Medical Imagery in the Poetry of Sylvia Plath

Ralph Didlake, M.D.
Center for Bioethics and Medical Humanities
The University of Mississippi Medical Center

Powerful imagery is a hallmark of Sylvia Plath’s poetry. Carefully-wrought and strongly evocative images of mythologic figures, of the sea, of mirrors, and of faces are found throughout her verse and have been well-discussed in the extensive body of literature that covers her work. Somewhat less well-discussed is her use of poetic imagery derived from illness, from medical environments, and from anatomic pathology. The relative lack of analysis of these medical images, as a group, becomes quite conspicuous when one considers the frequency with which such images occur across the spectrum of her poetry. Beginning with a selection from her juvenilia, the poem “Morning in the Hospital Solarium,” written when she was only in her late teens, quite accurately describes the milieu of a Mid-20th Century American hospital. Plath uses this setting skillfully to fully capture the limbo of a convalescing patient, existing in a suspended state physically, psychologically and socially as he or she hovers somewhere between illness and health. This same theme resurfaced when she wrote “Miss Drake Proceeds to Supper,” an even more elegant exploration of the purgatory-like state of the hospitalized patient. The following seven years of her mature poetic career, extending from 1956 to her death, are recorded in the 198 poems that begin with “Miss Drake” and end with “Edge;” as published in The Collected Poems edited by Ted Hughes.1 Of these, at least 46, almost one-fourth, contain a reference, an image, a setting or a theme directly traceable to medicine, disease or pathology.2 Some of these references are quite subtle, even esoteric, such as the “zinc-white snow” of “Yaddo: The Grand Manor” which recalls the zinc oxide ointment commonly used by physicians of the 1950’s as a drying agent and skin protectant or the “soft caulis of forgetfulness” that appears in “Flute Notes from a Reedy Pond”, the fifth part of “Poem for a Birthday” and refers to a segment of

2 See Appendix (pp. 143-144) for a list of these poems.
amniotic membrane that may cover a baby’s head during delivery. Equally subtle medical references that contribute dramatic images to her work include the red lotus found in “Three Women” that represents a freshly-delivered placenta and the double meaning of ichor in “The Burnt-out Spa.” Other images in her medical repertoire are more overt; the drunken fetus and the “catgut stitches” that appear at the end of “Poem for a Birthday,” the “radical surgery” referred to in “Elm,” the placenta and the x-ray in “Medusa” and the steel wheelchairs and aluminum crutches that contribute to the complex fused images of “Berck-Plage.” Direct and unambiguous references also appear in “Stillborn,” “Whitsun,” “Zoo Keeper’s Wife,” “Face Lift,” “The Other,” “A Birthday Present,” “Thalidomide” and the list simply goes on.

Others have noted the power of Plath’s pathophysiological references, including Steven Axelrod, who referred to Plath’s images of the injured body and psyche as “breath taking.” Claire Brennan observed that her “work is filled with body images....” and commented on the brilliance with which these references connect with recurrent feminine motifs. In his analysis, Adam Kirsch points out that Plath was even willing to violate social taboos in using pathologic images, such as the preserved fetus, in order to heighten the impact of her poetry. References to illness and pathologic body images are also common in Plath’s prose. Tracy Brian, in her consideration of The Bell Jar, commented on the effective use of “sickness” to represent not only the distortion of gender roles but also broad socio-political themes.

Given the frequency of medical imagery and pathophysiological references in Sylvia Plath’s writing, it is both reasonable and logical to ask what forces account for the recurrent appearance of these references. If one attempts to answer this question from a purely mechanistic viewpoint, three factors can be identified that contribute to her familiarity with things medical. The first of these is a series of relationships that Plath developed with medical students and physicians. These associations have been

---

extensively documented both in her published journals and in her various biographies. The most influential of these relationships was with a student at Harvard Medical School whom she dated during her college years and who provided the basis for the character Buddy Willard in *The Bell Jar*. This was a complex and ultimately difficult friendship, but it was the sort that Plath seemed to seek for intellectual stimulation. This specific relationship as a source of medical reference for her writing can be supported in two ways. The first is based on a unique characteristic of the American medical student. Medical educators consistently recognize that the intensity of medical education creates an insular culture among their students. This culture results in a type of self-absorption in which leisure time, casual conversation, and even personal relationships become immersed in the subjects they are studying and the clinical events they encounter. The characteristics of this culture during the very time period in which Plath was dating a medical student have been well documented. There is no reason to doubt that Sylvia Plath was subjected to this phenomenon on her dates with her medical student boyfriend and, as a good writer, that she absorbed the medical vocabulary to which she was exposed and filed it away for future use.

