

Representations of Horatio Nelson in the Visual Arts: Heroic Portraiture Versus Historical Reality from a Medical Perspective

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Vice-Admiral Horatio Nelson (1758–1805), 1st Viscount Nelson, 1st Duke of Bronté, КВ, was already a celebrated hero among the British populace by the time of the Battle of Trafalgar of 21 October 1805. Upon his death at age forty-seven at the hands of a sniper in that battle, he achieved mythic proportions that persist to this day. In perpetuating his heroism and his subsequent legacy, particularly in times of war and danger to Britain, the visual representation of Nelson among his countrymen necessitated a traditional rendering and reworking of the man in epic proportions. His representation in the visual arts – paintings, engravings, and film – is examined as it pertains to the expected heroic image versus what is known from reports of his physical and medical, and to a point, emotional conditions. The depictions of any given civilisation’s heroes traditionally portray them often as literally larger than life, perfect in physical form, domineering and victorious, whether it be of Ramses II, Octavian, or the Zeus-like sculpture of a bare-chested George Washington.

Nelson entered service with the Royal Navy inauspiciously in 1771 at the age of twelve. He soon found that he suffered from seasickness, which would become a chronic illness often treated with peppermint. In support of the East India Company, he was sent to the Indies and Bombay in 1773. In 1775, he became ill with malaria, which was so severe that he nearly died. A coffin was prepared for him in the expectation that he would not survive the voyage back to Britain. In his febrile delirium, he experienced the vision of a glowing orb associated with the premonition that he was destined to become a hero.

Nelson recovered, but while at Portsmouth in June 1777 he collapsed, apparently from another malarial attack. By 1780, he had been promoted to post-captain, and was part of Major-General John Dalling’s expedition to Central America against its Spanish colonies. During his trek up the San Juan River, Nelson began to experience chest pains, diagnosed as ‘gout’, a probable



Captain Horatio Nelson, Jean Francis Rigaud 1781. (National Maritime Museum)

recurrence of his malaria. In subsequently besieging the Spanish Fort of San Juan, he was one of the first of his men to fall ill, either from typhoid or yellow fever ('yellow jack'), or, less likely but asserted, poisoning from drinking water into which the highly toxic fruit of the manchineel tree had fallen.

Nelson commanded the land force, which was able to capture Fort San Juan shortly after he became ill. His first full portraiture was painted by Francis Rigaud in 1781, after Nelson had spent a good part of the remainder of 1780 recovering from a probable recurrent bout of malaria or yellow fever while in Costa Rica. The fort forms the background for the slender and rather unremarkable young man in the naval uniform of captain, his hands resting

victoriously upon his sword. Despite his gaunt appearance, his visage and piercing gaze are directed squarely at the viewer, a look of authority and self-assurance. The dawning day suggests the trials and triumphs to come that are his destiny. Apart from two episodes of a severe febrile illness, in this portrait he is unmarked by trauma at the early age of twenty-three.

Nelson was of medium height for his time, between 5ft 5in and 5ft 6in. Later full-length portraits depict Nelson with long legs, which seem disproportionate compared to his actual height, and in several depictions, he is portrayed as taller than the surrounding men. Nevertheless, his body habitus remains lanky, consistent with his illnesses but not necessarily with middle age. The portrait of Nelson by Guy Head, c1798–1800, standing next to a boy aboard ship shows, once more, a disproportion between the head and body height, suggesting a taller person. In this case, even the face bears little resemblance to Nelson, and raises the question of whether the artist painted this directly from the subject. The known ratio of femur length to height ranges from 1:3.33 to 1:3.66. The length of the thigh in this painting is not in keeping with his known height, nor is his head in proportion to a man of medium height.¹ However, it is in keeping with a figuratively larger-than-life personage.

