

NARCOPOLIS: THE SECRET LIFE OF OPIUM IN THE CITY

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Abstract: A textbook case of a pharmakon, opium turned from a panacea to a dangerous narcotic in just two centuries. The history of opium, like that of tobacco, illuminates the complex relationships between Europe and its others: brought from East Asia already endowed with an aura of exotic Orientalism, it soon turned into a cure-all. Prescribed by doctors for every kind of pain, even to small children, laudanum (opium tincture) became the favourite medicine of both the low and the upper classes in the 18th century. In Confessions of an English Opium-Eater, De Quincey associates his opium consumption and the development of addiction with the city – and it is a fact that Victorian London was heavily criticized for its opium dens. My paper proposes to investigate the secret paths that led from the city to opium taking and smoking and from opium to the city as they are reflected in the literature of the Romantic and Victorian period.

Keywords: cultural studies, opium, pharmakon, detective novel

I. Introduction

Opium is as old as the world and by virtue of its antiquity it is the archetype of all drugs. The story of its discovery, use, misuse, mutation and transformation illuminates hidden connections between seemingly contradictory or unrelated aspects of cultural history. A plant of joy (as the ancient Summerians called it) or a flower of evil, the poppy plant which constitutes the source of opium and its derivatives (morphine, codeine and heroin) was either glorified as a goddess of healing¹, associated with the Gods, transformed into the effigy of Empire (it appeared on the Roman coins), praised by scholars, physicians and poets, or became, like Helen of Troy², the bone of contention and the reasons for two violent wars in the 19th century, between the British Empire and the Chinese. The 19th century can be dubbed the century of opium, as it figured so prominently in the cultural and artistic life of the century as well as in the socio-political and economic debates. This extreme visibility of opium in all contexts and environments was due to its large consumption for both medical and recreational purposes. A popular remedy for colds, coughs and diarrhea since Hippocratic medicine, as well as an efficient painkiller, in early and mid Victorian England (at least until 1868³, when the first regulations concerning the use of opium are enforced) opium was

¹ In ancient Crete archaeologists discovered the statue of a female deity, crowned with poppy pods, which they called “The poppy goddess, patroness of healing” (Goldberg and Latimer 22)

² It is interesting to note that Homer, one of the first to mention opium in literature, under the name of ‘nepenethe’, associates it with Helen of Troy, who gives a mixture of wine and opium to Telemachos to drink. (Goldberg and Latimer 25)

³ Opium could be sold not only by chemists and pharmacists, but also by travelling merchants. In 1868, the Pharmacy Act limited the sale of dangerous drugs to registered chemists and pharmacists.

used freely on a wide scale⁴, mostly in the form of laudanum, and even given to infants to sleep or as a remedy during teething⁵.

II. First Discourse on Opium: Opium as a *Pharmakon*

Although the addictive power of opium was known to a greater or smaller extent, it never entered public discourse until the publication of the now famous *Confessions of an English Opium-Eater* by Thomas De Quincey. In his introduction, De Quincey places the habit of opium-eating in a meaningful context, one which will be later reproduced on a large scale by a series of drug addiction fighting methods: that of addiction as a guilty practice in which only the weak indulge:

If opium eating be a sensual pleasure, and if I am bound to confess that I have indulged in it to an excess not yet recorded of any other man, it is no less true that I have struggled against this fascinating enthrallment with a religious zeal, and have at length accomplished what I never yet heard attributed to any other man – have untwisted, almost to its final links, the accursed chain which fettered me. (IX-X)

