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# *Munch and Agoraphobia: His Art and His Illness*

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## RÉSUMÉ

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L'angoisse dont a souffert Edvard Munch (1863-1944), due à un trouble psychologique connu sous le nom d'agoraphobie, a exercé une influence déterminante sur le développement thématique et stylistique de son art, bien au-delà de tout autre facteur personnel ou historique. L'agoraphobie signifie aujourd'hui la crainte qu'éprouvent certaines personnes quand elles traversent une rue ou une place. Elle se caractérise par des crises de panique accompagnées de symptômes physiques et/ou psychologiques tels que tremblements, sudation, vertiges, perte de la personnalité. Munch était en proie à de multiples craintes, dont celles des étrangers, de la mort, de la folie, des femmes et des espaces vides. Pour décrire avec précision ses sensations de panique, il lui est arrivé de faire clairement allusion à des images de ses propres peintures, tel *Le Cri* de 1893. Sa maladie se trouvait aggravée par une consommation excessive d'alcool qui lui servait à se soulager de son

anxiété. C'est à sa maladie que Munch attribuait son talent créateur, son oeuvre se voulant l'illustration de son propre monde intérieur. Les tableaux composant sa *Frise de la vie* (1892-1902) n'étaient autres à ses yeux qu'une série d'ébauches, une matière à l'état brut, qu'il avait exécutées dans un style fruste et délirant. Sa thématique reflète sa vision déformée de son environnement : décors asphyxiants et menaçants, peuplés de personnages amorphes au regard ébahi. A noter qu'à la suite de sa cure psychiatrique de 1909, ses tableaux ont perdu, à quelques exceptions près, une grande part de leur pouvoir évocateur et de leur paroxysme. Prendre connaissance de la maladie de Munch dépasse l'intérêt strictement anecdotique et ne diminue en rien la qualité extraordinairement personnelle de son art. Bien au contraire, cela nous permet une appréciation plus sensible des thèmes et du style qui caractérisent son génie.

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It is coincidental that the work of Edward Munch (1863-1944), one of Norway's best-known artists, and the investigations of Karl Westphal (1833-1890), a little-known German psychiatrist, overlapped at the end of the nineteenth century. Munch suffered from agoraphobia with panic attacks, a psychiatric disorder first described by Westphal in 1871. The anguish Munch suffered with this disorder was more powerful in forming the content, style, and subject matter of his art than was the influence of other personal<sup>1</sup> and his-

torical factors.<sup>2</sup> Present knowledge of agoraphobia and panic attacks provides us with an alternative to

tions of the type that are on a continuum with bipolar affective disorders (manic-depressive illness). Many patients with agoraphobia suffer from depression, and some of these from mood fluctuations. Current psychiatric thinking is consistent with the view that these are not incompatible conditions (A. Brier, D. S. Charney, and G. R. Heninger, "Major Depression in Patients with Agoraphobia and Panic Disorder," *Archives of General Psychiatry*, xli [1984], 1129-1135). Munch also suffered from alcoholism, a frequent sequela of both mood fluctuations and agoraphobia (R. C. Bowen, C. Cipywnyk, C. D'Arcy, and D. Keegan, "Alcoholism, Anxiety Disorders and Agoraphobia," *Alcoholism: Clinical and Experimental Research*, viii [1984], 48-50; D. V. Sheehan, *The Anxiety Disease* [New York, 1983]).

<sup>2</sup> There were other changes in Norway at the turn of the century compatible with Munch's emphasis on the portrayal of an intense feeling in his art: Freud published his interpretation of "angst" in 1896 (F. Stang, *Edward Munch: The Man and His Art* [New York, 1977]); art witnessed changes from Naturalism and Impressionism to Symbolism

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<sup>1</sup> There is evidence that Munch suffered from mood fluctua-

psychoanalytic interpretations of Munch's life that have little bearing on his art<sup>3</sup> and superficial summaries of his psychological problems that reflect little understanding of his condition.<sup>4</sup> Most importantly, a thorough understanding of agoraphobia and panic attacks greatly enhances our appreciation of Munch's art.

