

## A study in white: medicine and crime according to Sherlock Holmes

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When a doctor does go wrong he is the first of criminals. He has nerve and he has knowledge. Palmer and Pritchard were among the heads of their profession.

(Doyle 1981: 270)

So Sherlock Holmes says to Watson on a cold night in April, 1883, while the two friends are getting ready for a night watch, lying in ambush to capture a dangerous criminal. A doctor has planned to commit that very night a horrible crime, - the Speckled Band murder - and Holmes seems particularly upset and worried about it.

The purpose of this paper is to answer these two questions: First, why does Holmes fear so much Hippocrates' followers who give themselves to crime? And second, who were Palmer and Pritchard?

Many scholars have shown the similarity between the diagnostic methods of medicine and those of criminal investigators, especially those of Sherlock Holmes. The doctors gifted with the so-called "penetrating eye" can make at a glance diagnoses not strictly limited to the medical field, as is shown by the prodigious "deductions" of Joseph Bell, to quote a famous example.

Both in detective and in medical work the observation of trifles has an important role, as Bell himself tells us:

The precise and intelligent recognition and appreciation of minor differences is the real essential factor in all successful medical diagnoses. Carried into ordinary life, granted the presence of an insatiable curiosity and fairly acute senses, you have Sherlock Holmes as he astonishes his somewhat dense friend Watson; carried

out in a specialized training, you have Sherlock Holmes the skilled detective. (Bell 1892: 9)

The similarity has then been extended from real life, through the role of Sherlock Holmes as a fictional character, to the detectives of crime novels. Starting with Dr. Thorndyke – himself the creation of a doctor and qualified chemist, Dr. Richard Austin Freeman – we go through a long list of medical detectives, among whom we may remember Kay Scarpetta, the character created by Patricia Cornwall, until we come today to one of the world's most successful TV series: Dr. House, played by Hugh Laurie, who is clearly inspired by Holmes both in his logical methods and in the eccentricity of his personality (drug addiction, abrupt manners – much more marked in the imitation than in the original – and difficult relationships with women.)

But the two professions have something else in common besides the similarities between the scientific method of Holmesian detection and medical semeiotics. As Corrado Augias tells us:

La fiducia nella scienza è consolatoria e rassicurante, così come è consolatorio e rassicurante il medico al capezzale del malato: Holmes è il medico di una società la cui malattia è il crimine. (Augias 2004: 5) <sup>1</sup>

The social function that the detective and the doctor have in common is to be the defenders of peace and quiet living, a bulwark against the respective threats of germs and criminals. This position of social prestige makes them the cutting edge of what we may rhetorically call “the powers of Good”. So treason on the part of one of them is particularly serious.

We also know that Holmes thinks that the use of logic is paramount in fighting crime: “Crime is common. Logic is rare.” (Doyle 1981: 317). But if logic is rare, even among criminals, it is not so among doctors, who are trained by their professional training to use and make the most of it: “It’s a wicked world, and when a clever man turns his brains to crime it is the worst of all.” (Doyle 1981: 268).

That is why Holmes, knowing what a powerful weapon the conscious use of scientific methods can be, is particularly worried by the doctor who turns his skills to criminal goals. If we examine the annals of crime, we can’t consider him wrong. Alongside the “nerve and knowledge” of which Holmes talks expressly, the logical reasoning and the social prestige, we must add the psychological factor of the power to give life or death, which a doctor has often in his hands. This power can have a perverse charm on a mind prone

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<sup>1</sup> “The trust in science is consolatory and reassuring, as is consolatory and reassuring the medical man at the sick-bed: Holmes is the doctor of a society whose illness is crime”. (Translation mine)

to crime. The long list of doctors, medical students, nurses and dentists that have been murderers or even serial killers, from remote times to the recent clamorous case of Harold Shipman is there to prove it: "...medicine has arguably thrown up more serial killers than all the other professions put together, with nursing a close second." (Kinnell 2000: 1594). In this long list, Dr. William Palmer of Rugeley and Dr. Edward William Pritchard of Glasgow are two of the names that stand out.

Both these cases were front page news and left a deep mark on the society of their times and in British law. Both have been the subject of biographies, novels and movies. Both are in some respect typical examples of the chances that a doctor has when he decides to turn to crime.