This understanding of addiction became possible, of course, in the larger European context of the classic and scholastic tradition and later of Puritan thinking, in which slavery to the senses was equated with excess and conducive to suffering, sin and death. To fight “a fascinating enthrallment” with a “religious zeal” and finally to break “the accursed chain” – these are the marks of the religious discourse of deliverance from sin and evil. Like any reformed sinner, De Quincey is quick to start missionary work himself: he admits that one of the reasons for which he wrote the *Confessions* was to do service to the whole class of opium eaters, by (we are left to infer it) showing them the “path to salvation”. The word “class” has already raised some doubts in the readers’ minds, so De Quincey provides some astonishing facts: there is indeed a class of opium eaters, and it is growing; this class knows no barriers of social class, for both rich and poor indulge in the habit; and that most opium eaters can be found in the cities⁶. The workers, De Quincey quotes the opinion of the cotton manufacturers indulge in this practice because of the “lowness of wages, which at that time would not allow them to indulge in ale or spirits” (XIII). Though De Quincey is doubtful that the “divine luxuries of opium” can substitute the “gross and mortal enjoyments” (XII) of alcohol, the explanation for this new addiction of the masses of workers can be found in the conditions of city life itself. The city of the Industrial Revolution was far from being an ideal of order and hygiene and De Quincey himself, in relating the story of his addiction, goes back to the uncertainty, poverty and misery he had experienced in London as a homeless runaway from his Oxford College. It is in London that De Quincey had his first experience of opium, seeking relief from severe facial pain and it is London as the Leviathan of misery and suffering that led to his daily use of opium years later, following chronic stomach pain. The beginnings of addiction, De Quincey remarks, were not at all connected with sensual pleasure, but

⁴ As an interesting aside, Queen Victoria was prescribed morphine for menstruation pain. Morphine became so fashionable after the invention of the hypodermic needle that ladies used to inject themselves with morphine during intermissions at the Opera, a fashionable habit at the time.

⁵ In the Ebers papyrus, Egyptian doctor-priests recommended a mixture that contained opium as a remedy against the crying of babies. This tradition was still in use in Victorian England, where mothers dosed their babies with various mixtures like “Street’s Infant Quietness”. (Goldberg and Latimer 23)

⁶ “Three respectable London druggists, in widely remote quarters of London [...] assured me that the number of amateur opium eaters (as I may term them) was at this time immense; and that the difficulty of distinguishing those persons to whom habit had rendered opium necessary from such as were purchasing it with a view to suicide, occasioned them daily troubles and disputes. [...] on passing through Manchester, I was informed by several cotton manufacturers that their workpeople were rapidly getting into the practice of opium-eating; so much so that on a Saturday afternoon the counters of the druggists were strewed with pills of one, two, or three grains, in preparation for the known demand of the evening. (XI-XII)

with “mitigating pain in the severest degree” (17). This pain was the consequence of the extreme hunger he had experienced while a vagrant in London. The description of his early life in one of Europe’s most important capitals is shocking to a contemporary reader, for whom it is hard to imagine what it would be like to live sixteen weeks only with a “few fragments of bread from the breakfast table of one individual” (32). Sleeping in a cold unfurnished room populated by rats and with almost nothing to eat, he was saved by a prostitute, who provided him “the bare necessities of life.” (41) After developing what seemed to be a chronic ulcer, De Quincey starts taking opium for pain relief. In effect, opium gives relief from “the calamities of my noviciate in London, [which] had struck root so deeply in my bodily constitution, that afterwards they shot up and flourished afresh, and grew into a noxious umbrage that has overshadowed and darkened my latter years”(60). The first experience of that “celestial drug” as he calls it, opens up the gates of paradise:

That my pains had vanished was now a trifle in my eyes; this negative effect was swallowed up in the immensity of those positive effects which had opened before me, in the abyss of divine enjoyment thus suddenly revealed. Here was a panacea, a φάρμάκον for all human woes; here was the secret of happiness, about which philosophers had disputed for so many ages, at once discovered: happiness might now be bought for a penny, and carried in the waistcoat pocket; portable ecstasies might be had corked up in a pint bottle, and peace of mind could be sent down in gallons by the mail-coach. (66)