The term agoraphobia is derived from the Greek words "agora," meaning market place or place of assembly, and "phobos," meaning terror and flight. Today, the term agoraphobia means fear and avoidance of being alone or being in public places from which escape might be difficult or help not available.<sup>5</sup> Panic attacks are described as experiences of fear or terror accompanied by such physical and psychological symptoms as palpitations, sweating, dizziness, trembling, and feelings of depersonalization and derealization.<sup>6</sup> These attacks are typically accompanied by a sense of doom and fear that one will die, go insane, faint, or lose control. Sufferers from agoraphobia try to flee such attacks and grow to fear and avoid places where attacks have occurred or from which return to safety is hindered: crowded rooms, bridges, and open spaces, for example.<sup>7</sup>

Munch has described, sometimes with clear reference to the content of his paintings, experiences that we can now identify as panic attacks. In reference to the subject matter of *The Scream* (Oslo, Nasjonalgalleriet, 1893, Fig. 21), Munch recounted this experience: "I stopped and leaned

against the railing, half-dead with fatigue. Over the blue-grey fjord the clouds hung, as red as blood and tongues of flames. My friends drew away. Alone and trembling with fear I experienced nature's great scream."<sup>8</sup> On another occasion, possibly with reference to *Evening on Karl Johan Strasse* (Bergen, Rasmus Meyers Samlinger, 1893/4), he wrote:

Everybody who passed by looked at him, stared at him, all those faces, pallid in the evening light. He tried to concentrate on some thought, but he could not. All he felt was an emptiness in his head . . . His whole body trembled and sweat ran down him. He staggered, and now I am falling too. People stop, more and more people, a frightening number of people.<sup>9</sup>

Munch suffered from insomnia and chest pain and was prone to bouts of anger, all symptoms frequently described in agoraphobic patients. He had multiple fears, among them the fear of strangers, death, illness, germs, and empty spaces. Though attractive to women, he feared their dominance and power to destroy his creativity.<sup>10</sup>

Munch was terrified of going mad. Consistent with his inscription "Can only have been painted by a madman," in the sky of *The Scream* (Version in Oslo, Nasjonalgalleriet, 1893), he wrote in 1905: "And for several years, I was almost mad—at that time the terrifying face of insanity reared up its twisted head. You know my picture *The Scream*. I was being stretched to the limit—nature was screaming in my blood—I was at breaking point."<sup>11</sup> For much of his life he worried about his inherited nervousness from his father's side of the family. Munch's father has been described as having suffered from religious melancholia and anxiety, and both his grandfather and sister died in asylums. Consistent with the discussion of the role of childhood fears in either causing or predisposing one to the development of agoraphobia,<sup>12</sup> Munch's family life was plagued with fear sur-

and Expressionism (T. M. Messer, *Edward Munch* [New York, 1971/2]); La Kristiania Bohème, a revolutionary group of artists and writers led by anarchist writer Hans Jaegar, captured the spirit of the young intellectuals and encouraged a freer lifestyle fraught with intense, complicated personal relationships (Stang, 43-53); and writers like Ibsen and Strindberg popularized these ideas in their plays and novels [F. Whitford, "Edward Munch: Scene, Symbol and Allegory," *Studio*, CLXXXVII (1974), 57-60].

3 S. Steinberg and J. Weiss, in "The Art of Edward Munch and its Function in his Mental Life," *Psychoanalytic Quarterly*, xxiii (1954), 409-423, diagnose Munch as having agoraphobia but interpret many of his fears in psychoanalytic terms. For example, they speculate that Munch's fear of a close relationship with women may have been determined by early fantasies of his reunion with his dead mother (411).

4 Stang (*Edward Munch*, 210) concludes that Munch's nervous breakdown was due to a series of misfortunes accelerated by drinking.

