Paper:

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Technologies of the Body: Polite Consumption and the Correction of Deformity in Eighteenth-Century England

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Abstract
Advertisements for a variety of products aimed at correcting or concealing physical ‘deformities’ – including rupture trusses, artificial limbs, and more elaborate machines to correct posture by straightening the spine – were prominent features of later eighteenth-century newspapers. This article examines ways in which these products offered ways of fashioning the body that not only restored functional capability, but also offered aesthetic improvement, producing a shape that both appeared ‘natural’ and was pleasing to others. Indeed, although many technologies of the body may have been intended first and foremost to restore the injured to economic productivity, manufacturers used a language of polite commerce to address users not as medicalized ‘patients’ but as sophisticated consumers. The development of these products took place against a cultural shift in which using artificial means to effect physical ‘improvement’ lost its previous association with pride and became prescribed as a duty for those wishing to succeed in polite society. This article shows how concepts of politeness and technologies of the body were interwoven in complex and surprising ways, and uses its material to question the status of these products as ‘medical’. In the process, it examines the ways in which suppliers addressed the aspirations and experiences of ‘deformed’ consumers in the eighteenth-century world of goods.

In April 1790, Mr Dowling of Duke’s Court, London, maker of elastic rupture trusses, took out an advertisement to inform readers of his multifarious stock. To ‘Gentlemen of the Faculty and others’ he boasted goods for a wide variety of afflictions, from elastic and bag trusses for ruptures to ‘Ancle and knee pieces’ to ease swollen or distorted legs, ‘bow legs and knock knees’. For ‘ladies’ especially there were products to aid deportment and posture, such as ‘Neck swings and chairs, Monitors and Dumb bells’. ‘Bodily deformities’, he argued, ‘could be remedied in appearance, so as not to be distinguished from perfect nature’. Other products followed, catering for everything from

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medical complaints to postural irregularities. Dowling's advertisement was typical of the new warehousing strategies of eighteenth-century artisans and retailers but it also highlights a key point: namely that products aimed specifically at, and produced for, the body were an important part of the later eighteenth-century world of goods. Dowling was one of a number of prominent suppliers positioning themselves as specialists in the body, restoring the misshapen to a 'natural' form, not only helping to restore function to the bodies of the impaired, but also training the bodies of those who sought success in polite society.

Products aimed at correcting acquired or congenital defects were not new to the eighteenth century, but during this period such goods proliferated, thanks to innovations in design and materials, the expansion of advertising through trade cards and the national press, and improvements in infrastructure which allowed them to be sold to a wide clientele. Recurrent warfare stimulated the market for artificial limbs and rupture trusses. At the same time, a variety of orthopaedic devices aimed at reshaping the contorted body, making it more socially pleasing. The uses of these technologies of the body have begun to attract the attention of historians. Lynn Sorge-English has charted the development of the most ubiquitous of body corrective garments, the stays, exploring their role in fashioning slender-waisted female silhouettes, remedying the perceived deformities of women’s bodies. Liliane Hilaire-Pérez and Christelle Rabier have located hernia trusses within the broader context of eighteenth-century medical retailing. They were part of a burgeoning market for medical technologies, which enjoyed a close relationship with artisanal innovation in metallurgy and, in particular, steel. However, much research on bodily technology has focused on the post-1800 period, characterized by Stanley Reiser as one in which medicine became increasingly reliant on technology, profoundly influencing the relationship between doctor and patient. Although Hilaire-Pérez and Rabier have shed new light on the complex international networks of trade in medical technologies during the eighteenth century, their primary focus is on the ways in which commercial interactions stimulated technological innovation rather than the broader cultural concerns about the body that informed the strategies of marketing used by suppliers. Expanding on this recent work, this article takes a broader view of bodily technologies, showing how advertisements for orthopaedic technology melded concerns about social

1 Advertisement for ‘DOWLING, IMPROVED PATENT ELASTIC TRUSS MAKER, The World, 21 April 1790.
4 Carsten Timmermann and Julie Anderson (eds), Devices and Designs: Medical Technologies in Historical Perspective (Basingstoke, 2006); Stanley Joel Reiser, Medicine and the Reign of Technology (Cambridge, 1978).
propriety with assertions of medical utility in mending the body. Studying the development of devices aimed to correct or conceal physical ‘deformities’ provides a unique insight into the convergence of technological progress and cultural values in eighteenth-century England.

This raises questions about how we should ‘locate’ bodily technologies within the social, cultural and medical histories of Georgian England. As we shall see, although suppliers such as Dowling made overtures to ‘Gentlemen of the [Medical] Faculty’, the status of these products as purely ‘medical’ is open to question. Indeed, a striking characteristic of advertisements was their use of the language of polite commerce, selling items such as prosthetics not merely as a means of alleviating suffering, but also as objects of taste and technological innovation that in turn defined the consumer in terms that went beyond the medicalized ‘patient’. Other bodily technologies were advertised as being serviceable in moulding the body into a socially agreeable form, fit for social interaction, remedying the body’s unsightliness that held it back from social or commercial success. Products were sold as offering an aspirational ideal, of a body well trained and capable of pleasing (or at least not frightening) others, its defects smoothed out. This article argues that orthopaedic products belonged as much to the culture of politeness, with its emphasis on agreeableness, decorum, effectiveness and taste, as they did to the medical marketplace.\(^5\) As Lawrence Klein argued, politeness was a polymorphous term that encompassed a variety of contexts and meanings.\(^6\) For our purposes, Klein’s emphasis upon the importance of form and simplicity in understanding politeness are key. Whilst form has generally been applied to things such as deportment, language and behaviour, we argue that physical form was in fact no less important. Technologies of the body sought to alter the material fabric of the body to a more harmonious whole which, we argue, itself acted as a vector or metaphor for politeness. In this sense, elements such as form, simplicity and elegance were as relevant to the physical body as they were to word and gesture. To understand this further, it is first necessary to examine the meanings of eighteenth-century ‘orthopaedics’ and their role in fashioning a ‘polite’ body.

I

The typical early modern body bore testament to its exposure to a world of sickness. Boils, excrescences, intumescences, goitres and other facial disfigurations, although removable, were more likely to be left intact.


