3, 6] Willis was recommended to Queen Charlotte by Mrs. Harcourt, an equerry's wife, whose mother he had successfully treated.

When Willis was first called, he encountered scorn and hostility from King George's physicians, including Sir George Baker, because Willis insisted on having sole control over the King's treatment. He was also somewhat disdained as a clergyman who ran an asylum – thought a slightly disreputable job – and he was not a Fellow of the Royal College of Physicians.

He prescribed a bland diet consumed only with a spoon or eaten by using his hands to prevent harming himself with a knife. The separation of the King from his wife Charlotte was an additional hardship. There is sound evidence of the overwhelming control that doctors had in the royal household:

The extract, written during George's *second bout* of ill health, was recorded in the diary of Dr. Francis Willis. It shows the treatments and diets that were prescribed.

2 March 1801:

His Majesty fever increased in ye afternoon and his night having been very restless and unquiet at ye recommendation of Dr. Reynolds his Majesty's feet were put into hot water and vinegar for half an hour. Soon after this His Majesty put on such an appearance of being exhausted, that his life was despaired of – his pulse too had rapidly increased.

At 8 o'clock that evening, Doctors Gisborne and Reynolds, Doctors John and Robert Willis would consult together and give their opinion of the state of the King:

...Immediately upon Dr. John and Robert Willis perceiving ye exhausted state of ye King, they gave him a strong dose of bark (Peruvian bark contained quinine) which had the effect of composing him and putting him to sleep for an hour and a half which he had not had for I think, nearly 48 h before which time too he had been in a very restless and unquiet state. He waked with a slower pulse and in every respect appearing better; ...the medicines of today since 2 o'clock were chiefly composed of musk and bark – his nourishment jellies and wine.

Arsenicals, antimony-based James' powders, purgatives, blistering the skin, and tartar emetic were used to

rid the King's body of toxins. Analysis of his hair after death showed arsenic 17 parts per million, many times higher than the amount associated with arsenical poisoning that may induce an encephalopathy. Further, arsenic can trigger porphyria, which may have contributed to his madness [11].

Willis's treatment of the King was however regarded as successful:

He laid aside all false pretenses, all petty vexations, all unnecessary restraints; no violence need be apprehended, and that no suspicion should be shown. The King had been denied a razor at his toilet, and a knife and fork at his table. These were at once restored to him and in Dr. Willis's presence were freely used. The good effects of this altered treatment speedily appeared. As yet the delusions continued unabated, but far greater calmness and composure, as also better health, were attained.

Both the Queen and Mr. Pitt were disposed to place great confidence in Dr. Willis [12].

Willis was credited with George III's recovery, and his monument at Greatford church records:

[he] was happily the chief agent in removing the malady which afflicted his present Majesty (George III.) in the year 1789. On that occasion he displayed an energy and acuteness of mind which excited the admiration and procured for him the esteem of the nation. The kindness and benevolence of his disposition were testified by the tears and lamentations which followed him to the grave.

The Prime Minister, William Pitt the Younger, through Parliament awarded Willis a pension of £1,000 a year for 21 years. He generally used what was known as "Moral Treatment," based on humane if paternalistic measures which replaced some but not all of the brutal physical methods of the time: purging, blood-letting, toxic drugs, and straitjackets. Compassionate (moral) treatments had been introduced by the Quaker William Tuke (1732–1822) who founded The Retreat at York [13], and the West Riding Lunatic Asylum in Wakefield, run on similar lines [14].

The King's recovery in 1789 made Willis' reputation and expanded his practice. He subsequently treated, though without success, Queen Maria 1st of Portugal, for a mental illness, allegedly receiving £20,000 for his work.

The last 2 decades of the King's life were punctuated by "madness" and remissions. But his health slowly declined. Because the King "became incapable of exercising his Royal functions through infirmity of mind," the Regency Act of 1811 effectively passed many royal responsibilities to his son George, Prince of Wales. But despite his illness, historian, Lucy Worsley tells us that

Fig. 3. Hyman M: Medical numismatic notes, XVIII: portraits of physicians on British trade tokens. *Bull N Y Acad Med* 1975; 51:789–794.

Fig. 4. Testimony to Dr. Willis (from [16]).

George III was a diligent, educated, if graceless King, who won measured respect from his politicians. In fact, when his illness drove him from politics they realised how much they needed his calming effect on their squabbles [15]. George and Charlotte had 15 children, all but 2 of whom survived to adulthood. The long-suffering Queen Charlotte was an intelligent patron of the arts and keen gardener, who helped establish Kew Gardens.

Of hundreds of British *trading tokens* struck in the 18th century, only 3 are portraits of physicians. One, used ostentatiously for publicity, was struck and distributed by

Dr. Francis Willis (Fig. 3) to show his successful treatment of King George.

Willis died at home in Greatford in his 90th year in 1807. He was buried there on December 13, where his surviving sons erected a monument. A lasting testimony of 1799 [16] to this controversial man is shown in Figure 4.

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References

- Macalpine I, Hunter R: The “insanity” of King George 3d: a classic case of porphyria. *Br Med J* 1966;1:65–71.
- Macalpine I, Hunter R, Rimington C: porphyria in the royal houses of Stuart, Hanover, and Prussia. A follow-up study of George 3d's illness. *Br Med J* 1968;1:7–18.
- Dent CE: Royal malady. *Br Med J* 1968;2:118–119.
- Dean G: The Turnstone, A Doctor's Story. Chapter 14. Published to Liverpool Scholarship Online, June 2013.
- Trench CC: The Royal Malady. Longmans, London 1964.
- Peters TJ: The blindness, deafness, and madness of King George III: psychiatric interactions. *J R Coll Physicians Edin* 2010;40:81–85.
- Peters TJ, Wilkinson D: King George III and porphyria: a clinical re-examination of the historical evidence. *Hist Psychiatry* 2010; 21(81 pt 1):3–19.
- Biography of Mad King George III of England (1738–1820). madmonarchs.guusbeltman.nl/madmonarchs/george3/george3bio.htm.
- Haslam MT: The Willis family and George III. *Hist Psychiatry* 1997;8:539–553.
- Dr. Francis Willis, George III's Doctor 1718–1807 – Brasenose College. <https://www.bnc.ox.ac.uk>.
- Cox TM, Jack N, Lofthouse S, Watling J, Haines J, Warren MJ: King George III and porphyria: an elemental hypothesis and investigation. *Lancet* 2005;366:332–335.
- Stanhope, Earl Philip Henry: Life of the Right Honourable William Pitt, ed 3. London, Murray, 1867, vol. 2, p 3.
- Pearce JMS: Quakers in Medicine: “Friends of the Truth”. Sessions of York, The Ebers Press, 2009.
- Pearce JMS: The West riding lunatic asylum. *J Neurol Neurosurg Psychiatry* 2003;74:1141.
- Worsley L: What Was the Truth about the Madness of George III? BBC. From the Section Magazine April 15, 2013. www.bbc.co.uk/news/magazine-22122407.
- Rede LT: Anecdotes and Biography: Including Many Modern Characters in the Circles of Fashionable and Official Life, Selected from the Portfolios of a Distinguished Literary and Political Character, Lately Deceased, Alphabetically Arranged, Leman Thomas Rede, JW. London, Myers, 1799, p 448.