5 American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, Third Edition (Washington, D.C., 1980), 226-27.

6 Depersonalization is the sensation of being outside or detached from your own body or from part of it; derealization refers to the sensation of things around you becoming strange, foggy, unreal, or separated from you (Sheehan, *Anxiety*, 34-35).

7 D. L. Chambless, "Characteristics of Agoraphobics," in D. L. Chambless and A. J. Goldstein, eds., *Agoraphobia: Multiple Perspectives on Theory and Treatment* (New York, 1982), 2.

8 Ingrid Langaard, *Edward Munchs Modningsar* (Gyldendal, Oslo, 1960), 286. Cited in Stang, *Edward Munch*, 90.

9 Quoted in Stang, *Edward Munch*, 107.

10 R. Heller, *Munch, His Life and Work* (Chicago, 1984), 166. Fear of sexual arousal leading to sexual dysfunction in agoraphobics has been cited by Sheehan (*Anxiety Disease*, 77-78) and by Chambless ("Characteristics," 6). Whether Munch suffered from sexual dysfunction due to high anxiety is not known.

11 Tegn. Katalog (Catalogue of Drawings) 10. Cited in Stang, *Edward Munch*, 90. Munch suffered a nervous breakdown in 1908 following a period of complete withdrawal from others, a three-day drinking binge, and episodes of hallucinations. He was admitted to Dr. Daniel Jacobsen's nerve clinic in Copenhagen, where he underwent an eight- to nine-month course of shock treatment and massage (from a letter to Jappe Nilssen, 1908, cited in Stang, *Edward Munch*, 210).

12 R. H. Vose, *Agoraphobia* (London, 1981), 177.

rounding the death of his mother and sister and anxiety concerning the subsequent nervousness of his father.

Complicating Munch's agoraphobic condition was alcoholism. The artist's own account of his use of alcohol to gain relief from anxiety is similar to a cycle frequently described by agoraphobics:

I felt these frightening pains near my heart, I was frightened in the morning, felt dizzy when I got up. Quickly something to calm me. Rang for service, Port wine, a half bottle—that helped. Felt better. Then some coffee and a bit of bread. Renewed anxieties. Out into the street, to the first restaurant, one drink, two drinks—that helped. Out into the street. Everything will be alright . . . I drank and drank yesterday like all days, and went to bed in a stupor.<sup>13</sup>

Munch's suffering as an agoraphobic had a powerful impact on the content, style, and subject matter of his art. He felt his illness was responsible for his ability to create and shunned any suggestion that he would be better rid of such pain. His famous *Frieze of Life* series (Oslo, Munch-Museet, 1892-1902) grew out of a deep commitment to representing inner truths and his impatience with what he considered to be trivia. At age 26, he wrote that "we should stop painting interiors with people reading and women knitting. We should paint people who breathe and feel and suffer and love."<sup>14</sup> His aim was to create a visual representation of an inner, psychic state by painting the "confessions" of his own life.<sup>15</sup>

Przybyszewski called Munch's style "psychic naturalism," a term he used to describe what Forgey calls "the northern determination to look beyond natural realities and deep into the human brain and heart."<sup>16</sup> Paul Ernst commended him for his expression of "pure soul"<sup>17</sup> without the pitfalls of stylizing and symbolizing. Munch himself called his *Frieze of Life* paintings "mostly notes—documents—drafts—raw material,"<sup>18</sup> attributing their strength to this unfinished quality. His application of paint to canvas is rough, expressive, frenzied, attacking (*Young Woman Embracing Death* [Oslo, Munch-Museet, 1894]); his colours are disturbing (*Heritage 1* [Oslo, Munch-Museet, 1897-

99]). The effect is the expression of a raw, intense, personal anguish.