Nelson continued to suffer from various illnesses and symptoms after the expedition to Central America, leading to a speculation that he was somewhat of a hypochondriac. While in London in May 1781, he complained that his left arm and leg were troubling him, the fingers of his left hand white and swollen with loss of feeling. These features are not compatible with malaria or yellow fever, but may indicate peripheral neuritis as a chronic complication of typhoid fever.² By 1782, Nelson was posted to a North American station. The transatlantic voyage of approximately eight weeks had resulted in lack of fresh vegetables and the onset of scurvy affecting Nelson and the crew. Nelson's gingiva (gums) became spongy with the resultant loss of many of his teeth, a result of lack of Vitamin C. His cheeks were consequently sunken, a feature noted to greater or lesser degrees in his subsequent portraits.^{3, 4} Additionally, by 1783 at the age of twenty-five, Nelson's hair was already turning white due in part to his recurring febrile crises.

During his posting to the West Indies in 1784, Nelson had a recurrent attack of malaria, sweating so profusely amidst that climate that he shaved off his hair for comfort, wearing a wig for the time being. Three years later, on the voyage from the West Indies to Britain, he developed a febrile illness serious enough that a keg of rum was set aside to preserve his body should he succumb. With the onset of peace by the time he returned, Nelson went on half pay and began domestic life, with his wife Fanny Nisbet. Still, Nelson longed for a command and for action.⁵



Horatio Nelson, Guy Head, 1798–99. (National Portrait Gallery)

In 1793, Nelson was recalled to service following Revolutionary France's annexation of the Austrian Netherlands and declaration of war. Nelson sailed in command of the third-rate HMS *Agamemnon* (64) with Hood's fleet to Toulon. He was shortly thereafter sent to Naples with dispatches requesting reinforcements for Hood. After the fall of Toulon, Nelson undertook coastal raids along Corsica and the interruption of enemy shipping. Upon his suggestion, a naval bombardment and land siege on Bastia took place.

On 19 April 1794, while inspecting installed shore batteries at the siege of Bastia, he received a 'sharp cut' to the back. He had barely escaped death when a heavy shot from the town battery threw up a massive shower of earth, which fell on him. However, he sustained the first of his major and famed injuries later, at the siege of Calvi, on 10 July 1794, when shot hit a sandbag near where Nelson stood. The spray of sand and small rocks peppered the right side of his face, injuring his eye, probably with penetration of the globe, and causing multiple superficial facial lacerations that bled liberally. The left eye may have been affected, as well.⁶

After seeking medical attention, Nelson returned to the fight, later writing that, 'I got a little hurt this morning.' The resulting eye injury, likely a severe corneal abrasion versus a hyphema (collection of blood behind the cornea) or retinal detachment, eventuated in mydriasis (dilation of the pupil) and scarring of the cornea, giving it a milky, opaque appearance. The pupil remained as large as his iris. Nelson lost partial sight in that eye, but not the eye itself, and was able to discern light from dark through it.⁷⁻⁹

In 1797, he wrote to his friend, Commissioner Hope, stating that the Navy Board – in charge of naval medical affairs – did not believe that he was blind in that eye, meaning that a cursory exam belied a significant eye injury. Consequently, he sought additional evidence to support his claim. On 12 October 1797, he was examined for a second opinion by the Company of Surgeons in London, whereupon he was given a disability pension and a medical certificate stating loss of vision in the eye proportional to the loss of an eye or limb.^{10, 11} However, the *Times* of 10 April 1804 claimed that he was 'weaker' in the right eye, but 'not blind in either eye'.¹²

Subsequent depictions of Nelson do not reveal the clouding of the pupil of his eye, though there may have been mild divergence of the globe from the left eye and drooping of the right upper eyelid, perhaps subtly portrayed in several depictions. By the mid-nineteenth century, it became increasingly common to portray Nelson as wearing an eyepatch, despite the fact that he never did.¹³ However, by January 1801, Nelson's doctor became determined to protect the sight in the left eye. Nelson wrote or signed letters, and read during much of the day below decks with only a single candle for light. His doctor instructed

him to bathe the left eye in cold water every waking hour, and forbade letter writing and the ingestion of alcohol. His doctors, including his surgeon at the Battle of Trafalgar, William Beatty, were certain that Nelson would eventually lose all sight in that eye. Nelson was given a green eyeshade, made by Emma Hamilton, with which to protect his good eye from sunlight. This shade was attached to the front of his cocked hat as a visor.¹⁴ It may have been for that reason that Nelson continued to wear his hat transversely rather than in the more current fashion of wearing of it lengthwise from front to back (or fore and aft).