There is a subtle change of discourse in this passage: the meanings attached to opium switch from the ascetic, religious discourse of the introduction and enter a gray area of indeterminacy: opium becomes a panacea, a cure-all able not only to minister to physical pain, but also induce euphoria and happiness. This is the discourse of addiction: a *pharmakon* for all human woes, opium can be bought for very little money, carried in the pocket by the user and transported by the mail-coach for the benefit of the whole class of opium users. Yet what is a *pharmakon*? De Quincey, a passionate scholar of Greek, as he himself acknowledged, must have been familiar with the meaning of *pharmakon* in ancient Greek: a drug that can act both as a remedy and a poison. In “Plato’s Pharmacy”, Derrida notes the anti-rational, mythical and alchemical connotations of the *pharmakon*, which operates “through seduction”, making “one stray from one’s general, natural, habitual paths and laws.” (70) The logic of the *pharmakon* opposes the logic of binaries through its very ambivalence that makes it untranslatable: it can mean remedy, poison, philter, drug, recipe, charm, spell, medicine and substance. In “Relational ecology and the digital *pharmakon*” Bernard Stiegler takes up Derrida’s concept of the *pharmakon* and relates it to Simondon’s concepts of the technical object as an extension of the human body, and to the process of individuation as mediated by *pharmakon*-like activities and games. Reversing Stiegler’s argument, not only can technology be defined as a *pharmakon*, but the *pharmakon* itself can be interpreted as a technology, a technology of the body, a biotechnology. It is no wonder, therefore, that the age of the Industrial Revolution both demanded and created the market for such biotechnologies. First the volatile conditions of the transition from an agricultural to an urban society, the misery and poverty associated with the disorder engendered by perpetual change, the increasing instability that more and more people came to experience with regard to their working and living environments, all these could be countered by the magical power of opium, the plant of oblivion, the *pharmakon* for all human woes, as De Quincey wrote. A biotechnology for preserving both physical and mental health, opium still remained a *pharmakon*: all technologies are susceptible of reversing their beneficial action and turning into a poison with misuse.

The whole of *The Confessions* is structured around the idea of opium as a *pharmakon*, first introducing the reader to “The Pleasures of Opium”, and then to “The Pains of Opium”. Many

commentators have noticed that the Pleasures are far more elaborate, and the vivid descriptions of opium dreams do not seem to act as a deterrent for a potential addict. Yet, while “The Pleasures of Opium” focuses a bit too much on the positive qualities of that celestial drug, “The Pains” occupies the most part of the confessions. What are, in truth, the effects of opium, and what kind of biotechnology can it be?

Apart from its ability to soothe pain and induce sleep, opium can offer the consumer access to another world, or in the words of De Quincey “the opium eater [...] feels that the divine part of his nature is paramount; that is, the moral affections are in a state of cloudless serenity, and over all is the great light of the majestic intellect.” (70-1) De Quincey dissents from the general opinion of his time that “the elevation of spirits produced by opium is necessarily by a proportionate depression, and that the natural and even immediate consequence of opium is torpor and stagnation, animal and mental.” (73), an opinion based on the Orientalist bias of his contemporaries, who associated opium with the laziness and torpor of the Turks, Chinese, Indians and other Eastern nationalities. De Quincey himself is not free from the prejudice of Orientalism, attributing the torpor of the opium-eating Turks to their ethnic make-up and not to opium itself, and then proceeding to show how an Englishman like himself is affected by its consumption. The discourse clearly shifts towards Orientalist stereotyping, with De Quincey proclaiming himself a kind of spiritualized, intellectual opium abuser: he confesses that he used to take laudanum before going to the Opera, in order to enhance his perception of music:

The choruses were divine to hear, and when Grassini appeared in some interlude, as she often did, and poured forth her passionate soul as Andromache at the tomb of Hector, &c, I questioned whether any Turk, of all that ever entered the Paradise of Opium eaters, can have had half the pleasure I had. But indeed, I honour the barbarians too much by supposing them capable of any pleasures approaching to the intellectual ones of an Englishman. (75-6)