The second and ultimately more important contribution of this relationship was that it led to a visit the couple made to a Harvard anatomy lab and in the fall of 1952. Reports of this excursion describe that she observed a variety of anatomic specimens, including fetuses preserved in glass containers. In addition, she witnessed a vaginal birth that required an episiotomy. Images of this visit can be seen in much of her subsequent prose and poetry, but the lasting impression of what she observed is perhaps best seen in her repeated reference to the human fetus. These references, however, are never as the fetus *in vivo*, as a developing life in the warmth and security of a mother’s womb, but universally *in vitro*, under glass as a specimen. The normally developing, healthy fetus can serve as a powerful image of a suspended state, but this image is even more powerful when secondarily suspended, indefinitely, in preservative. The lasting impression of her

---


hospital tour is demonstrated not only by the persistence of this fetus image in her poetic works, but also by the fact that this excursion was fictionalized in *The Bell Jar*, and may well have contributed to the origin of the bell jar symbolism.

The second factor that contributed to Sylvia Plath’s access to medical imagery was a series of work experiences in medical environments. In the summer of 1953, as a nurse’s aid at Newton-Wellesley Hospital, her duties included feeding patients who could not help themselves.10 This experience almost certainly provided the image found in the poem “A Life,” where Plath creates a “frank” landscape to express a sense of sterility and desolation by using an evocative medical reference in the lines:

“A woman is dragging her shadow in a circle / About a bald, hospital saucer.”

Her experience with feeding patients may also be seen in the imagery used to express the ambivalence of her anticipation in “A Birthday Present” in which she wrote,

“Let us eat our last supper at it, like a hospital plate.”

Observation of a functioning hospital ward from the perspective of an observant nurse’s aide is also quite consistent with the images of “Whitsun,” where people are “sipping the thin / Air like a medicine” and the people are “idle / As if in hospital.”

Plath’s second job in a medical environment was that of a clerk in the outpatient psychiatric clinic at Massachusetts General Hospital in Boston. This experience is most fully expressed in her prose works, “Johnny Panic and the Bible of Dreams” and “The Daughters of Blossom Street.” Plath’s attraction to this type of medical setting as a work environment was likely not accidental. In a 1962 interview with author Peter Orr, she revealed:

I think if I had done anything else I would like to have been a doctor. This is the sort of polar opposition to being a writer, I suppose. My best friends when I was young were always doctors. I used to dress up in a white gauze helmet and go round and see babies born and cadavers cut open.”11

---

There can be little doubt that working in a clinical environment not only added to her extensive catalogue of medical references and images but also contributed to the ease with which she turned to them in order to create effective verse.

A third exposure to medical settings was through her considerable personal experience with health problems. Plath, by age 30, had experienced recurrent acute sinusitis, a fractured leg, a traumatic sexual encounter, recurrent depression, psychotherapy, electroconvulsive therapy, insulin-induced shock treatments, injuries associated with a suicide attempt, childbirth, miscarriage and an appendectomy. This history of medical conditions represents a level of exposure to physicians, nurses and hospitals that is significantly greater than the norm. Her familiarity with medical care as a patient, coupled with her work experience gave her a 360 degree view not only of disease and illness but also of our human response to disease and illness. This is a unique perspective that even individuals who are directly engaged in health care often do not have.

Plath had also experienced a direct and personal exposure to disease through the illness and death of her father. At age fifty-five, Otto Plath sustained a minor injury to one of his toes which became extensively infected. He was subsequently diagnosed with insulin-dependant diabetes mellitus and over the next three months endured amputation of the infected toe, periods of convalescence at home and ultimately an above-knee amputation of his leg. In early November of 1940, while recovering in hospital from the second amputation, the elder Plath suffered a fatal pulmonary embolus. Eight-year-old Sylvia was not isolated from her father's illness. Her direct connection to this experience is recorded in a poignant family photograph in which she is dressed as a nurse to help those caring for her father while he was recovering at home. The profound impact of this event on her life and work has been central to the critical analysis of both her biography and her oeuvre. These three factors, her acquaintances, her work experience and her personal struggles with illness, as resources for her writing, were enhanced by a fourth factor that was arguably one of her most important tools as a writer. That tool was her practiced artist’s eye. The fact that she was not a casual observer of her surroundings

---

and that she worked very hard to capture the detail that was visible around her is well described in her journals. The importance of this skill to her work was also acknowledged directly by Ted Hughes in his introduction to *Johnny Panic and the Bible of Dreams*.  

The analysis that has been sketched thus far tells us only that a specific set of experiences made medical imagery available to her and that these experiences added a specific genre to her catalogue of emotion, insight and perspective from which she could draw for effective metaphors, images, themes and references. However, it tells us nothing of why these images surface so often across the spectrum of her work. A superficial consideration of this question might suggest that medical images and settings represent a source of healing or possibly a place of refuge. One might be forgiven for this interpretation after reading the journal entries surrounding her 1961 admission to Saint Pancras Hospital in London for an appendectomy. The prose of these entries is sparkling, even mirthful, and conveys a lighthearted sense of security with her surroundings. This perspective is also suggested in “Among the Narcissi,” where her neighbor’s recuperation and mending from “something on the lung” has dignity and formality. When viewed through the lens of professional medical and surgical experience, many of Plath’s images are sophisticated and have the familiar, comfortable appeal of an insider’s knowledge. However, to be distracted by their medical sophistication or to read them as soothing, emollient, or medicinal is naïve. A more realistic perspective supports the notion that Plath employed hospital and disease imagery to create surreal or alien landscapes in which isolation, fear and dread are the dominant features. While this may be true, I submit that this reading is also incomplete. One might ask if any insight resides in the fact that many of her medical images are gynecologic or obstetrical in nature. Certainly this may relate to themes of birth, death and rebirth in Plath’s work, about which so much has been written. However, one might consider her disease-associated imagery to be less about life and death than it is about the boundary between life and death, or the boundary between existence and non-existence. It seems less important in many of Plath’s poems to examine on which side of this boundary one might reside than it is to examine the nature of the boundary itself. It is, in a very

