HISTORICAL NOTE

Trigeminal neuralgia (Fothergill’s disease) in the 17th and 18th centuries

“...There is as exquisitely an anguish suffered as from any distemper to which the body is subject, if we may judge by the expressions of it...” W Heberden, 1802.

John Fothergill gave the first full and accurate description of trigeminal neuralgia in 1773, but early descriptions of trigeminal neuralgia (Fothergill’s disease) can be inferred from the writings of Galen, Aretaeus of Cappadocia (born circa AD 81), and in the 11th century by Avicenna (“tortura oris”).1

In the south aisle of Wells cathedral lies the tomb of Bishop Butler, who died in 1274. He was canonised. Many pilgrims and toothache sufferers left offerings at the tomb, in commemoration of which the capitals of the pillars bear carvings of people depicted with facial neuralgia. One is famed as the toothache figure. Because of the surprising rarity of dental caries in that time (confirmed when the sarcophagus was opened in 1848), Wilfrid Harris pointed out the probable relevance to trigeminal neuralgia.

The most convincing early description2 in 1671 was of a German physician, Johannes Laurentius Bausch, who suffered from a lightning-like pain in the right face. He became unable to speak or eat properly and apparently succumbed to malnutrition.

A marvellously detailed history is that of John Locke, the famous physician and philosopher, who described the condition in a series of letters to Dr John Mapleton in 1677. His account3 tells of his unfortunate patient, the Countess of Northumberland, wife of the Ambassador to France.

Nicolas André invented the term tic douloureux in 1756 in a book, Observations pratiques sur les maladies de l’oreille et sur plusieurs faits curieux. André’s term remained though not all patients showed the facial tics. Copies of John Fothergill’s article are still available, but probably only one copy of André’s book exists—at the Wellcome Institute in London: “What had been regarded as the end of a mild and tolerable ailment, became the source of the sharpest and most uncomfortable pains, I would say the start of a tic douloureux that assailed her night and day, deprived her of sleep, and forbade her some of the bodily functions necessary for life. In fact these periodic agitations became so frequent that they rarely allowed five or six minutes of peace during an entire hour; the patient could not eat, drink, cough, spit or wipe her face without renewing her pains.”

Nicolas André, John Fothergill (1712–1780),4 Samuel (his nephew5), and Charles Bell were to elaborate the features, possible causes, and treatments.

John Fothergill’s description of “a painful affectation of the face”6–9 was presented to the Medical Society in London in 1773. The son of a Wensleydale farmer, having started his career as a trainee apothecary, was persuaded to study medicine. He read medicine at Edinburgh because as a Quaker he was classed as a dissenter, which precluded admission to English medical schools. He later studied at St Thomas’ hospital as a graduate. A highly successful and lucrative London practice afforded him many opportunities. He described angina pectoris in 1776, eight years after Heberden, and diphtheria. He became a distinguished Quaker physician10 and plant hunter. He spent much of his earnings on acts of philanthropy; and in the establishment of his botanical garden at Upton, Essex, “known all over Europe”,11 replete with rare peripherals and shrubs that he collected from distant lands. He also acquired a large collection of rare shells and minerals; Dr William Hunter purchased his collection on his death. He generously supported many young doctors from the American colonies. A friend of Benjamin Franklin, together they tried unsuccessfully to avert the Revolutionary War.

Fothergill founded the Medical Society, a private conclave of a few hospital physicians that should not to be confused with the Medical Society of London, founded by Lettisome in 1773. John Fothergill described the complete clinical features of trigeminal neuralgia, and he recorded that light touch was the most common trigger. He had met with 14 cases and attributed the cause to a “cancerous acrimony”, because of the persistence and incurability of the pain. He noted that it was more common in women and the elderly. An essay by Pujo11 confirmed his clinical description.

The diary12 of his young niece, Betty Fothergill, illustrates his personality, and gives insights into his domestic life. The diary portrays a high minded, humanitarian, scholarly but liberal gentleman. A licentiate only, of the London College, he was elected Fellow of the Edinburgh College of Physicians in 1754, and in 1763 became a Fellow of the Royal Society. He died in 1780 from a second attack of “suppression of urine” and was buried in the Quaker burial ground at Winchmore Hill. Hogarth’s distinguished cabinet portrait is in the London College.

Samuel Fothergill too, wrote of this painful affliction in 1804 in An account of a Painful Afection of the Nerves of the Face, commonly called Tic Douloureux.1

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