Another occasion when De Quincey confesses that he has enjoyed taking laudanum was on his trips around the poor areas of London. The image that he paints of himself re-visiting the slums that had been the early theatre of his suffering point to a possible interpretation of De Quincey as a trauma subject feeling the compulsion to be present at the site of the trauma-inducing event and of his addiction as an effort to cope with that trauma: “For the sake, therefore of witnessing, upon as large a scale as possible, a spectacle with which my sympathy was so entire, I used often on Saturday nights, after I had taken opium, to wander forth, without much regarding the direction or the distance, to all the markets and other parts of London to which the poor resort of a Saturday night, for laying out their wages.” (78) His ramblings through the labyrinth of London are partly wanderings through the labyrinth of traumatic memories⁷, which he tries to heal with the relaxation and euphoria induced by opium: in this sense opium becomes “the plant of oblivion”. In De Quincey’s case, it is probable that opium did not only treat his chronic ulcer, but also his psychic depression, and it is therefore no wonder that for him it was a “celestial drug” (both a painkiller and an antidepressant) for many years. De Quincey’s wanderings anticipate what Soares called the “Victorian tradition of urban exploration” (9), a practice that was the prerogative of the upper class, whose members ventured into the slums of London, documenting the appalling conditions of the London poor. According to Soares, it was this tradition of urban exploration which divided the city into the East and the West, contributing to the infamous reputation of the

⁷ “Some of these rambles led me to great distances, for an opium-eater is too happy to observe the motion of time; and sometimes in my attempts to steer homewards [...] I came suddenly upon such knotty problems of alleys, such enigmatical entries, and such sphinx’s riddles of streets without thoroughfares, as must, I conceive, baffle the audacity of porters and confound the intellects of hackney-coachmen. I could almost have believed at times that I must be the first discoverer of some of these terrae incognitae, and doubted whether they had been laid down in the modern charts of London.” (79-80)

East End, the very area which decades later was to become the residence of Chinese sailors and the opium den.

As with all narcotics, after repeated use, tolerance sets in and then increased doses are necessary in order to produce the same effects. The moment when he switches from what he calls a dilettante consumption of opium to daily use, and then to increased doses of laudanum is described by De Quincey as the start of “The Pains of Opium”. He puts forward all the self-justifications of addiction: that he “was attacked by a most appalling irritation of the stomach, in all respects the same as that which had caused me so much suffering in youth, and accompanied by a revival of the old dreams.” (86-7) At the same time he is quite conscious that addiction represents an infirmity, although he tries to present it in a way that would not affect his self-image: “I am too much of an Eudaemonist: I hanker too much after a state of happiness, both for myself and for others; I cannot face misery, whether my own or not, with an eye of sufficient firmness, and am little capable of encountering present pain for the sake of any reversionary benefit” (88).

The pains described by De Quincey match the standard textbook description of the symptoms and signs associated with long term opium dependence: damage to the brain which manifests as an inability to concentrate: “[its] palsyng effects on the intellectual faculties” (103), which developed into a “sense of incapacity and feebleness” (108); altered perceptions of time and space: “Space swelled and was amplified to an extent of unutterable infinity. This however, did not disturb me as the vast expansion of time; I sometimes seemed to have lived for 70 or 100 years in one night” (111) and an increased anxiety which translates itself in disturbing visions, first of vast architectural complexes, succeeded by “dreams of lakes and silvery expanses of water: these haunted me so much that that I feared [...] that some dropsical state or tendency of the brain might thus be making itself (to use a metaphysical word) *objective*” and finally by what De Quincey calls “the tyranny of the human face” (116). He blames his London experience for these nightmares⁸, and admits that “there is no such thing as forgetting possible to the mind; a thousand accidents may and will interpose a veil between our present consciousness and the secret inscriptions on the mind; accidents of the same sort will also rend away this veil; but alike, whether veiled or unveiled, the inscriptions remain forever” (112). We have here, in a nutshell, the Freudian theory of trauma as an event that cannot be integrated into the self, and thus never finds resolution, closure or healing, of repression, and if we take into account the earlier story of the compulsion to revisit the site of his early trauma, of traumatic fixation: thus the picture is complete. The most tormenting of his visions prove to be, quite interestingly, associated with the Oriental. De Quincey acknowledges his deep-seated horror towards all things Asiatic and Oriental. His descriptions of the Oriental seem to borrow their atmosphere from the Gothic-Oriental terror of William Beckford’s *Vathek*. The roots of his terror lie, according to him, in the apparent lack of humanity, rationality and individuality that he sees as the main feature (stereotyped, of course) of the Oriental: “Southern Asia in general is the seat of awful images and associations. [...] The mere antiquity of Asiatic things [...] is so impressive that to me the vast age of the race and name overpowers the sense of youth in the individual. A young Chinese seems to me an antediluvian man renewed.” (117) The Orientalist stereotyping continues, in an accumulation of negative images: “southern Asia is, and has been for thousands of years the part of the earth most swarming with human life,