\(^6\) Klein, ‘Politeness’, p. 871.
Diseases such as rickets affected posture and gait, while other more or less serious afflictions affected both appearance and motor skills. Hard physical labour took its toll on the bodily fabric, while the rough and dangerous working conditions of the armed forces begot a virtual army of mutilated servicemen.

In the eighteenth century, responses to ‘deformity’ took a variety of forms, ranging from the development of new procedures undertaken by an increasingly self-confident hospital-trained surgical elite to treat fractures or tackle spinal deformity and congenital defects, to the promotion a number of preventative measures to improve infant health and feeding that would stop deficiencies from developing in the first place. Although few questioned the purpose of assistive technologies such as wooden legs or rupture trusses in restoring the maimed and injured to economic productivity, the use of artificial methods to conceal deformities whose consequences were more aesthetic than functional was more contested. The debate hinged on two key questions: first, whether it was ever acceptable to ‘improve’ the wonders of God’s creation by artificial methods, and second, what was the appropriate response to the ‘affliction’ of bodily difference? At its most superficial level, the debate focused upon the morality of improving appearance by means of painting and other cosmetic adornment. Although seventeenth-century Puritans had deeply distrusted cosmetics as a means of hiding blemishes or beautifying the face, viewing them as evidence of sin, pride or the false allure of the harlot, after the Restoration the use of ‘artificial embellishments’ to improve on nature’s imperfections became more widely accepted. Whilst the prostitute’s painted face might entice ‘the unwary into her Embraces’, noted the author of the *Ladies Dictionary* (1694), it might be acceptable for a ‘virtuous Lady’ to attempt to beautify her complexion and conceal its defects for the ‘Decency and Credit of her family’ or to please her spouse. For afflictions that were more than skin deep, however, many writers emphasized that it was a religious virtue to accept patiently what God had willed. Works of popular piety such as *The Whole Duty of Man* advocated a ‘quiet yielding’ to affliction, urging readers to follow the biblical example of Job in bearing with life’s misfortunes. Those who took excessive measures to hide their impairments were mocked for their affectation. The

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10 Richard Allestree, *The Whole Duty of Man Laid Down in a Plain and Familiar Way for the Use of All, but Especially the Meanest Reader* (1657) London, 1714), pp. 34, 37. See also Mary E. Fissell, ‘The disappearance of the patient’s narrative and the invention of hospital medicine’, in
popular eighteenth-century joke book, *Joe Miller’s Jests*, remarked that although the ‘infirmities of nature’ were ‘not a proper subject to be made a Jest of’, it was ‘ridiculous’ to ‘take a great deal of Pains to conceal what every body sees’.11

However, although bearing with bodily deformity might be a private moral virtue, for some writers the ‘deformed’ or ‘defective’ body challenged the notions of social ‘ease’ embodied in developing concepts of politeness. On the one hand, the culture of politeness, with its emphasis on accommodation, provided an ethical model for accepting physical difference. Eighteenth-century conduct literature instructed readers that it was ‘rude to jeer, laugh or revile any for their Deformity’ or to do anything that made people ‘sensible of their weakness in point of parts’, such as staring at them.12 However, more often the ‘deformed’ body was presented as raising barriers both to personal success and to polite social interaction. ‘The crooked body may perhaps yield service, but never gaine repute’, wrote the author of one Restoration guide to bodily improvement. The body ought to be a ‘palace’ that showed to best advantage a person’s talents, rather than a ‘prison’ that immured them.13 Eighteenth-century social commentators frequently remarked upon the ‘dismal’ sight of visibly maimed, limbless or diseased bodies on the streets of London, which jarred with the image of the capital as a centre for polite commerce and sociability. ‘Such miserable objects’, wrote a correspondent to the *Spectator* in 1712, ‘affect the compassionate Beholder with dismal Ideas, discompose the chearfulness of his Mind, and deprive him of the Pleasure that he might otherwise take in surveying the Grandeur of the Metropolis’.14 Visible ‘deformity’ made others uneasy and threatened the virtuous social interaction or ‘conversation’ that lay at the core of notions of politeness. ‘We are born for one another, and ought to shun having any thing about us that is shocking’, proclaimed the surgeon, Nicolas Andry, setting out the principles of his *Orthopaedia*, translated into English in 1743. For someone to ‘neglect his Body, so as to let it become ugly’, was not only anti-social, but also defied God’s intentions.15 Early orthopaedics was therefore defined primarily in terms of aesthetic improvement rather than restoration of functional ability.16

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13 [Jeamson], *Artificiall Embellishments*, pp. 1, 2.
15 Nicolas Andry, *Orthopaedia: Or, the Art of Correcting and Preventing Deformities in Children* (2 vols; London, 1743), I, 36.
Andry’s guide was aimed at genteel parents and emphasized that the removal of imperfections ensured a child’s future social success. Writing in 1745 an enthusiastic English reviewer lauded Andry’s message about the need to take care of the ‘gracefulness’ of the body and mocked those parents who might make a virtue of deformity, such as the puritanical mother who, to prevent her ‘very beautiful daughter’ becoming proud, ‘was always bidding her to hand down her Head, bend her neck forwards, and walk with her Feet inwards, for this Reason, that one ought to avoid pleasing the world’.17 Following Andry, later eighteenth-century English suppliers of corrective devices also aimed their products at concerned parents. In An Essay on the Various Causes and Effects of the Distorted Spine (c.1783) the truss-maker Timothy Sheldrake junior argued that the removal of ‘deformities of children’ was important as ‘not only their appearance is disagreeable, but by impeding the function of the viscera, they will in time destroy that balance of the constitution which is so necessary to health and longevity’.18 His rival truss-maker J. Sleath offered to visit girls’ boarding schools within ten miles of London to measure and provide ‘Ladies Backs and Collars of entire steel’, stays and ‘every other instrument to correct, improve, or conceal a defective shape’ to pupils who needed them.19 Whilst Orthopaedia provided numerous remedies for ‘deformities’ its approach was not to ‘medicalize’ the body, but to ‘train’ or cultivate it. Its most famous image, which represented the use of irons to straighten a child’s crooked leg through the example of a sapling tethered to a post, drew on a horticultural metaphor that was common in eighteenth-century pedagogy.20 Brandy Schillace has shown how the education of girls in particular drew on this horticultural rhetoric, stressing the need to ‘cultivate’ but also to restrain untamed growth, instilling from an early age virtuous ‘habits’, just as a gardener tamed nature through training and pruning of plants.21 Complementing prescriptions for manners which set out the art of pleasing in company, works like Orthopedia set out a code of corporeal manners that would avoid giving offence by concealing or remedying imperfections.