Contemporary portraits by Lemuel Abbot, William Beechey, Arthur Devis, and John Hoppner do not suggest any significant opacification or injury to the right eye. Regardless, it became *de rigueur* in twentieth-century cinema to follow established convention, and depict Nelson with an eyepatch or swathing scarf. The silent 1921 movie, *Lady Hamilton*, presented actor Conrad Veidt as Nelson not only wearing a wide black bandage, but across the wrong eye.

In the 1926 silent movie, *Nelson*, Cedric Hardwicke portrayed Nelson also wearing a dark wrap across his left (wrong) eye, which he removed before he was about to meet Lady Hamilton. Both eyes are intact, but Lady Hamilton refers to the loss of his ‘left eye and right arm’ in acknowledging his sacrifice to his country. In 1941, at the time the United Kingdom faced its greatest threat of



1921 movie *Lady Hamilton*, Conrad Veidt as Nelson.

invasion since Napoleon, Laurence Olivier portrayed Nelson in *That Hamilton Woman*. The morale-boosting film was meant to instil a sense of patriotism and courage made more dramatic by exaggerating Nelson's loss of sight in one eye. Olivier intermittently wears an eyepatch over his right eye, the upper eyelid drooping. Actor Peter Finch, in the 1973 movie *Bequest to the Nation*, wears an eyepatch over his right eye in his final hours aboard *Victory* on the day of the Battle of Trafalgar, perpetuating the myth. Of note, the figurehead of Nelson from HMS *Trafalgar* in the historic Portsmouth dockyard was repainted in 2011, in accordance with historians'



1926 movie *Nelson*, Cedrick Hardwick as Nelson.

recommendations to accurately portray the decorations on his uniform; in addition, the pupil of the right eye was painted over to make it appear opacified.

Perhaps the most accurate on-screen portrayal of Nelson from a medical aspect is to be found in the BBC television miniseries of 1982, *I Remember Nelson*. Kenneth Colley is featured as a weary Admiral Nelson sans



Above: 1941 movie *That Hamilton Woman*, Laurence Olivier as Nelson.



Right: 1973 movie *Bequest of the Nation*, Peter Finch as Nelson.

eyepatch but displaying the prominent and somewhat hypersensitive forehead scar sustained in 1798 in the Battle of the Nile, a disfigurement absent in most representations prior to that TV series.



1982 BBC TV Miniseries *I Remember Nelson*,
Kenneth Colley as Nelson.

Serving under Admiral Jervis, then-Commodore Nelson sustained the facial scar when he intercepted a Spanish fleet sailing toward the Atlantic port of Cadiz intending to join the French fleet. In the ensuing Battle of Cape St Vincent on Valentine's Day, 14 February 1797, Nelson aggressively and against orders broke toward the van of the Spanish fleet. His ship attacked the third-rate *San Nicholas* (80), which had already struck its colours, and then utilised the surrendered ship in order to board the adjacent Spanish first-rate ship of the line, the *San Josef* (114). During the boarding of the surrendering *San Nicholas*, the *San Josef* opened fire with its guns. Nelson sustained blunt trauma to his lower abdomen by a wood splinter from one of the shots. According to Captain Ralph Miller of the third-rate HMS *Captain* (74), Nelson 'would have fallen had not my arms supported him'.¹⁵