## 1. THE GAMBLER: DR. WILLIAM PALMER

William Palmer was born in Rugeley in 1824, fifth of eight children. When he left school, his first job was as an assistant in a chemist's shop in Liverpool, where he showed the first signs of his weak character: he was sacked for stealing petty sums of money. A similar episode caused him to be dismissed from his post as an assistant to a certain Dr. Tylecote, who sent him to steady his character and gain experience at Stafford Infirmary. It is said that here Palmer started to be interested in poisons. His mother sent him to study in London putting a tutor – what was called "a grinder" – on his heels. By this imposed discipline Palmer was able to qualify as an M.R.C.S. at St. Bartholomew's hospital, the very same place, we're sorry to say, as the historical first meeting between Holmes and Watson.

Back in Rugeley, he started a practice and he rapidly prospered. But he disliked the life of the country practitioner: he preferred horseracing, and not only for betting. He had the ambition to own and run his own horses. A very expensive hobby, far more expensive than his finances – albeit fairly good – allowed him. To cover his losses the doctor at first counted upon his winning bets, but he soon started losing heavily. And people started dying in mysterious circumstances – though gossip flourished about these deaths only many years later:

- Palmer's mother-in-law, a confirmed drunkard, died in 1849 after an attack of *delirium tremens*. True, Palmer did not benefit from her death, but unconfirmed gossip said that he didn't know that her possessions would go to her late husband's nephew and not to her daughter Annie (Palmer's wife).
- A certain Leonard Bladen, who owed him money, died in 1850 while a guest in his house.

- An uncle, also a drunkard, died in 1852 after an evening spent drinking brandy with Palmer.
- Four out of five of his children died in infancy. Only the first-born survived. But high infant mortality of the period is perhaps a sufficient explanation.

The really suspicious deaths began with the demise of his wife Annie Thornton in September 1854. Only few months before, in the April of that same year, Palmer had insured her life for £ 13,000. In that period he was indebted with some moneylenders, but in spite of this he bought two top class horses for 2,000 guineas each. He often had to be lent money to let one of his horses race.

Under these circumstances, the death of his wife came in very useful to him and was regarded as highly suspicious. But it is also true that she loved him dearly and was in deep depression for the death of her children: it is possible that she committed suicide to let her husband pocket the money of the insurance that would rescue him from his debts. What is certain is that one year later, in a post-mortem, heavy traces of antimony were found in the body.

The insurance company paid, but the £ 13,000 was barely enough to keep Palmer afloat. So he thought of a new trick. His brother, Walter Palmer, was a confirmed drunkard and in very bad health. Palmer kept him away from the bottle for some days, put him straight and then tried to insure his life with several companies. Only one accepted. Once the insurance doctor had proclaimed Walter fit and healthy, Palmer gave his brother £ 60 and an unlimited credit to get drink from the local pub so that he could kill himself faster with alcohol.

The question is: did Palmer only gamble on his brother's death or did he quicken the natural course of events with some poison? We shall never know for sure. At the post-mortem that was held after Palmer's arrest the body was found to be in too advanced a state of decomposition to find possible traces of poisoning.

Walter Palmer died on August 16th, 1855. But the insurance company – the same company that insured the life of Palmer's wife – had their suspicions and refused to pay.

Now Palmer's situation was the same as Sir Robert Norberton's in SHOS. He, too, had a horse as a favorite in a crucial race. Unfortunately for him, things went differently this time. Palmer's horse, *Nettle*, stumbled over the chains beside the track when it was in second place and making a strong comeback. Had the horse won, he would have pocketed £ 5,000. It is worthy of note that after Palmer's arrest his horses were sold at auction and one of them was bought by none less than Prince Albert, Queen Victoria's husband. They were surely not hacks.

Palmer, however, had already given to moneylenders bills for £ 26,000 on which he had forged his mother's signature as a guarantee – his mother had a personal fortune. Not even his horses could save him from jail; not even the murder for which he was eventually convicted.

On November 13th, 1855, Palmer and a friend of his, John Parsons Cook, went to the Shrewsbury Races. Cook won £ 3,000. The following evening, he got sick while dining with Palmer and other gamblers and he accused Palmer of having drugged him. On the 15th Cook went back to Rugeley with Palmer, having apparently changed his mind about his friend, and took rooms in the pub which stood opposite the doctor's house. After some days of sickness, with vomit, fever and finally a severe attack of convulsions, assisted by Palmer and another Rugeley doctor, Cook died on the 21st.

After his death, his betting book with the £ 3,000 winnings disappeared mysteriously; furthermore, Palmer affirmed that Cook owed him £ 4,000 – maybe as a way to divert suspicion from himself. But he clashed against the mistrust of Cook's stepfather, who, suspecting Palmer of foul play, asked for a post-mortem and called in personally the most famous toxicologist of the Kingdom – Dr. Alfred Taylor.

