

# [Misconceptions and mistaken treatments in mrs. dalloway](https://assignbuster.com/misconceptions-and-mistaken-treatments-in-mrs-dalloway/)

The horrors of war have, for centuries, tormented the human soul. Some veterans are able to re-acclimate themselves to normalcy, while others are crippled by trauma due to the gore and violence. In Virginia Woolf’s novelistic masterpiece Mrs. Dalloway, Septimus Smith endured the gruesome events of World War I, but returned home severely scarred. Because of the lack of modern medical and psychiatric knowledge that society has today, Septimus’ battle scars killed him in the end. If his caregivers, Holmes (a physician) and Bradshaw (a psychiatrist), had been more attuned to the true nature of his mental incapacities, and had possessed modern, competent medical knowledge, Septimus might not have ended his life.

Let’s first examine Holmes. Ignorance seems to be his basic nature; in fact, he sees distraction as a cure-all. He encourages Septimus to listen to music, play golf, and/or take sleeping pills (2206). He also recommends that Septimus take up some new hobbies, but discourages over-excitement. These distractions may stifle the symptoms temporarily, but they do not help solve the problem. Externally, Septimus is perfectly healthy, so Holmes thinks that there is “ nothing whatever seriously the matter but was a little out of sorts” (2167) or “ in a funk” (2238). He does not look past exterior ailments into the internal to understand the real issues. If he had, Septimus might have recovered. Holmes is generally dismissive of not only Septimus’ condition, but also other similar conditions as well. He sees no logical cause for conditions such as insomnia, anxiety, dreams, and headaches. He thinks that people mostly have control over their health (2206), so perhaps he believes that we are only as sick as we let ourselves be.

Bradshaw has a different approach. As a psychiatrist, he has far more knowledge of the mind than of the body, which is Holmes’ field of “ expertise.” Since he is a psychiatrist, he knows that he is better equipped to treat Septimus than Holmes is. He disagrees with some of the treatment ideas that have been offered, specifically the suggestion to take bromide, because, for him, sedating someone doesn’t solve anything. He disagrees not simply with Holmes, but with physicians in general. “ It took half his time to undo [their] blunders. Some were irreparable” (2209). Suicide is, tragically, a circumstance that is irreversible yet may result from such seemingly casual “ blunders”.

Bradshaw proposes a treatment plan that he believes is better than Holmes’ solution. He discourages over-excitement and thinks that Septimus should be relocated to a home in the country for a few months to rest. The only companions he would be allowed are nurses, with an occasional visit from Bradshaw himself because apparently, “‘[t]he people we are most fond of are not good for us when we are ill’” (2237). These premises, however, are highly suspect. This sort of plan certainly did no good for the narrator and protagonist in Charlotte Perkins Gilman’s The Yellow Wallpaper. Being surrounded by the care and support of loved ones should be a necessity in any treatment plan. To make the healing process progress more smoothly, family members need to have a complete understanding of the circumstances.

Bradshaw’s understanding of Septimus’ incapacities is, of course, in many ways sympathetic. He does see the internal concerns and is sensitive to them. “[H]e never spoke of ‘ madness’; he called it not having a sense of proportion” (2209). Apparently, he has a greater awareness of the realities of depression than Holmes. That said, it is ironic that Rezia, perhaps the person closest to Septimus, likes Holmes, a man who is unaware of the seriousness of Septimus’ condition, and dislikes Bradshaw, who seems much more aware (2207 and 2211). Like Holmes, she must not have a full grasp on her husband’s condition because of her lack of knowledge in that area.

Neither of the caregivers’ suggested treatment plans appears to provide enough hope for Septimus. Their treatments encourage Septimus to try to forget about his problems instead of bringing them into the light to thoroughly examine them. Both of them tell him to disregard himself. Bradshaw says, “[t]ry to think as little about yourself as possible” (2210); Holmes advises him to “ take an interest in things outside himself” (2167). Yet veterans should think of themselves as much as possible; how else would they be able to fully recover? Talking openly about one’s insecurities helps lift the burden.

Neither Holmes nor Bradshaw ever wanted to talk in depth about Septimus’ witnessing of the death of his commanding officer, Evans, or about his other experiences during the war (at least, that’s the impression left by Woolf’s narration). If Holmes and Bradshaw had been more inquiring, Septimus might have been able to live the rest of his life. Instead, their misconceptions drove Septimus to his self-inflicted demise for reasons that Holmes himself “ could not conceive” (2239).