The idealized body conformed to eighteenth-century neo-classical ideas of aesthetic perfection whose qualities have been well established in recent historical studies of the ‘body beautiful’.22 For both sexes, posture was key. The spine was the axis upon which the

20 Andry, Orthopaedia, p. 211.
22 Roy Porter, Bodies Politic: Disease, Death and Doctors in Britain, 1650–1900 (London, 2001), pp. 68–9 and ch. 2 passim.
well-proportioned body was set, and good posture bespoke the proficient bodily control deemed essential to success in guides to polite deportment.23 ‘When the spine is strait, well set, and finely turned, it makes a handsome Body’, argued Andry, ‘and when it is crooked and ill turned the body is Deformed’.24 Good posture and a straight spine exemplified manly authority but were also crucial to making a ‘fine shape’ which was seen as especially valuable to the ‘fair sex’ in enhancing their marriage prospects.25 A cadre of specialist postural practitioners plied their trade in eighteenth-century London, from dancing masters offering deportment training, to suppliers of ‘machinery’ for straightening the body, examined in more detail below.26 However, other parts of the body were also important for communicating ‘quality’ and good breeding. According to Andry, ‘fine hands’ were one of the ‘greatest ornaments of the Body’, and ‘roughness’, ‘hairiness’ and condition of the hands helped to distinguish ‘Persons of a superior rank’ from labourers whose ‘deformities’ resulted from manual work.27 Furthermore, ‘crooked’ legs caused, according to Andry, by allowing children to ‘walk too soon, before their legs have acquired sufficient strength to support the weight of the Body’ needed to be remedied by the application of irons to avoid a ‘clownish awkward way of walking’ in later life.28 Assistive technologies therefore aimed at correcting defects in ways that supported the broader project of training in manners espoused elsewhere in manuals of politeness.

II

The proliferation of bodily technologies in the mid to late eighteenth century occurred against the backdrop of a cultural shift, whereby using artificial means to conquer natural or accidental ‘deformities’ lost its association with pride and vanity and was recommended not just for a person’s health, but also as a tool of acceptance, success and social status. It was also a product of artisanal innovation across a broad range of new and existing materials. The things people bought, and the price at which they could buy them, were being revolutionized by new materials. In 1770s Birmingham, Matthew Boulton’s manufactory turned out fashionable imitation silverware made of new alloys such as

28 Ibid., pp. 210, 216.
'Ormolu', as well as inventing new plating techniques.\textsuperscript{29} The things people wore were altered by the discovery of substances like benzene, which revolutionized the dyestuffs industry.\textsuperscript{30} Products for the body were an important part of this process. Makers experimented with various materials, from leather and rubber to cork, using their natural properties for specific effects. It was, however, newly invented cast steel that was arguably the most transformative in terms of possibilities for the material alteration of the body. In many respects cast steel was the enlightened metal. Durable and lustrous it found use across a wide range of manufacturing outputs. Capable of carrying an extremely hard edge it was well suited to instrument manufacture, from lancets and razors to amputation knives. Its aesthetic qualities rendered it a desirable item of couture in the form of steel jewellery for which there was a growing vogue in the later eighteenth century. One of its most important attributes, however, was its tensile, springy strength, a characteristic that makers of bodily technologies were able to exploit.\textsuperscript{31} This could be utilized to counteract skeletal deformity and literally force the body back into the desired shape, whilst also allowing the wearer some freedom of movement. A useful side benefit was that it was also capable of carrying a high polish, meaning that some products could be made decorous as well as functional.

One common affliction to which new technologies were increasingly applied was the ‘rupture’ or hernia. The Parisian truss manufacturer William Blakey estimated that fully 10 per cent of the population of Europe were afflicted with ruptures.\textsuperscript{32} The hard and physical work of life at sea, for example, rendered sailors particularly susceptible to inguinal hernias, so much so that the Royal Navy’s Sick and Hurt Board ordered large numbers of trusses from London makers, at the rate of five per hundred men in case of need, and ordering extra trusses for those already ‘ruptured’.\textsuperscript{33} Ruptures were unsightly, ranging from small but noticeable lumps in the scrotum or abdomen to full extrusion of the intestines. Trusses were doubtless designed primarily to support or ‘hold up’ the hernia. But, as discussed below, they also hid the deformity, giving the illusion of a ‘natural’ body.

In London, as in northern Europe, truss makers and traders proliferated. The Blakey family, for example, supplied a number of

\begin{itemize}
  \item \textsuperscript{32} Pérez-Hillaire and Rabier, ‘Self machinery?’, p. 473.
  \item \textsuperscript{33} Patricia Kathleen Crimmin, ‘British naval health, 1700–1800: an improvement over time?’ in Geoffrey L. Hudson (ed.), \textit{British Military and Naval Medicine, 1600–1830} (Amsterdam, 2007), pp. 183–200, at pp. 187, 197.
\end{itemize}
metropolitan traders in France and Germany as well as opening shops in London and supplying other traders there. Manufacturers rode a wave of public interest in new technologies and began to embellish their advertisements with the language of the new science. A 1795 advertisement by the London truss maker J. Eddy is typical. Rather than trusses, bandages and stockings, what Eddy was supplying were nothing less than ‘machines’ and ‘instruments’. Others positioned themselves as metallurgical innovators to supplement their knowledge of the body, stressing their embrace of modish new cast steel. In 1744 J. Meares of Ludgate Hill was one of the first to emphasize his own ‘peculiar method’ of manufacturing steel trusses, stating that ‘nothing but a STEEL TRUSS, judiciously made, will do every Thing requir’d’. Trusses were available across the country and those by well-known London makers, such as Sheldrake, could be purchased from dealers in fashionable provincial towns such as Bath.