Palmer was present at the post-mortem and tried clumsily to tamper with the contents of the stomach. Then, when these were sent to Dr. Taylor for a more accurate analysis, he bribed the post-master of the village, a friend of his, into opening the letter addressed to the Coroner which contained Dr. Taylor's report and, reading that no traces of strychnine had been found, tried to bribe the Coroner to issue a verdict of natural causes. But the jury, upon the testimony of the eminent toxicologist, returned a verdict of willful murder. Palmer was arrested on the same day that a warrant had been issued against him for the forgeries on the bills.

The trial of Dr. Palmer was called "The Trial of the Century" and, for once, the newspapers were not exaggerating. First, Parliament issued a special Act (19 Vict., c. 37) so that Palmer could be tried in London, officially because it would have been impossible to find a fair jury in his county (this act, known as the "Palmer Act", is still in force today). Second, it was the first trial in Great Britain for strychnine poisoning, and one of the first based upon subtle medical and scientific testimony. Third, among the spectators was the cream of British aristocracy: Mr. Gladstone, the Lord Mayor of London, the Earl of Derby (three times Prime Minister) and the First Sea Lord. Charles Dickens wrote several articles on the trial.

The prosecution was based almost entirely on circumstantial evidence and upon the testimony of Dr. Taylor who affirmed that, though no trace of strychnine had been found in the body, he was convinced that it was the cause of death. Taylor stated openly that unless Palmer was convicted, the difficulty of tracing vegetable poisons like strychnine could become a "licence

to kill” for any criminal smart enough to use them. He said this against the opinion of several witnesses for the defence who claimed that in cases of strychnine poisoning traces of it should always be found.

It was acknowledged by some commentators at the time that the evidence was weak or at least non-decisive; also, the judge’s summing up was very biased against Palmer. But the factor that persuaded the jurors of Palmer’s guilt was the magistral speech of the prosecutor, Sir Alexander Cockburn. After the verdict Palmer, always the gambler, said to his solicitor: “It was the riding that did it.” (Fletcher 1925: 131).

Was Palmer guilty? The answer is very probably affirmative. None of the heavily incriminating circumstances was satisfactorily explained. The convulsions of the victim were typical of the symptoms that we know today are those of strychnine. Speaking from a purely legal point of view, however, the soundness of the verdict seems doubtful <sup>2</sup>. Palmer was hanged in front of Stafford gaol on June 14th, 1856. Until the very last he claimed that his sentence was not just and refused to confess.

His choice of words in his last talk with the Governor of the prison is very significant. Palmer said: “Cook did not die from strychnine.” The Governor told him: “This is not a time for quibbling. Did you, or did you not, kill Cook?” Palmer replied: “The accuse was of poisoning by strychnine” (Fletcher 1925: 195). A claim of innocence or a subtle way to say that he had poisoned Cook, but with some other substance?

Palmer went to the gallows with the uttermost calm and firmness. A legend says that as he stepped upon the trap door on the scaffold, he said: “Are you sure this damn thing’s safe?” Probably in fact these “final words” were never spoken. The witnesses to the execution wrote at the time that he simply shook hands with the executioner and then just said: “God bless you”.

Another anecdote is more likely to be true: before the execution, he was offered a glass of wine and he sipped it slowly, remarking: “They [bubbles] always give me indigestion next morning if I drink in a hurry.” (Fletcher 1925: 197).

## 2. THE WOMANIZER: DR. EDWARD PRITCHARD

Dr. Edward William Pritchard was born in 1825 in Glasgow. He studied at King’s College and in Leyden, though his academic qualifications are doubtful.

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<sup>2</sup> Graves (1957) makes a reconstruction of the case based on the hypothesis of Palmers’ innocence and of a grave miscarriage of justice.

In 1846 he embarked as a surgeon on the *Victory*, admiral Nelson's flag ship. He left the Navy in 1851 and took up a position as a GP in Hunmanby, a small Scottish village. Here he made himself the reputation of a merry and jovial character, a boaster and a talker, but not a very good doctor. Among other things, he boasted of his friendship with General Garibaldi.

In 1860 he moved to Glasgow, where he set up a practice thanks to a gift of £ 500 from his father-in-law. He rapidly became a well-known figure in the most exclusive clubs and learned societies of the town. But gossip began to spread about his relationships with women, especially maids and servants.

Suspicious incidents in his life began in 1863. A fire broke out in the attic of his house; a young maid died. It was proved that, in spite of the flames, the girl hadn't moved from her bed, thus prompting the hypothesis that she had either been drugged or poisoned. The motive could be pecuniary – Pritchard tried to cash an insurance on the girl's life – or maybe to hide an embarrassing relationship. However, nothing tangible was found against the doctor.