⁸ “Perhaps some part of my London life might be answerable for this. Be that as it may, now it was that upon the rocking waters of the ocean the human face began to appear; the sea appeared paved with innumerable faces upturned to the heavens – faces imploring, wrathful, despairing, surged upwards by thousands, by myriads, by generations, by centuries: my agitation was infinite; my mind tossed and surged with the ocean.” (116-7)

the great officinal gentium. Man is a weed in those regions.” (118) De Quincey’s xenophobia is blown out of all proportions in the nightmares induced by his opium addiction:

I was stared at, hooted at, grinned at, chattered at, by monkeys, by parroquets, by cockatoos. I ran into pagodas, and was fixed for centuries at the summit or in secret rooms; I was the idol; I was the priest; I was worshipped; I was sacrificed. I fled from the wrath of Brahma through all the forests of Asia: Vishnu hated me: Seeva laid wait for me. [...] I was buried for a thousand years in stone coffins, with mummies and sphinxes, in narrow chambers at the heart of eternal pyramids. I was kissed, with cancerous kisses, by crocodiles; and laid, confounded with all unutterable slimy things, amongst reeds and Nilotic mud. (118-9)

Somewhere, at the bottom of these horrendous visions, hidden under the fear of strangers, lies another fear, unacknowledged: the fear of opium, the “golden drug of Asia” (Abrams 3). The celestial drug finally shows its other side as a *pharmakon*, and De Quincey reacts like any rational, modern Westerner: he demonizes what he cannot control.

De Quincey’s case was not singular at the time, and it is almost a strange coincidence to see his fate repeated by another literary figure, less known perhaps: the poet Francis Thompson (1859-1907). In his introduction to Thomson’s poetry, Wilfried Maynell, the man who had rescued him from the streets of London, calls him a poet of high thinking and “celestial vision”. The celestial vision of Thomson owed as much to his mysticism as to his addiction to opium. The circumstances of his addiction were similar to De Quincey’s, as Meynell duly notes in his introduction: “Biography strangely repeats itself, not in common mental experience only, but also in uncovenanted details of fact and incident. Like De Quincey, whose writings he took into his blood, Thompson had a nervous illness in Manchester; like De Quincey he went to London, and he knew Oxford Street for a stony-hearted stepmother” (www.gutenberg.org)

M. H. Abrams, in his famous study on the effects of opium on the works of De Quincey, Coleridge, Thompson and Crabbe, noted that, in spite of De Quincey’s warnings in his *Confessions*, his book had the opposite effect, sparking interest for and introducing new addicts, like Francis Thompson, to the opium. “A misfit medical student wandering ill and friendless in dingy Manchester” (22), under the influence of the *Confessions*, his mother’s last gift before her early death, it was unavoidable, Abrams thinks, that he should resort to opium for relief.

