On Being Ill, With Notes From Sick Rooms by Julia Stephen
Virginia Woolf

I recently strained my lower back on the tennis court as I was reaching for a backhand shot. The moment it happened, I fell to the ground in excruciating pain. Lying on the ground, looking up and into the irritating glare of the overhead lights, I thought: “Can I move my legs? Why are the lights so bright? Is this the end of my tennis game, a game I’ve enjoyed since childhood?”

Illness and injury change the way patients perceive themselves and the world. Patients often feel vulnerable, fearful, and uncertain about the future. When ill, they may become more sensitive to light, noises, and the persons caring for them. In her essay On Being Ill (1930), Virginia Woolf—the early 20th century novelist best known for literary classics such as Mrs Dalloway and To the Lighthouse—uses her literary talents to describe what it feels like to be ill. She reminds us that “We do not know our own souls, let alone the souls of others.” She bemoans the fact that authors in the past have devoted little attention to the subject of illness. Woolf herself suffered from severe depression and bipolar disorder. She writes how illness alters the routines and perceptions of everyday life, allowing patients to see things they previously ignored or took for granted:

“Ordinarily to look at the sky for any length of time is impossible. Pedestrians would be impeded and disconcerted by a public sky-gazer. What snatches we get of it are mutilated by chimneys and churches... Now, lying recumbent, staring straight up, the sky is discovered to be something so different from this that really it is a little shocking. This has been going on all the time without our knowing it!”

Virginia Woolf’s mother, Julia Stephen, served as a vocational nurse at the end of the 19th century. Although she had no formal training in nursing, she cared for many patients over many years and recorded what she learned in a short essay titled Notes From Sick Rooms (1883). Whereas Woolf discusses what it feels like to be ill, and how illness changes one’s perceptions, Stephen shares practical advice on how to care for a sick person. She provides instruction on how to attend to the smallest details of nursing, details that increase the comfort and care of the patient. There are short sections on reducing noise, light, and even crumbs in the bed. “Nothing is small in illness,” she writes. She offers a “patient-centered approach” to nursing and medicine, long before it became a philosophy of care today.

There are only two essays in this short book, and it is the 10th Anniversary Edition of the two works published together. I would read Stephen’s essay first. Stephen’s approach to care is surprisingly modern in its emphasis on attending to the individual needs of every patient. Her practical, low-tech advice on ways to ease a patient’s pain and suffering will resonate with health care professionals. Both essays enhance the reader’s understanding of what it means to be ill. Some readers may be put off by Woolf’s frequent literary references. However, there are introductory chapters to both essays and an afterword to help with interpretation. Clinicians, faculty, or medical students not interested in the literary and historical details can easily skip the introductions without sacrificing lessons gained by reading both essays.

Julia Stephen died when Virginia Woolf was 13 years old. She never had the opportunity to nurse her adult daughter through the ups and downs of her mental illness. Reading these enlightening essays is an exercise in empathy, made more poignant by the fact that they were written by mother and daughter and by the tragedy of Virginia Woolf’s suicide in 1941 at the age of 59.

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