Nelson wrote to Sir Gilbert Elliot a day after the battle, 'Among the slightly wounded is myself, but it is only a contusion and of no consequence, unless an inflammation takes place in my bowels, which is the part injured.' A week later, Nelson wrote to his uncle, William Suckling, 'My hurt at the moment was nothing, but since, it has been attended with a suppression of urine, but the inflammation has gone off, and I am nearly recovered.' In a subsequent letter to Lady Hamilton dated November 1804, Nelson wrote, 'My cough is very bad, and my side, where I was struck on the 14th February is very much swelled; at times a lump as large as my fist, brought on, occasionally, by violent coughing.'¹⁶

It appears that he minimised the severity of his injury, implied by the incongruity between Captain Miller's account of Nelson requiring support after being struck, and Nelson's initial letters afterwards. The trauma was sufficient to preclude normal micturition (urination) for several days, suggesting a perivesicular hematoma (blood collection alongside the bladder) and/or swelling of tissues in the abdominal wall musculature. The resulting bleeding and inflammation would have been enough to decrease the capacity of the bladder. This may well have been compounded by dehydration due to initial blood loss and a reflex slowing of bowel function with resulting inability to

take sufficient fluids by mouth. Alternatively, bleeding and clots within the bladder may have been just as responsible.

The injury weakened and disrupted the normal abdominal wall musculature such that, with time, the defect resolved into a ventral hernia (abdominal rupture). The persistence of his cough in 1804 would have caused a temporary increase in intraabdominal pressure, aggravating a significant-sized hernia with the potentially serious complication of an incarceration (trapped bowel within the hernia), necrosis (loss of blood circulation) of the intestine and death. There are no known records concerning whether Nelson wore a corset or truss afterward to support the weakness and contain herniation through the defect. The presence and location of the defect would have been concealed by his uniform, and likely not appropriate for rendering had it been clearly visible.

Despite the severity and acuteness of the blunt abdominal trauma, illustrations of his swashbuckling capture of the *San Josef* (later renamed the *St Joseph*), and accepting the sword of surrender from its captain naturally fail to disclose any evidence of incapacitation. It seems the incident was unknown except to those near Nelson at the time, and his most immediate friends. A similar painting by Westall done a year after Nelson's death shows a vigorous and long-limbed Nelson attacking the Spanish sailors.



The Battle of Cape St Vincent, Nelson Capturing the San Jose, George Jones, 1829.
(ArtUK.org; Ashmolean Museum of Art and Archaeology)



Nelson Accepting the Sword of Surrender, The San Jose, Battle of Cape St Vincent, Daniel Orme, 1766–c1832. (National Maritime Museum)

Several months later, Nelson, now a Rear Admiral of the Blue, was stationed off Cadiz, Spain. Learning of a Spanish treasure ship's recent arrival at the Canary Island of Tenerife, Nelson planned an ill-advised and failed amphibious assault on the main city of Santa Cruz on 24 July 1797. As he stepped ashore, a musket ball struck his right arm above the elbow, shattering his humerus. Lieutenant Josiah Nisbet (Nelson's stepson) improvised a tourniquet with his silk kerchief, as Nelson had sustained a compound (open) fracture of the bone with transection of the main (brachial) artery. The tourniquet likely saved Nelson's life. He was rowed back in the prevailing darkness to his flagship, the third-rate HMS *Theseus* (74).¹⁷

Within the gloomy confines of the cockpit, lit by a single lantern, the able surgeon Thomas Eshelby and his assistant Louis Remonier amputated Nelson's arm successfully. Nelson bore the surgery without complaint, but afterward remarked on the discomfort of cold steel against his flesh. From thereon, he ordered all his squadron surgeons to heat their instruments prior to their use. It is said that Nelson resumed giving commands within an hour of his amputation, his pain somewhat allayed by opium.^{18, 19, 20} In the 1806 melodramatic painting by

Richard Westall of Nelson's wounding, there is no evidence of haemorrhage from a nearly severed arm – in spite of a crude tourniquet – and the mutilated limb is delicately hidden from the sensibilities of the viewer. Nelson, ever the warrior, still holds his sword, now in his left hand, and is dressed in military finery.