It was not only steel trusses that were in vogue; a large number of elastic trusses also sought to alleviate the pain and discomfort of ruptures, and were virtually ubiquitous. Whilst little evidence supports all-out conflict between manufacturers of the two types of trusses, some makers did attempt to claim the high ground. The wearer of Robert Brand’s ‘True Elastic Truss’ was assured of the ‘Blessings of Ease and Health’. Brand boldly stated that ‘the cure of Ruptures is beyond the reach of Dimity Waist Bands, or Iron Trusses (dignified with the Names of Steel and Spring Trusses)’ and scolded the medical faculty for ignoring the merits of his products. J. Eddy was another maker whose elastic and suspending trusses sat alongside a wide range of corrective products from ‘laced stockings for swelled legs’ to artificial limbs, steel backs and collars, and dumb bells for ‘exercising and opening the body’.

Metallurgical innovation also underpinned other types of product, particularly those that promised to correct spinal deformity. Much advertising space was devoted to products such as ‘backirons’, ‘steel backs’ and collars. Backirons were large pieces of metal concealed at the reverse of the wearer’s clothes to prevent slouching and promote a straight spine. Steel collars were discrete devices worn to uphold the chin. In either case, straightness was all. In an imagined series of letters

36 For example Mrs Eren of Barton Street, Bath, who sold various items ‘on the plan of Sheldrake’. See Bath Chronicle, 30 April 1795, and also advertisement ‘Ruptures are Cur’d, if Curable . . . ’, Bath Chronicle, 3 Jan. 1782.
38 Advertisement, J. Eddy, ELASTICK TRUSSES for RUPTURES, BEARING DOWN in WOMEN &c’, The World, 1 April 1790.
from a country parson to his son in 1765, for example, a father comments upon the new fashion for ‘straightness’ and the increasing reliance on technology for achieving it, citing the conduct of a ‘matron’, who, ‘to prevent her daughter from dropping her chin into her bosom, threw it up into the air by the aid of a steel collar’.40

Another postural device was the ‘neck swing’, introduced into Britain around 1750 by a Parisian medical entrepreneur, Monsieur Le Vacher.41 This was a ponderous device for stretching the spine. The wearer was encased in a steel collar affixed to an apparatus that was further attached to the waist. One English patient described her experiences of using this machine as a child. Every morning she was ‘suspended in a neck-swing, which is merely a tackle and pulley fixed to the ceiling of the room; the pulley is hooked to the head-piece of the collar, and the whole person raised so that the toes only touch the ground’.42 Despite the apparent discomfort (indeed pain) caused by this apparatus, it was widely sold by a number of London makers in the eighteenth century, including Dowling and Eddy.43

Of all products aimed at correcting the body, perhaps most striking were artificial limbs. Prosthetic technologies had existed in some form since ancient times, but by the sixteenth century there was a growing division between devices that were strictly functional, such as the peg legs doled out to poor amputees, and more sophisticated prosthetics that not only restored movement but actually resembled the missing body part. The French surgeon Ambroise Paré, for example, included in his book *Of the means and manner to repair and supply the defects of Mans Body*, designs for hands and legs made artificially from iron, with internal springs and cogs to provide flexibility and movement.44 By the eighteenth century, advancements in prosthetic technology symbolized enlightenment, as testaments to mankind’s progress in understanding the mechanics of the human body and imitating nature’s complexity. A correspondent to *Lloyd's Evening Post* in May 1762 described the artificial arms made by Monsieur Laurent of Bouchain as works of ‘most exquisite workmanship’ for being ‘in the natural proportion’ and being moveable by ‘threads in imitation of the natural tendons’.45 By the end of the eighteenth century, advertisements for artificial limbs frequently adopted the language of scientific ‘improvement’. For instance, Thomas

41 Evans, ‘Crucible steel’, p. 86.
43 For example ‘DOWLING, IMPROVED PATENT ELASTIC TRUSS-MAKER, removed from No. 8, to No. 10, Duke’s Court, St. Martin’s Lane.’, *The World*, 21 April 1790; ‘J. Eddy, ELASTICK TRUSSES for RUPTURES, BEARING DOWN in WOMEN &c’, *The World*, 1 April 1790.
45 *Lloyd's Evening Post and British Chronicle*, 14–17 May 1762.
Ranby Reid’s patent artificial leg was presented in an advertisement of 1794 as ‘A DISCOVERY very interesting to MUTILATED PERSONS’, having ‘astonishing powers of performing every useful motions both in knee, Ankle, and toes, perfectly in imitation of the natural leg’.

Manufacturers faced a series of challenges in designing limbs or hands that were both ‘natural’ and functional. The ‘cork leg’, popularized by the marquess of Anglesey in the early nineteenth century, was famed for its realistic appearance, being ‘exactly the shape of the natural leg, and so ingeniously contrived with elastic strings and joints, as to play at the ankle and knee with the same facility, and accommodate itself to every movement in sitting down and walking’. Replicating movement was (and still is) a considerable engineering challenge for limb makers, but more pressing issues for wearers of prostheses seem to have been their durability and weight. Materials that were too lightweight might break, whereas heavier materials exhausted the wearer and defied fashioning into realistic shapes. Correct fitting was also important to avoid exerting too much pressure on the sensitive stump. These technological and aesthetic challenges were examined in a 1793 article in the Gentleman’s Magazine on the inventions of Gavin Wilson, an Edinburgh boot maker who had pioneered the manufacture of artificial limbs using hardened leather. Wilson’s prosthetic leg was ‘equally useful with the common timber-leg’ but was ‘preferable for being neater, at the same time that it is not liable to break, an accident to which the others are very liable’. It was ‘considerably lighter’ than a copper leg and had a system of belts, straps and buckles which meant that the stump of the amputated limb hung ‘quite free within the case of the artificial leg’, rather than taking the wearer’s weight. This, in ‘the most effectual manner [.], prevents the pain and excoriation which otherwise would be apt to happen from the friction of the stump against the machine’.