The subject matter of Munch's paintings, in particular the *Frieze of Life* series, reflects his suffering as an agoraphobic. From this series, the bridge in *The Scream* stretches without end, out of sight, offering no escape for its victim, no route to safety. The blood-red sky and black fjord shout of doom and foreboding. The open expanse has no air—it is solid and stifling. The figure is amorphous, scarcely human with hands and head appearing detachable from a frail, unsupported body. The group of linden trees in *Starry Night* (1893), though a familiar sight along the Aagaarstrand beach in Oslo Fjord, takes on a strange, disproportionate, threatening shape. Even the stars of the heavens are washed out, overwhelmed by the gloomy, black mass. In *The Red Vine* (Oslo, Munch-Museet, 1898, Fig. 22), the blood-red house is alive and powerful as it bursts forth from the earth. In contrast, the bodiless figure, insignificant and pale, appears ready to dissolve. The fence, perhaps offering some refuge from the open street, has been abandoned. There is no other sign of human life.<sup>19</sup>

By his own testimony, art had a strong therapeutic power for Munch. He tried to "paint out his fears"<sup>20</sup> in the same way that phobics in treatment use exposure to the feared object or situation to increase their tolerance of it.<sup>21</sup> Some of the resulting works are more successful than others in formal terms. *Vampire* (Oslo, Munch-Museet, 1893-94) is a work of strong, emotional impact that feels resolved in its expression. *Young People and Ducks*

13 Manuscript "Tilbakeblikk 1902-3-4-5-8-7." Munch Museum Archives. Cited in Heller, *Munch*, 190.

14 Quoted in Messer, *Edward Munch*, 14.

15 A. Troyen, "Edward Munch: Symbols and Images," *Connoisseur*, cc (1979), 147.

16 B. Forgey, "Through a Glass Darkly," *Artnews*, LXXXI (1982), 109.

17 From a letter written by Paul Ernst in 1898, quoted in *Polymeter: Der Wille zur Form*, viii, 332. Cited in Carla Latha, "Edward Munch and the Concept of 'Psychic Naturalism,'" *Gazette Beaux Arts*, xciii (1979), 145.

18 Munch, "Kritiken over 'Livsfrisen,'" in *Tidens Tegn*, 1918. Cited in Latha, "Edward Munch," 135.

19 Munch has shown himself to be a master at conveying the sense of the familiar being peculiarly altered and unreal. This altered perception of the environment and the subjective sensation of being out of touch with the real world is common to agoraphobics, creating feelings ranging from unpleasantness to extreme distress. The following excerpt from the personal account of a patient complaining of symptoms of derealization and depersonalization is similar to the perceptions depicted in Munch's paintings: "Trees seem to be stark and staring and ugly, not attractive any more. I used to see people nice and attractive, now even those that are nice look ugly . . . My eyes don't seem to focus, familiar streets seem different and people's faces seem behind a sort of smoke . . . My body does not seem any shape or form. There's a hollowness, like a 'sack tied up in the middle' sensation. I know my head has shrunk . . . My feet seem to lose themselves at times, and I feel as though I have no neck." (B. Ackner, "Depersonalization. I Aetiology and Phenomenology. II Clinical Syndromes," *Journal of Mental Science*, c (1954), 850).

20 Tegn. Katalog (Catalogue of Drawings) 3. Cited in Stang, *Edward Munch*, 121.

21 I. M. Marks, *Living With Fear* (New York, 1978). This is not inconsistent with Rangell's description of phobics becoming "married to the phobic object"; in order to avoid the dreaded object, the phobic person seeks it out, finding it in obscure places (Vose, *Agoraphobia*, 42).

(Oslo, Munch-Museet, 1905-8, Fig. 23) and *Snowy Weather in the Avenue* (Oslo, Munch-Museet, 1906) beautifully balance psychological content with strength of composition. The compositions in both works are solid and well-defined without losing the sense of their having evolved with the subject matter. In contrast, *The Surprise* (Oslo, Munch-Museet, 1907, Fig. 24) demonstrates a successful treatment of some elements of the composition, such as the figural component, but there is a failure to resolve the area behind the figure in formal artistic terms. Perhaps this was also an aspect of the subject matter that Munch was unsuccessful in resolving personally in psychological terms.