The loss of his right arm became a signature badge of courage and duty for Nelson among the British populace. Nelson by now was revered as a major



Nelson Wounded at Tenerife, 24 July, 1797, Richard Westall, 1798.
(National Maritime Museum)

hero. He was to endure considerable pain in the stump until December of that year, when the ligature used to tie off the brachial artery during amputation came away in his dressings. Nelson experienced immediate relief of pain, afterwards, giving thanks in the Church of St George in Hanover Square.²¹ Evidently, under the duress of surgery performed in the early hours under poor lighting, the median nerve, which runs closely alongside the artery, was incorporated into the ligature. Nonetheless, Nelson would suffer from phantom



Rear Admiral Horatio Nelson, Lemuel Francis Abbott, 1799.



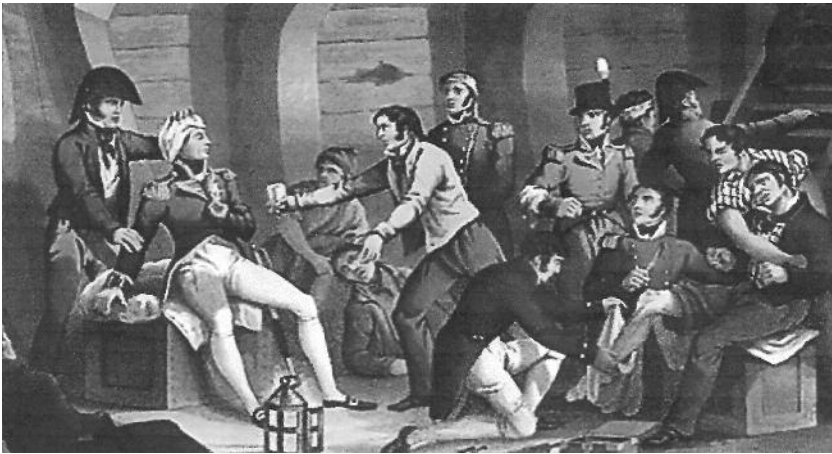
Admiral Nelson, Lemuel Francis Abbot, 1797.

limb pain for the remainder of his life, a common and still not completely understood neurophysiological phenomenon following amputations.²² This complication certainly added to the strain from chronic and recurrent illnesses Nelson endured, as well as the general stress of command.

One of the most recognisable images of Nelson was painted by Lemuel Abbott shortly after the amputation of his arm. Despite the trauma, probable localised infection and inflammation, chronic pain, and phantom limb syndrome, Nelson appears remarkably robust, the cheeks rosy. Of note, the

tattered right sleeve hangs down as if the limb was still present, though buttoned to the front of the jacket. The gold sleeve stripes are clearly positioned such that they, at first glance, appear to be buttons following the line of jacket closure, giving the illusion that the right arm remains. Yet, on closer inspection, the tattered sleeve is a subtle reminder of recent sacrifice.

Interestingly, as with the wounding and loss of sight in his right eye, the arm that underwent amputation was not always rendered on the correct side in subsequent portraits and illustrations. In William Heath's painting, *The Cockpit, Battle of the Nile*, Nelson is shown after he has sustained an injury to the right forehead, but is seen to be leaning against his right arm for support while men rush to his assistance. It is the left arm that is missing in this image. In *Apotheosis of Nelson* by Scott Pierre Lagrand, Nelson is borne as a demigod toward heaven after his death by the major Greek deities. He is extending his right arm to Britannia in farewell, the ostensibly missing left arm hidden from view by Zeus. Importantly, both paintings were created several years after Nelson's death. Apparently, the message trumped anatomical accuracy.