Like other manufacturers, Wilson combined different materials according to their properties and in response to consumer needs, employing steel technology to assist those whose legs had been amputated above the knee. Here a joint was formed in the artificial leg at the knee-pan, and when the wearer walked the limb was ‘made steady by a steel-bolt, running in two staples on the outside of the thigh, being pulled down; and when the patient sits down, he renders the joint flexible by pulling the bolt up’. The article also explained Wilson’s methods for permitting movement in his artificial hands and arms. The wrist joint was made using a ‘ball and socket, and answers all the purposes of flexion, extension, and rotation’, whilst the first joints of the

46 Advertisement for Thomas Ranby Reid’s patent artificial leg, Sun, 24 May 1794.
47 The Morning Chronicle, 16 Sept. 1815.
thumb and fingers were also ‘balls and sockets made of hammered plate-brass, and all the balls are hollow to diminish their weight’. According to the author, Wilson’s ‘genius’ displayed in his inventions ‘not only remedied the deformity arising from the want of a natural limb, but in a great measure supplied that loss, in itself one of the most distressing that can befall any individual’.

III

The Gentleman’s Magazine described wearers of Gavin Wilson’s prosthetics as ‘patients’, but the extent to which correctional technologies were considered ‘medical’ is debatable. On the one hand, manufacturers and vendors of trusses and artificial limbs attempted to bolster their credentials by emphasizing their anatomical knowledge or links with the medical establishment. In writing treatises on the cause of distorted spine and ‘club foot’, as well as selling products for their remedy in his shop at 50 The Strand, Timothy Sheldrake junior clearly sought scientific credibility for his products and used his publications as a means of distancing himself from mere ‘mechanics’ who simply saw corrective instruments as ‘article[s] of trade’. Holmes and Laurie, who made and sold trusses, steel bodices and all kinds of other ‘Instruments for the Lame, Weak or Crooked’, advertised themselves as ‘workmen to St Bartholomew’s, St Thomas’s, Guy’s, St George’s, The Middlesex and Foundling Hospitals, and the London Infirmary’ in their trade card of 1766, which reflected the importance of hospitals as providing a regular source of income. Nevertheless, despite often boasting their medical credentials, truss-makers did not necessarily position themselves as medical practitioners. Some even distanced themselves from medicine, instead presenting themselves instead as specialists in fashioning the body. J. Eddy, for example, specifically differentiated himself from ‘quacks and Rupture Doctors’ to promote his own products. Denouncing quacks was an obvious strategy for a maker eager to claim the moral high ground in the medical marketplace, but the implication is also that he sought to distance himself from medical practice in general. In another advertisement, Eddy was even more explicit, stating that he could intervene where ‘either Medicine or Surgery’ had failed.

To refract bodily technologies solely through the lens of ‘medical’ usage is problematic in so far as it can obfuscate the often-important social meanings that could often be attached to them. Eddy’s apparent

50 Ibid.
51 Ibid., p. 308.
53 London Metropolitan Archives [hereafter LMA], Trade Cards Collection, SC/GL/TCC/Holmes and Laurie (1766); Hilaire-Pérez and Rabier, ‘Self Machinery?’, p. 486.
54 Advertisement for ‘New invented trusses for the rectum and womb’, The World, 15 Jan. 1788

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reluctance to ally himself with the medical faculty, whether orthodox or otherwise, seems telling, and suggests that body technologies were not necessarily regarded as strictly medical items. Indeed, this point is made by Hilaire-Pérez and Rabier, who locate the production of rupture trusses within the eighteenth-century ‘toy’ trade. ‘Toys’, in this context, refer to small, consumer trinkets from decorative to functional items but imbued with desirability by fashionable adornments or materials. Eddy apparently did not view himself as a medical practitioner, but instead as a maker of corrective devices.

If the devices themselves were not necessarily ‘medical’, then the impaired body itself was no less ambiguous. As well as correcting the body, the makers of a variety of devices sought to persuade the afflicted that a ‘natural’ body was perfectly achievable. But what was this body? As we have seen, in some devices such as the cork leg, the goals of correction and concealment overlapped. Prosthetic limbs were clearly functional and restored mobility to sufferers; but they also restored the body to balance by creating the illusion of a ‘whole’ body, thus allowing the sufferer to rejoin society, passing as a ‘normal’ participant. Requiring only purchase and, presumably, some direction from the maker, the market for bodily technologies appears to fit well within the self-help culture of early-modern medicine. Nonetheless, an idealized body was beyond the mere restorative function of medicine. It brought into play a range of social and cultural factors, from self-image to public scrutiny of bodily difference. In making their products as discrete as possible, and in obscuring the vagaries of errant nature, manufacturers could capitalize, and perhaps even play upon, the bodily concerns of ‘deformed’ consumers. More than this, however, some devices offered the impaired the chance to present their bodies as conforming to normative or idealized shapes. This was an important point. Deformity was noticeable and noticed; it was literally remarkable. As the ubiquitous mockery of ‘deformed’ characters in eighteenth-century jest books and theatrical entertainments suggests, physical difference could easily become socially impairing.

Staymakers were at the vanguard of the commercial enterprise for concealing bodily deformities in eighteenth-century England. Timothy Sheldrake junior’s newly invented stays ‘preserve[d] the appearance of an elegant shape, when we cannot achieve the reality’. Emphasizing that a ‘fine shape’ was an advantage in the marriage market, he noted that many were instead ‘much deformed, and cannot seek to remedy such a
defect’. By wearing Sheldrake’s steel stays, the implication was that even a ‘much deformed’ young woman could potentially perform the expected round of social duties and compete for a husband with her peers. Other references hint at the need to reassure consumers that devices were neither ungainly nor obtrusive. Sheldrake’s stays were designed to fit unnoticed below a woman’s clothing; they concealed ‘personal defects from the eyes of the most curious observer’. But it was not simply the contours of the female shape that could be ‘improved’ by ‘artifice’. Although ‘ruptures’ could afflict women as a result of childbearing or domestic labour, they were predominantly seen as a male disorder during the eighteenth century. Ruptures might vary in size and the pain they caused, but in their worst manifestations they might cause an unsightly swelling which was viewed as embarrassing and unmanly. Concealment of deformity was thus as much a role of the truss-maker as was restoring functional capacity. One maker emphasized the discrete size of his steel trusses for gentlemen, such that ‘the most intimate companion cannot discover [them]’. 