---

concrete way, the boundary that defines us. The idea that examination of this defining borderland is important to a full appreciation of Plath’s medical imagery resonates strongly with the work of Pamela Annas, who stated that “[T]he dialectical tension between self and world is the location of meaning in Sylvia Plath’s late poems.”14 In this context, disease, deformity and illness, whether physical or psychiatric, become powerful metaphors for that which degrades or destroys the boundary between self and non-self. Again and again, Plath calls upon the images of disease, pathology and disability to blur the border between the whole, healthy and able self and the rest of the world. The collection of pathophysiologic images, or to use the proper medical term, images of morbidity in her poems not only contributes to a meaningful exploration of the interface between wholeness and disintegration, but also brings form to the forces of nature that quite literally eat away at our self-definition. Using these very same images, Plath was also fully equipped to explore the borders that defined those close to her, specifically her father. In order to express the complex emotions surrounding her father’s illness and death, Plath again brought forth references to disease and pathology that represent the natural forces that alter the image we have of others and that ultimately rob us of our loved ones. In poems such as “Electra on Azalea Path,” the defining borderland between the poet and her father is populated with amputation stumps, physical decay, gangrene, dismemberment and prosthetic limbs. The recurrence of similar images in other poems that relate to her father’s death is nothing less than a horribilis fascinans, or a scene to which she is compelled to return again and again.

The use of images drawn from medicine and pathology to describe a defining borderland brings us directly back to the suspended state of the fetus. The normal fetus transiently inhabits the borderland between self and non-self. The persevered or aborted fetus is a permanent resident and cannot be delivered from the fate to which it has been consigned. Many other writers have exploited the power of this compelling metaphor. The fetal image, normal and otherwise, has served diverse genres to represent suspension, isolation, anomaly, and the process of self-definition. Examples range from Virginia

---

Woolf’s explicit description of politically objectionable poetry as “horrid abortions”15 to Randall Jarrell’s more subtle allusion to the fetal state of the ball turret gunner.16 Aldous Huxley17, Stanley Kubrick, Arthur C. Clarke18, and Mary Shelley19 all found effective purpose for this emotionally rich image in their enduring works.

For Sylvia Plath, a specific set of life experiences made the fetus, as well as a broad array of other medical and pathophysiologic images familiar to her and available for her to use. These were uniquely suited both to the style and themes of some her most evocative verse. Poems such as “The Surgeon at 2 a.m.,” “Two Views of a Cadaver Room” and “In Plaster” represent highly-developed examples of Plath reaching deeply into her extensive repertoire of medical imagery in order to illuminate the dark borderland of self-definition.

Perhaps the most haunting example, however, is found in the poem Kindness. Here she skillfully selects a medical reference to convey the collapse of all distinction between her self and her work and the world into which both were flowing without hope of control. In her words:

“The blood jet is poetry,
there is no stopping it.”

---

Appendix: 46 Poems with significant medical imagery

24. Miss Drake Proceeds to Supper
66. Virgin in a Tree
67. Perseus: The Triumph of Wit Over Suffering
86. The Death of Myth-Making
93. The Eye-mote
99. Two Views of a Cadaver Room
100. Suicide off Egg Rock
101. The Ravaged Face
102. Electra on Azalea Path
107. Old Ladies’ Home
111. Yaddo: The Grand Manor
119. Poem for Birthday
   5. Flute Notes from a Reedy Pond
   7. The Stones
120. The Burnt-out Spa
124. Stillborn
132. A Life
133. Waking in Winter
134. Parliament Hill Fields
136. Zoo Keeper’s Wife
137. Face Lift
139. Barren Woman
141. In Plaster
142. Tulips
151. The Surgeon at 2 a.m.
155. The Babysitters
157. Three Women: A Poem for Three Voices
161. Among the Narcissi
163. Elm
167. Berck-Plage
168. The Other
171. Burning the Letters
175. The Courage of Shutting-Up
176. The Bee Meeting
180. Wintering
184. Medusa
189. Amnesiac
191. Cut
196. Nick and the Candlestick
198. Lady Lazarus
200. Getting There
203. Thalidomide

---

20 Numbers next to the title as given in the HarperPerennial The Collected Poems.
215. Totem
217. Paralytic
220. Kindness
222. Contusion