Following his breakdown and treatment at Dr. Jacobsen's clinic in 1909, Munch's motto became "steer clear of everything,"<sup>22</sup> a restrictive lifestyle common to agoraphobics. He bought a small house at Ekely, where he lived in virtual seclusion until his death in 1944. He built a curious outdoor studio with tall perimeter walls and no roof (Fig. 25), leaving him and his work open to the heavens but protecting him from the visual threat of the open countryside. From the depiction of personal sorrows in the *Frieze of Life* series, Munch shifted to the placid, eternal mood of the *Oslo University, Aula Decorations* (Oslo, 1909-12). Works such as *Winter in Kragero* (Oslo, Munch-Museet, 1916) and *Rainy Weather on the Coast, Kragero* (Oslo, Munch-Museet, 1913, Fig. 26) are less evocative in subject matter and colour than works executed before 1909. In later years, Munch repeated the subject matter of some of his earlier works, for example,

*Girls on the Bridge* (Oslo, Munch-Museet, 1927), an oil on canvas painting reminiscent of an etching and aquatint of *Girls on the Bridge* (Oslo, Munch-Museet, 1903). Though the later work is successful compositionally, its psychological impact is disappointingly subdued, as is the impact of many of Munch's other later works. There are, however, some notable exceptions. *Self-Portrait*, *The Night Wanderer* (Oslo, Munch-Museet, 1923/24, Fig. 27), *Winter Landscape, Ekely* (Oslo, Munch-Museet, 1923/24), and *Consolation* (Oslo, Munch-Museet, 1924) recall the ominous colours, impenetrable atmosphere, and oppressive environment of the most powerful of his earlier works.<sup>23</sup>

The works of Edward Munch cannot be thought of in the same terms as those of painters primarily concerned with the formal qualities of art. What was important to Munch was the expression of intense feeling in his art. Much of his source material consisted of his personal sufferings as a victim of panic attacks and agoraphobia. Our knowledge of his illness is not of mere anecdotal interest, nor does this knowledge detract from the overwhelming personal quality of his expression. On the contrary, this knowledge provides us with a more sensitive appreciation of the images that structure his works. Munch was primarily a painter. He was also a man who suffered from a psychiatric disorder that altered his perception of his environment. His genius was his capacity to communicate the intensity of these perceptions to us, and startle us with their familiarity.

23 It is tempting to speculate that the psychological impact of works such as these in 1923-24 may have coincided with a recurrence of some of the symptoms of agoraphobia that were present prior to 1909.