At the heart of advertising rhetoric was the ideal of the ‘natural’ body. Paradoxically, suppliers advertised products that would hide deformities that were not just the products of accidents, illness or congenital defects, but also those produced by modern cultural practices in fashioning the body. Bent and distorted by swaddling, forcing into stays from infancy, or wearing ill-fitting clothes or shoes, the fashionable body in eighteenth-century England was not necessarily a healthy one. There were, noted Sheldrake, ‘many instances of persons, who have become cripples from mismanagement’. In contrast, travellers frequently remarked of indigenous peoples who lived in a state free from harmful European cultural practices, that a ‘deformed person is seldom seen among those people who are nearest a state of nature’. The ‘natural’ form of poorer men and women in eighteenth-century England, who were similarly free from artificial ‘mismanagement’, was also noted. A ‘natural’ form was clearly a much-prized attribute, and many medical artisans placed emphasis upon the ability of their products to preserve, restore or imitate ‘perfect nature’.

58 Advertisement for ‘Steel stays’, The Morning Herald and Daily Advertiser, 18 April 1782.
59 Sorge-English, Stays, p. 96.
60 Advertisement for ‘Steel stays’, The Morning Herald and Daily Advertiser, 18 April 1782.
65 Sheldrake, Observations, p. iv.
66 Sheldrake, Essay, p. 8; Turner, Disability, p. 31.
Suppliers of bodily technologies thus advertised to their consumers the prospect of a body that had the freedom, ease and shapeliness of those unencumbered by potentially harmful cultural practices, but was free from the stigma of labour or racial otherness. J. Eddy’s stock included belts, trusses and bandages, but also ‘Braces, to keep the shoulders back’ and also a ‘STEEL BACK and COLLAR for young ladies, being a lighter, and of a genteeler shape’. Postural devices catered to a medico-physical reshaping or straightening of the body, but they also spoke of a desire to create a ‘natural’ form that also conformed to culturally contingent ideals of physical correctness – a ‘cultivated’ version of the ‘natural’ rather than an ‘untamed’ one. This preoccupation with engineering a perfect or ideal form in fact went further. The last quarter of the eighteenth century, and especially 1775–85, witnessed a distinct change in the design of stays in line with the notional ideals expressed by enlightened artists. Stays were perhaps designed to encourage the female body to something resembling the ‘Serpentine line’, which the artist William Hogarth had declared as being ‘the line of beauty’. The stay thus enabled women of almost any size or shape to participate in, or at least embody the ideal of, fashionable society by moulding themselves into a socially acceptable form.

However, fears of artifice were never far away. Just as codes of polite manners were open to the criticism that they were mere formalities of conduct rather than based on deeper ethical foundations, so the technologically refashioned body could equally easily be exposed as a sham. The attack on artifice was distinctly gendered, drawing on age-old accusations of female duplicity, with women’s ‘artificial embellishments’ thinly veiling deficiencies not just of body but also of moral character. Advertisements for body-moulding products like stays, for example, sidestepped the potential politics of ‘discovery’, when a prospective beau was introduced to the true nature of a young lady’s form. This gap was filled by eighteenth-century satirists – most (in)famously in Jonathan Swift’s portrayal of the Drury Lane prostitute who literally dismantles herself of her prosthetic accoutrements before retiring to bed, the ‘beautiful young nymph’ exposed in her true grotesque ugliness. Some men clearly felt cheated by the apparent deception of modern fashion and, by extension, devices that sought to conceal a woman’s true form. A correspondent to the British Apollo in 1710 reported how he had been ‘finely fool’d’ about his wife’s ‘person’, discovering when she undressed on their wedding night a wooden leg that had previously been hidden beneath her skirts, along with a glass eye and false teeth, realizing to his

69 Sorge-English, Stays, p. 38.
70 Ibid., esp. ch. 5.
horror that instead of marrying a wealthy heiress he had been wed to a ‘poor, old, stanch, fluxt Bawd’.72 For ‘Mentor’, a correspondent to the St James Chronicle in 1787, elaborate dresses (and by extension their underlying armatures) might conceal ‘Ankles as thick as Mill Posts and legs as crooked as a ram’s horn’. ‘The whitest statuary neck’, he argued, along with ‘the most bewitching contour of a Natural Shape [our emphasis] and the feet and ankles of a Mercury’ were surely the most desirable characteristics in a woman.73

IV

This article has examined the growing availability of technologies for shaping, correcting and improving male and female bodies in order to conform to a carefully cultivated ‘natural’ style that was best suited to display polite values of decency, decorum and control that avoided giving offence to others and optimized social success. The relationship between politeness and bodily technology is evident in the advertising of products in which vendors addressed clients as polite consumers rather than passive recipients of medical intervention. Goods were presented not simply as useful but also tasteful, and even desirable. The final section of this article examines how manufacturers and vendors of bodily technology (in the words of Jon Stobart) ‘situated themselves within a broader milieu of polite shopping’.74

Staymakers, truss-makers and vendors of artificial limbs were expected to excel in propriety and good manners. The intimacy of the relationship between supplier and client rested not just in their proximity in the delicate fitting process, but also in their being privy to the body’s secrets. Eighteenth-century trade guides regularly listed ‘politeness’ among the desirable qualities for young men wishing to enter the staymaking profession. The London Tradesman (1747) stipulated that the staymaker ‘ought to be a very polite Tradesman, as he approaches the Ladies so nearly; and possessed of a tolerable Share of Assurance and Command of Temper to approach their Delicate Persons in fitting the stays, without being moved or put out of Countenance’. He was ‘obliged to inviolable Secrecy’ in dealing with ‘a crooked shape, or bolster[ing] up a fallen Hip or distorted shoulder’ and might even be trusted to knowledge of a woman’s body that exceeded that of her husband – ‘to him she reveals all her natural Deformity, which she industriously conceals from her fond Lord’. Thus the staymaker was obliged to keep the ‘Deformed secret’ as

72 British Apollo, 17–19 April 1710.
73 ‘Mentor’, ‘To the printer of the St. James Chronicle’, St James Chronicle or the British Evening Post, 14 July 1787.

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‘inviolably as Free-Masonry’. Some manufacturers were at pains to emphasize the propriety of their business by advertising that female customers would be ‘attended’ by their wives or other female relative.