In 1864 Pritchard got another maid pregnant, but he persuaded her to an abortion promising her that if his wife had died he would marry her. In November that same year his wife Mary Jane (*née* Taylor) got sick. The symptoms were not clear, but a doctor that Pritchard called for a consultation thought that it might be a case of accidental poisoning, and informed her brother. So Pritchard's mother-in-law, Mrs. Taylor, went to live with the couple to take care of her daughter personally. Within a short span of time, she was struck with the same symptoms.

Mrs. Taylor died in February, 1865 and her daughter followed her a month later. Pritchard provided both death certificates, attesting an apoplexy for his mother-in-law and gastritis for his wife. With a touch of supreme dramatics, he opened his wife's coffin during the funeral to kiss her on the lips one last time.

But it was too late and gossip was already circulating, since a certain Dr. Paterson, called for a consultation <sup>3</sup>, was puzzled with Mrs. Pritchard's symptoms (though he did little to warn her or interfere with the suspected poisoning). Following an anonymous letter to Mr. William Hart, the Procurator-Fiscal <sup>4</sup>, the two bodies were exhumed and in the post-mortem clear traces of antimony poisoning were found .

Pritchard was arrested and his trial, in July 1865, was followed with great attention by the press and the public. The evidence proved in this case overwhelming and the death penalty was inevitable. The doctor fully ac-

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<sup>3</sup> Cf. Roughead 1941a: 73

<sup>4</sup> In Scotland, the Procurator-Fiscal has the same role as the Coroner and his Jury in England. Cf. Roughead 1941a: 83

knowledged the justice of his sentence. He, too, like Palmer, went to the scaffold with the highest calm and tranquility<sup>5</sup>.

The execution of Dr. Pritchard was the last public hanging in Scotland. It is estimated that no less than 100,000 people attended.

### 3. HOLMES AND CRIMINAL DOCTORS

Now that we have seen who these two illustrious gentlemen were, we can fully understand how Holmes' words befit the context. Dr. Grimesby Roylott – the villain of “The Adventure of the Speckled Band” – is not, in fact, unworthy of comparison with these two great criminals. We may in fact say that his use of a poison not recognizable by Western science puts him on an even higher level. In the long list of “white coat murderers” his name is not a second rank one.

But both these cases show wonderfully two of the typical features of the killer doctor that we discussed at the beginning. The Palmer case is emblematic for his use of scientific method to criminal ends. He probably employed antimony in a clever way to weaken his victim, before giving the final blow with a moderate dose of strychnine: a technique already employed by another great poisoner, T. G. Wainwright, who is also cited by Sherlock Holmes<sup>6</sup>. It is also the first conviction for murder committed by strychnine poisoning, and the first case in history where toxicology played a starring role on a criminal trial. That same science which gave Palmer the means to kill turned against him. We can be sure that Holmes, with his great interest for chemistry, studied this case accurately and deeply.

Pritchard, from the point of view of criminal method, was not as clever or as innovative as Palmer: in his case, it is his talent as an actor that strikes us most. Until the traces of poison were found in the bodies, his friends, his family and the public at large were on his side and believed in his innocence. Pritchard is a typical example of a murderer who exploits his social position, his good manners and the prestige of the medical class to create a presumption of innocence for himself.

So we fully understand why both these cases are paradigmatic for the *cliché* of the “white coat murderer” and it becomes obvious that Holmes chooses them as an example among all possible cases of “killer doctors”. “Among the heads of their profession”, Holmes says: maybe Palmer and Pritchard were not at the head of the *medical* profession, but as murderers we must (so to speak) raise our hats to them as to first-class criminals.

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<sup>5</sup> Cf. Macleod 1876.

<sup>6</sup> Cf. Doyle 1981: 987.

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## ABSTRACT

Sherlock Holmes is described by his biographer as being in possession of an “immense knowledge” of criminal history. He substantiates this claim by frequent casual references to particular criminal cases. Dr. William Palmer and Dr. Edward Pritchard, two infamous examples of “killer doctors”, are cited by the detective as typical specimens of what heights – or depths – a murderer can reach when he has the “nerve and knowledge” granted by a scientific medical training. We shall give a brief biographical sketch of these two illustrious gentlemen and we will show that Holmes’ fears are not without fundament – indeed, the medical profession has given more than its fair share of murderers. The scientific method of diagnostic medicine, which can be so useful in criminal detection, has proven to be very useful also to many a ruthless and cunning assassin. Holmes, who was ahead of his time in combining medical semeiotics and detective work, was also prophetic in pointing out how terrible a threat to society a criminal doctor can be.