A devout Catholic and deeply religious man, Thompson, who wanted to become a priest but was forced to study medicine, never discussed his addiction directly, regarding it as a sin that had to be conquered. His “phantasmagoric” poetry, as Abrams calls it, full of striking imagery, may bear evidence for the intensity of his opium dreams. Yet Thompson was first and foremost an ascetic character, and in his poetry he struggles more with himself and his weakness rather than adopt the more descriptive, open and scientifically-minded attitude of De Quincey, who regards himself as the subject of a new experience. The only poem where the reader can find an allusion to opium is “The Poppy”, which ends with a sad meditation on disillusion:

The sleep-flower sways in the wheat its head,
Heavy with dreams, as that with bread
The goodly grain and the sun-flushed sleeper
The reaper reaps, and Time the reaper.

I hang ‘mid men my needless head,
And my fruit is dreams, as there is bread
The goodly man and the sun-hazed sleeper
Time shall reap, but after the reaper

The world shall glean of me, me the sleeper. [...]

Love! I fall into the claws of Time:
 But lasts within a leaved rhyme
 All that the world of me esteems—
 My withered dreams, my withered dreams.

III. Second Discourse on Opium: Xenophobia and the Detective Novel

The discourse of addiction underwent a sea change after the two opium wars and the waves of Chinese immigration to London's East End.⁹ It may be interesting to note that while opium-eating was treated as a medical practice associated with undesired effects like addiction, opium-smoking, as a habit brought by the Chinese sailors and immigrants who settled in London in the 19th century was definitely regarded as morally corrupting and physically unhealthy. The negative perception of opium-smoking was due, according to Soares, to the “accounts of Chinese opium dens” which “regularly appeared in the popular press and literature, veiled with overtones of mystery and moral depravity” (4). This switch to a more negative perception of opium becomes visible in the literature of the time, where opium comes to figure as a ‘villain’ or a ‘culprit’ in the newly emerging genre of the ‘mystery’ and the detective novel. As such opium is the perfect candidate, being endowed with a mysterious exotic aura, a double personality and certain evasiveness. An addict of laudanum himself, Wilkie Collins introduces opium as one of the main characters in what is considered to be the first English detective novel, *The Moonstone*. In the end it turns out that the theft of the moonstone diamond had been the result of a narcotic trance induced by laudanum. To his astonishment, Franklin Blake finds out from the detective that it had been he who had stolen his fiancée's diamond, after Mr. Candy¹⁰, the doctor, had given him a dose of laudanum without his knowledge. The popular opinion towards opium is now completely reversed, as we are given to understand from the detective's defense of the doctor: “Every medical man commits that act of treachery, Mr. Blake, in the course of his practice. The ignorant distrust of opium (in England) is by no means confined to the lower and less cultivated classes. Every doctor in large practice finds himself, every now and then, obliged to deceive his patients as Mr. Candy deceived you.” (449) Because Blake shares the popular opinion, that of the anti-opium propaganda that had developed as a result of fear, xenophobia and racism, he is ignorant of the effects of opium and thus liable to fall an innocent victim to the drug. In the course of their conversation, as Blake confesses that he cannot understand how the opium could induce him to perform so many actions when the influence of opium was “to stupefy you and then send you to sleep”, the detective warns him that this is a common misconception. As a reliable source of information on the action of opium he quotes none other than De Quincey's *Confessions*, then he proceeds to explain the effects of opium: “The action of opium is comprised, in the majority of cases, in two influences – a stimulating influence first, and a sedative influence afterwards” (456) and to offer a detailed picture of Blake's crime. The detective's idea of opium is still that of a *pharmakon*, for opium is both capable of determining Blake to commit a crime and, astonishingly, of helping the detective to

⁹ Foxcroft cites two important personalities who were against and for opium: while William Gladstone declared that “he was ‘in dread of the judgments of God upon England for our national iniquity against China’ for he was passionately convinced of ‘an overriding conscientious conviction of the hypocrisy of the government’”, Macaulay argued against the exclusion of “a drug which if judiciously administered, was powerful in assuaging pain, and in promoting health, because it was occasionally used to excess by intemperate men” (qtd. in Foxcroft 66)

¹⁰ A strangely foretelling name, as “candy” later came to refer to drugs such as cocaine, or more specifically crack.

solve it: “I am, at this moment, exerting my intelligence (such as it is) in your service, under the influence of a dose of laudanum, some ten times larger than the dose Mr. Candy administered to you.” (455).