22 Munch to Sigurd Host, 1909, from the clinic. Cited in Stang, *Edward Munch*, 18.

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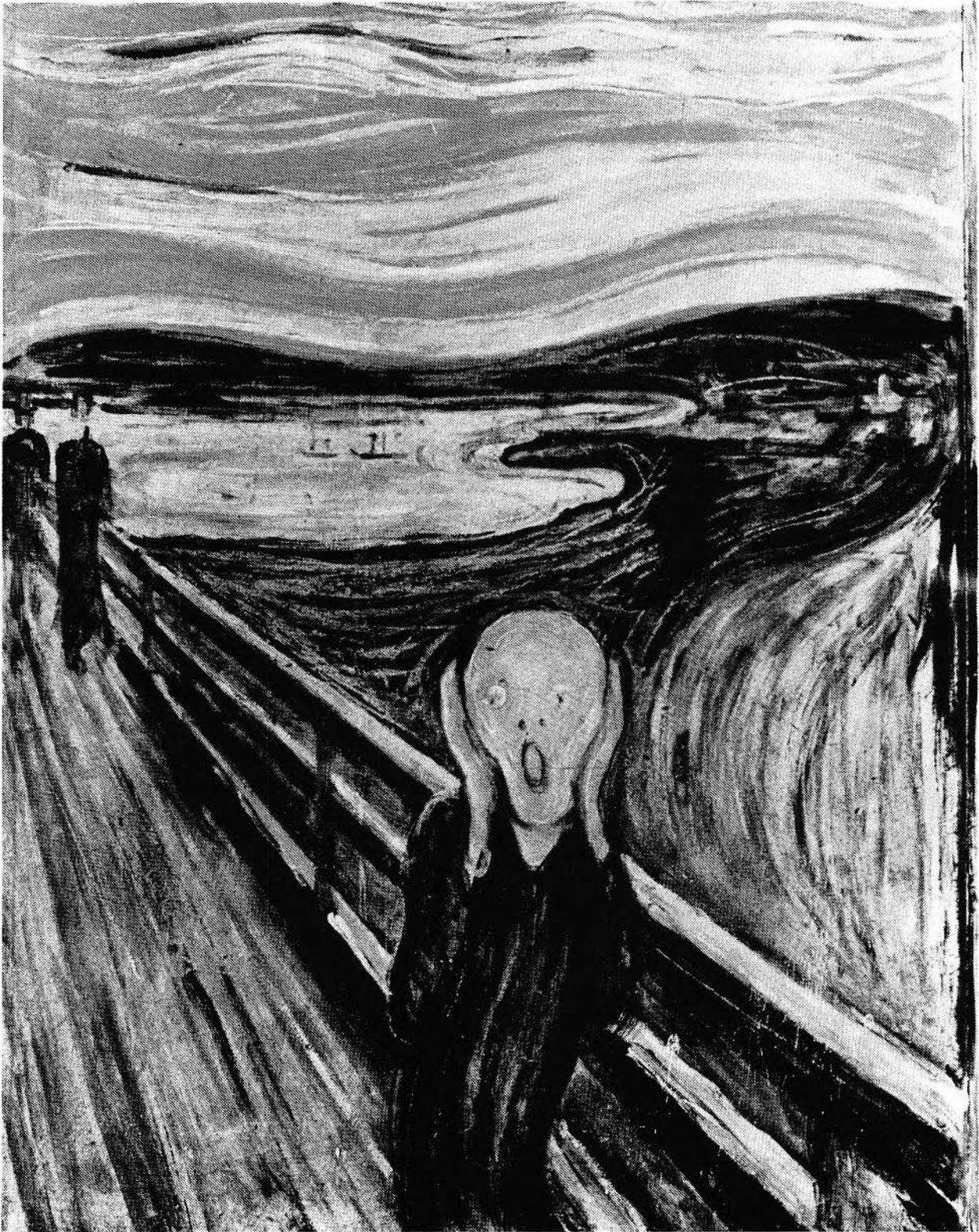


FIGURE 21. E. Munch, *The Scream*, 1893. Tempera on plate, 83.5 × 66 cm. Oslo, Munch-Museet (Photo: *Edvard Munch: The Man and His Art*, New York, 1977).



FIGURE 22. E. Munch, *The Red Vine*, 1898. Oil on canvas, 119 × 121 cm. Oslo, Munch-Museet (Photo: *Edvard Munch: The Man and His Art*, New York, 1977).



FIGURE 23. E. Munch, *Young People and Ducks*, 1905-08. Oil on canvas, 100 × 105 cm. Oslo, Munch-Museet (Photo: *Edvard Munch*, Vancouver, 1986).



FIGURE 24. E. Munch, *The Surprise*, 1907. Oil on canvas, 85 × 110 cm. Oslo, Munch-Museet (Photo: *Edvard Munch*, Vancouver, 1986).



FIGURE 25. Edvard Munch in his outdoor studio at Ekely. (From *Edvard Munch: The Man and His Art*, New York, 1977).



FIGURE 26. E. Munch, *Rainy Weather on the Coast, Kragero*, 1913. Oil on canvas, 93 × 107 cm. Oslo, Munch-Museet (Photo: *Edvard Munch*, Vancouver, 1986).



FIGURE 27. E. Munch, *Self-Portrait, The Night Wanderer*, 1923-24. Oil on canvas, 89.5 × 67.5 cm. Oslo, Munch-Museet (Photo: *Edvard Munch*, Vancouver, 1986).