The Bard on the couch: psychiatrists diagnose Burns with a case of blues

EXCLUSIVE
BY JUDITH DUFFY

He famously wrote of mood swings and bouts of melancholy which he described as “blue devilism”. Now experts are using modern psychiatry methods to analyse the mind of Robert Burns and settle the question of whether he may have had a mental health illness.

The idea that Scotland’s national poet could have had bipolar disorder has sparked huge debate since first being mooted around 20 years ago.

The project being carried out at Glasgow University is examining everything from the Bard’s letters to his relationships and day-to-day life in a bid to establish if he had a psychiatric disorder.

Moira Hansen, principal researcher and PhD student on the project, said little mention had been made of Burns’s mental health until the mid-1990s, when it was suggested he could have suffered from recurrent depression or bipolar disorder.

She said retrospective diagnosis of famous figures from the past was usually carried out looking at biographies and second-hand accounts.

“What really makes our project different and new is the vast majority of our data is coming from Burns himself, through his letters, his journals and his commonplace books,” she said.

“What we have done is to build a methodology based on the modern clinical standards used in relation to mood disorders and we have identified 12 different areas across activity, behaviour and state of mind.”

She added: “From that, we can go through and track all of his correspondence and highlight points in his life which look interesting as he might be suffering from abnormal moods which might be clinically significant.”

Hansen said this included looking at aspects of his life such as his social appearances and behaviour, how much sleep he appeared to be getting, his alcohol consumption and his extra-marital affairs.

She said bouts of apparent depression could be pinpointed – such as in December 1786, when Burns was a rising star of the Edinburgh literary scene, but writes pessimistic letters which also complain of headaches and a stomach complaint.

“By January 1787, he is writing to a friend saying I would really just like to go back to farming,” Hansen said.

“It is an interesting juxtaposition where you think everything should be wonderful and he should be high as a kite, but actually what we are seeing is someone who is going out and doing what he needs to do to make a living and really putting a brave face on it.

“When you read modern accounts of people who are affected by depression, that is a theme you hear repeated over and over again.”

The initial findings of the four-year project, which is funded until 2019, will be presented at a conference being held by the University of Glasgow’s Centre for Robert Burns Studies at the Robert Burns Birthplace Museum in Alloway, Ayr on Saturday coming.

Hansen believes there is compelling evidence for Burns suffering recurrent depression, but more research is needed to establish if he also had bouts of mania which may point to a diagnosis of bipolar disorder.

However, she added that trying to establish if Burns had a mental health condition was only one aspect of the project, which would result in a new...
understanding of his mood state in the last 10 years of his life and how it affected his life and creativity.

She added: “We are not looking to apply labels, it is about getting a better understanding of the individual. It is really only now perhaps we can actually start looking at this as we are seeing real progress made in the destigmatisation of mental health issues.

“Another aspect of the project which is really important is that talking about Robert Burns and his mental health gets people talking about their own mental health.”

Daniel Smith, professor of psychiatry at Glasgow University, who is supervising the project, said it was an attempt to take an objective approach to analysing the mental health of Burns.

“People have previously written about famous people and mental illness and been quite selective with the evidence they have used to support their conclusions,” he said.

“We are keen to ensure we don’t do that and are going to look at aspects such as the family tree of Burns, because we know that bipolar disorder is substantially a genetic disorder and it runs in families.”

He added: “Ultimately we are trying to point out that just because someone has a serious mental illness it doesn’t mean they can’t achieve great things. Hopefully we can address some of the stigma as well.”

The data for the Glasgow University project about Burns’s mental health is coming from his own letters and journals

Image: National Portrait Gallery, Edinburgh