Although such qualities of politeness and discretion were not explicitly recommended for truss-makers or manufacturers of artificial limbs, given that their clientele were more likely to be men than women, advertisements were equally keen to emphasize propriety and decorum in recognition of the delicacy of the work. The act of an amputee exposing his stump to the manufacturer of an artificial limb might be every bit as intimate as a ‘deformed’ lady revealing her body to a staymaker. The nervous sensitivity of stumps made them a particular source of male vulnerability – revealing them and allowing another to touch them was a particularly intimate act. Advertisers therefore stressed the privacy of consultation and treatment. The Bradford limb-maker Mr Mann offered a ‘personal interview’ for those who might deem it a ‘favourable opportunity’, asking potential customers to observe the ‘propriety’ of making an appointment by letter. Emphasizing formal convention, and promising personal attention, assured Mann’s customers of care for their individual needs and his absolute discretion in the matter.

Taste and discernment were ‘central tenets of polite consumption’, and in purchasing technology for correcting or improving the body consumers were expected to make informed choices of what product was best. The correspondence of William Blakey reveals the way in which customers not only demanded a personalized service, but also took a particular interest in the manufacturing process, adjustment and maintenance of his products. In his attempt to persuade consumers of the efficacy of his elastic bandages for rectifying ‘distortions of the legs of children’, Sheldrake criticized those who followed the dictates of fashion in acquiring corrective devices rather than undertaking ‘mature investigation’ of the matter, using the ‘same train of ideas’ to buy...
(ineffectual) leg irons that a person would in ‘purchasing gloves &c.’. Questioning the judgement of potential customers might seem a risky strategy, but Sheldrake’s comments indicate the importance of choice in the marketplace for assistive technology, allowing purchasers of his elastic bandages to feel confident of their rationality and discernment.

However, while Hilaire-Pérez and Rabier have seen inventions such as steel trusses as ‘emblematic of the modern culture of functionality’ in which ‘fitness of purpose’ was valued above all, advertisements suggest that consumers expected to judge the worth of certain bodily technologies on the complementary nature of their form and function. Some devices were advertised not just as medically efficacious, but also as objects of taste. Prosthetics, for example, were advertised as items that would not only substitute missing body parts, but become part of the wearer’s body – both completing and enhancing it. As early as the sixteenth century, Paré’s descriptions of the prosthetics available to the Parisian elite had emphasized their aesthetic qualities being ‘not only profitable for the necessity of the body, but also for the decency and comeliness thereof’. Similar claims were made by English advertisers in the late eighteenth century. The surgeon Thomas Ranby Reid claimed that his patent artificial leg was ‘as well an object of admiration as the means of an inestimable blessing’. Gavin Wilson’s artificial hand not only imitated the mechanics of movement of the body part it replaced, but was also made with ‘white lamb skin, so tinged as very nearly to resemble the human skin’, with fingers made from ‘soft shammoy leather and baked hair’. The hand’s aesthetic qualities, resembling the softness and whiteness that were prescribed as the hallmarks of the hands of a person of quality, complemented its proclaimed functional abilities.

Manufacturers’ trade cards were used to emphasize the elegance and neatness of products for fashioning or correcting the body. Like those of other eighteenth-century shopkeepers, trade cards used by truss-makers sometimes illustrated their shop frontages. The trade card used by Sleath and Jackson in 1808 illustrated the front of their Fleet Street shop, consisting of two sixteen-paned bay windows either side of the door. In the windows were arranged products including trusses, a jointed artificial leg and foot, and an artificial hand. The image emphasized symmetry, which advertised both the neatness and respectability of the business and the goal of the products in restoring the unbalanced body to its right and proper

82 Sheldrake, Observations, p. 80.
83 Hilaire-Pérez and Rabier, ‘Self machinery?’, p. 494.
84 Paré, Works, p. 532.
85 ‘CONSOLATION TO OUR BRAVE, BUT UNFORTUNATE DEFENDERS. THE PATENT ARTIFICIAL LEG’, Sun, 24 June 1794.
87 For the broader context see Maxine Berg and Helen Clifford, ‘Selling consumption in the eighteenth-century: advertising and the trade card in Britain and France’, Cultural and Social History, 4 (2007), pp. 145–70.
Timothy Sheldrake junior also used the shop front as the illustration to his trade card from around 1770. Prominently visible above the door on this design was the royal coat of arms and the message ‘UNDER KING’S PATENT’. As Helen Berry notes, the royal approval was increasingly used by shopkeepers as a tool of polite advertising in the late eighteenth and early nineteenth centuries as a ‘highly visible endorsement of the quality of the goods’ on sale. The practice attracted the attention of satirists who mocked the alleged claims of one ‘wooden leg maker in Holborn’ to be limb-maker to the (physically whole) Prince of Wales. More convincingly, other limb-makers adopted a patriotic rhetoric by claiming the endorsement of war heroes to promote their products. A 1795 advertisement for Mann’s artificial leg pointed out that it was now used by ‘several of our brave, but unfortunate countrymen’, including ‘Admiral Pa[rs]ley, the Hon. Mr Bennett, and a Mr Rhode now at Deptford’ who have ‘within this fortnight past, availed themselves of this invention, highly to their satisfaction’.

Nevertheless, for some satirists, the idea of bodily technologies being sold as objects of ‘polite’ taste or fashion raised the ridiculous possibility that some might seek out such products to replace ‘healthy’ body parts. Aside from the lampooning of the social pretensions of limb makers who used the royal patent, satirists scorned the claims of advertisers to be able to use artificial means to ‘improve’ the human body. A 1772 mock advertisement for ‘Jonathan Lightfoot’, inventor of a ‘Cork-Leg of so admirable construction, that it not only answers all the Purposes of natural ones, but is free from all their Defects’, likened modern limb makers to modish French hairdressers and wig-makers (perhaps reflecting their shared origins in barber surgery), using artificial means to ‘reform’ the body. Just as the stylish adopted the latest wigs to appear fashionable in polite society, so those who ‘choose to be fitted with handsome limbs, may have their old ones very artificially taken off at the knee, without pain’, to be fitted with artificial legs comparable to the ‘best Flesh and Blood in the Kingdom’. The idea of fashionable consumption as promoting social imitation, emulation and eroding distinctions of status was familiar to eighteenth-century critiques of ‘luxury’, but the point perhaps went further. During the 1760s a series of

89 LMA, Trade Card Collection, SC/GL/TCC/Sheldrake.
91 English Oracle or Universal Evening Post, 17–19 Nov. 1789, cited in Turner, Disability, p. 53.
92 Advertisement for Mann’s artificial leg, Sun, 9 Jan. 1795.
93 Public Advertiser, 16 April 1772.