The first case of drug-aided ratiocination in detective fiction is not the last one, for the habit was taken up by another world-famous detective, Sherlock Holmes, an occasional user of morphine and cocaine, which provided stimulation for his over-active brain. However, Arthur Conan Doyle paints a darker picture of opium and opium addiction in his story “The Man with the Twisted Lip”. This negative picture of opium, which led to the popular misconceptions and errors dispelled by Collins’ detective, is first and foremost the result of the opium addiction gradually entering social consciousness, affected by the negative stereotypes of the dingy Chinese opium dens, the moral decay and physical degeneration associated with opium addicts. Because of the opium wars, opium addiction had become synonymous with Chinese weakness, and the presence of East London opium dens had generated a widespread fear of the European character getting ‘infected’ by the low morals of the ‘Oriental’. As Foxcroft remarks,

The portraits of opium dens and opium addicts [...] presented the reader with the same lost figures, the same sulphurous yellowed and wizened visages of smokers and the same poisonous, sickly atmosphere. The corruption, filth, degeneration, and the revulsion felt by the visitor from some cleaner, purer, rational, Christian English place, all made their rhetorical appearances time and time again. Ideas of foreignness and sickness were wedded together by these descriptive devices and they acted directly on xenophobic and nosophobic anxieties. [...] The very passivity of opium smoking had become a positive threat, and the perceived rise of the practice in England, fuelled by xenophobic accounts, was understood to be a symptom of racial degeneration. Even the persistent use of the word ‘yellow’ to describe the Chinese coincided with the colour of decadence (75)

In “The Man with the Twisted Lip”, Isa Whitney, the opium addict whom Dr. Watson is sent to rescue from an opium den is described along the same lines “with yellow, pasty face, drooping lids, and pin-point pupils, all huddled in a chair, the wreck and ruin of a noble man” (229). Doyle, who as a doctor possessed a wider knowledge of the effects of drugs and toxins, also adds a common symptom of opium use: pin-point pupils (myosis), a frequent sign of opioid consumption. The image of the opium den is again one of the staple images of the period:

Through the gloom one could dimly catch a glimpse of bodies lying in strange fantastic poses, bowed shoulders, bent knees, heads thrown back and chins pointing upward, with here and there a dark, lack-lustre eye turned upon the newcomer. Out of the black shadows there glimmered little red circles of light, now bright, now faint, as the burning poison waxed or waned in the bowls of the metal pipes. The most lay silent, but some muttered to themselves, and others talked together in a strange, low, monotonous voice, their conversation coming in gushes, and then suddenly tailing off into silence, each mumbling out his own thoughts and paying little heed to the words of his neighbor. (231)

As spaces of a rarefied sociality, where everybody hardly notices anybody, the opium dens constitute the perfect background of crime – and it is because of the decadence, moral misery and corruption commonly associated with these places that the habit of opium-smoking (unlike the private, more individualized use of laudanum) acquires negative connotations both in the media and the fiction of the period. It not only doctor Conan Doyle that uses the dark atmosphere of opium addiction in the opium dens to create a mystery worthy of the reasoning powers of a Sherlock Holmes - Dickens himself had made use earlier of this staple space in his unfinished novel *The Mystery of Edwin Drood*. Dickens’s Lascar, who fights his invisible enemies with a

“phantom knife”, will turn afterwards into Doyle’s “rascally Lascar”, the owner of an opium den where on moonless nights bodies are dropped into the Thames through a trap door. Even the story of the man with the twisted lip, a character who leads a double life - as a respectable middle class gentleman and a beggar in the City - and who had accumulated his wealth by disguising as a beggar has a certain undeniable Dickensian feel. In Dickens, however, the emphasis is, as ever, on the moral and social consequences of opium smoking, a vice that is subtly associated with the pretense and the double life led by Jack Jasper and a propensity to crime. A respectable choirmaster during the day, at night Jasper secretly heads towards the opium den, indulging in opium smoking together with a Chinaman and a Lascar to assuage the pains of an unrequited love. The *pharmakon* quality of the drug, initially perceived by De Quincey as opening a vista to another world (be it heavenly or hellish) has now mutated into human consciousness itself, whom it splits, thus leading to the creation of a schizophrenic Dr. Jekyll/Mr. Hyde personality. Dickens’ description of Jasper after indulging in opium-smoking is that of a man who has lost control of himself and his reason: “His memory grew dazed.[...] and a dimness and giddiness crept over him as strange as I ever saw” (12). The idea of killing his nephew in order to get hold of his fiancée will be quick to enter such an unguarded mind, seems to be Dickens’ moral point, and the double consciousness induced by his life of perpetual pretense will help Jasper cover up his tracks and lay the blame on somebody else.

IV. Conclusion

The history of opium can be interpreted as the history of any technology: first a biotechnology of escape (a double escape, from the pains of the body and the misery of the city of the Industrial Revolution), opium is celebrated for its potential of carrying the body-soul into different dimensions of space-time. When addiction sets in, a whole host of evils appears, for addiction and regular use imply some form of social organization of consumption. As long as opium is sold by British chemists and the administration of choice is ingestion, opium is regarded as a *pharmakon*, both remedy and poison and consumption is regulated by reason. However, after the opium wars and the waves of Chinese immigration to London, the perception of opium changed. As a cultural practice of the Oriental other, opium-smoking and opium dens acquired pronounced negative connotations and were associated with the all the negative stereotypes that haunt European Western consciousness: the lazy, effeminate and corrupted Easterners (Turks, Malays, Lascars and Chinamen), a split consciousness, perversity and crime. Opium then makes its entrance in the world of the detective novel, first with *The Moonstone*, which still retains the ambiguity of De Quincey’s description, and where opium figures as both an accessory to crime and an aid in the ratiocination process which solves the crime. In Conan Doyle’s “The Man with the Twisted Lip” opium-smoking and opium dens figure exclusively as the background of crime. Dickens’ fiction, pervaded by a more sensitive social consciousness, not only associates opium-smoking with the criminal mentality, but makes an inquiry into the roots of this problem. The character of Jack Jasper, the choirmaster turned opium smoker, points to the split consciousness which lies at the root of all pretense and dissimulation, and takes a step forward in the conceptualization of opium as a *pharmakon* – from now on, the effects of opium, instead of being directed outwards, towards the imagination/simulation of other worlds are internalized, and the ambiguity that characterized these effects is translated into consciousness itself. This internalization of the dangerous effects of opium parallels the modern concern for the uncontrolled and unpredictable aftereffects of technology in what Ulrich Beck called the postmodern “risk society”. Like any technology, a drug

needs strict regulations and control in order to exercise its function properly – and the evolution of pharmacy in the 20th century, with all the emphasis on its regulating and controlling bodies, with its comprehensive theories of addiction, of adverse and side effects testifies to an increasing tendency towards developing strategies of management and control. However, returning to Stiegler in the last instance, who noted that the *pharmakon* represented “the addictive structure that constitutes human life” (30) and that “the human being is structurally an addicted being”¹¹ (my translation), one has to admit that the lure of narcotics is still very powerful, and that the contemporary city is far from resisting it.

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¹¹ Here is the original quotation in French: “la question du pharmakon – lequel, selon moi, represente la structure addictive qui constitue la vie humaine. Pour moi, l’etre humain est un etre structurellement addict”