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high-profile sex scandals involving government figures such as the earl of Bute had been exploited by radicals such as John Wilkes to challenge the view that virtue was an aristocratic inheritance. The traditional principle of power following blood lines was challenged not just by sexual promiscuity that threatened to produce illegitimate offspring, but also by the acquisition of a form rivalling the ‘best Flesh and Blood in the Kingdom’ through expert prosthetic imitation. The prospect that anyone could rise to the highest echelons of society by having his or her body modified through prosthetic or other technological intervention raised fears of artificial social miscegenation. These were devices which held out the possibility of social advancement through taste and style rather than simply remedying a bodily loss.

V

The late eighteenth century yielded a plethora of products created solely for the purpose of altering or correcting the body which not only served a medical need but also offered impaired or deformed consumers the opportunity to alter their appearance cosmetically to match social expectations of bodily ideals. Such products were the result of artisanal innovation, the development of new techniques and materials, and the interchange of information between suppliers and clients that allowed their functionality to be honed and improved. The commercialization of bodily technologies occurred against the backdrop of (and were in turn influenced by) a cultural shift in which the ‘improvement’ of the body by artificial means lost its earlier association with the sin of pride and was recast as both a moral and a social duty in a culture of politeness that valued social ease and accommodation as tools for success. In response to the challenge put down by works such as Orthopaedia (1743), new products celebrated human progress over nature’s defects and were advertised in ways that claimed that the ‘natural’ body was attainable by all, even the most seriously impaired or congenitally deformed. There was something paradoxical about advertisers’ appeal to the ‘natural’ in their attempts to fashion a socially acceptable, ‘polite’ body – something that was almost by definition unnatural, requiring careful training and cultivation.

This commercialization of bodily technologies fits within the broader pattern of consumerism and polite shopping explored by Stobart, Berg and others. In contrast to the mass production of medical technologies later in the nineteenth century, where modern histories of bodily technologies usually begin, the market for these products in Georgian

96 Hilaire-Pérez and Rabier, ‘Self machinery?’. 

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England placed an emphasis on the ‘crooked’, ruptured or dismembered client as an individual consumer whose tastes needed to be catered for in a variety of ways. Consumers were imagined as caring not just for how a product functioned, but also its appearance, discreet fit and, as we have seen in the patriotic language of advertising of artificial limbs, how it made them feel. In their advertisements, suppliers recognized the ‘impaired’ or ‘deformed’ as a particular consumer group via products created solely for the purposes of palliating, or at least disguising, their defects.

This tendency for advertisers to address their clients as consumers rather than as medicalized ‘patients’ in turn raises questions about how far this was a medical market. It is clear that many of the conditions addressed by manufacturers were considered ‘medical’ at the time, in so far as they commonly engaged with the medical faculty. But makers of products such as hernia trusses neither viewed themselves as medical professionals nor advertised their services as such. Instead they positioned themselves as expert artisan makers of machines, apparatus and other specialist equipment aimed at a very specific and narrow section of the market. In essence they sought to succeed where medicine had failed. Arguably, the history of advertising of bodily technologies follows a different trajectory from the development of other aspects of the medical marketplace in Georgian England. Whereas the marketing of patent medicines increasingly moved towards the sale of ‘specifics’ – medicines offering the same effects to all regardless of background or constitution – the advertising of bodily technology continued to emphasize the individual, by shaping products conforming to his or her particular needs and also linked closely to social aspiration.

Suppliers of products and proponents of aesthetic orthopaedics simultaneously valorized bodies of those ‘in a perfect state of nature’, such as Africans, native Americans and poorer Europeans, whilst promoting products intended to shape the bodies of ‘polite’ consumers to distance themselves socially from these people. In common with the language of polite advertising, suppliers appealed to their customers in terms of their ‘gentility’, promoting the idea that visible deformity or disability could be socially limiting as well as hindering economic productivity. This was in part a reflection of the deferential language in which suppliers addressed consumers of a variety of products in the eighteenth-century world of goods and should not in itself be taken as evidence of manufacturers working solely for an elite clientele. Sorge-English has shown, for example, that stays were worn by poorer women

97 Ibid., p. 497.
as well as the elite. Manufacturers such as Sheldrake provided for the ‘sick and lame’ poor patients in the Westminster Hospital and Mary-le-Bone Infirmary as well as offering high-end postural devices to genteel young ladies seeking success in the marriage market. Indeed, Sheldrake emphasized his work in supplying hospitals on his trade card as a means of establishing trust in his products, which might help attract those who had the economic resources to make a consumer choice about what devices they purchased. Nevertheless, the idea of ‘politeness’, as a value demonstrated by the purchase and correct use of tasteful products that facilitated refined sociability, was important in the pitching of bodily technologies.

Some products developed in an explicitly hierarchical context. For example, in the case of artificial legs there was a notable contrast between finely crafted ‘cork legs’ and the peg legs doled out to poor amputees – described by one eighteenth-century commentator as ‘badges of begging’. Advertisers sought to differentiate their finely crafted products from cheaper equivalents, espousing the view that access to such superior technologies of the body might define a customer in terms of aspiration as well as acting as a tool for maintaining social distinction.Whilst physical impairments might potentially affect anyone, the hierarchical nature of medical technology arguably militated against sufferers forming a common identity as ‘disabled’. Rather than simply revealing a specialist sector of the ‘medical marketplace’, the history of devices to correct or conceal the irregularities of the body sheds light on the broader culture of polite commerce, of the desire to fashion bodies that were not simply functionally enabled, but also socially pleasing and capable of success. Symbols of enlightened progress, they testify to optimism in the power of technology to restore a cultivated and refined version of ‘perfect nature’ in an age when ‘orthopaedics’ were more about training and educating the body in good habits than just restoring physical loss.

100 LMA, Trade Card Collection, SG/GL/TCC Sheldrake.