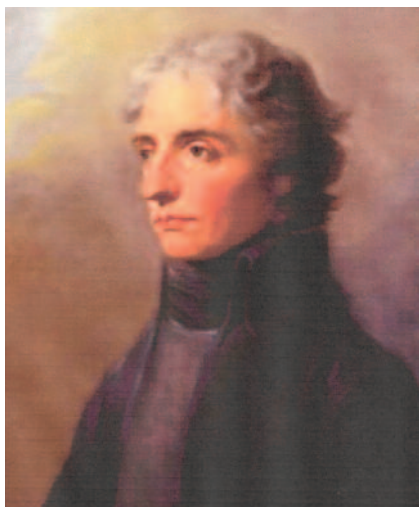
The Cockpit of HMS Vanguard, William Heath, c1817.

On 1 August 1798, Nelson complained of a ‘damn toothache’ prior to the Battle of Aboukir Bay in Egypt. This was conceivably due to his previous bout of scurvy. In the battle that followed that day, Nelson was struck above his right eye by langridge (shot consisting of scrap iron packed into a casing), resulting in a flap (avulsion) laceration to the forehead involving his eyebrow.²³ He was attended to by Surgeon Jefferson, and noted to be ‘pale and concussed’, bleeding profusely from a likely tear to the supraorbital/supratrochlear arterial

plexus (an artery traversing the forehead, temple, and eye socket). Nelson was convinced he had been fatally wounded. The wound was tightly bandaged, but Nelson experienced a ‘splitting, splitting, splitting’ headache’, and stated that, ‘for 18 hours my life was thought to be past hope ... I am weak in body and mind, both from this cough and the fever.’²⁴



Attributed to Guy Head, allegedly one of Nelson's favourite portraits, c1800.
<https://www.wikiart.org/en/lemuel-francis-abbott/rear-admiral-sir-horatio-nelson-1799>



Horatio Nelson, Friedrich Heinrich Füger, oil on canvas, 1800. (National Portrait Gallery)

From the force of such a blow and avulsion laceration, it is probable that he sustained a concussion – a traumatic brain injury (TBI) – to the prefrontal cortex, possibly even a skull fracture.²⁵ He developed a fever and headache for eighteen hours afterwards. While in Palermo, Sicily, a year later, Nelson complained of depression, headaches and nausea, indigestion, irregularity of his heartbeat (palpitations), and breathlessness, leading him to believe he was experiencing heart attacks. His behaviour also became arguably capricious, demonstrating more insubordination toward Lord Keith while in the Mediterranean, while at the same time consorting with Lady Hamilton. He became involved in the controversial trial and execution of the Italian admiral and revolutionary, Francesco Caracciolo, who was hanged on 30 June 1799, on Nelson's orders, for treason against the King of Naples. Any true behavioural changes as suggested by these incidents could be related to permanent injury to the frontal portion of the brain responsible for behaviour and inhibitions.

Regardless, portraits of Nelson by Füger and by Head around 1800 show no trace of an avulsion scar to the right forehead. Nelson thereafter would comb a lock of his hair over the scar. However, a painting by Beechey in 1801 clearly shows the scar as a disruption of the right eyebrow resulting from inaccurate approximation of the hairline. Interestingly, in 2017, one of several paintings of Nelson by Leonardo Guzzardi, c1799, was rediscovered. While restoration proceeded, a rough overpainting of the right forehead was removed, revealing the original depiction of a ragged and still livid irregular scar of the right



Detail, Horatio, 1st Viscount Nelson by William Beechey, 1801.

forehead, with a discontinuous eyebrow and depression of the scar. It appears that similar ‘cosmetic’ retouching had been done to other of Guzzardi’s portraits of Nelson, perhaps being found in the succeeding Victorian and Edwardian periods not befitting the expected image of Britain’s principal paladin. This painting was found in the collection of art dealer Philip Mould.²⁶



Detail, Horation Nelson by Leonardo Guzzardi, 1799.

Furthermore, an engraving by Gillray of Nelson conquering the ‘plagues’ of Egypt two months after the Battle of the Nile clearly shows a fresh, irregular laceration of his forehead, still bleeding, though on the incorrect side. Of further note, the majority of later portraits of Nelson depict him from the left side, whether by the artist’s or subject’s choice, and as if to intentionally minimise the right facial scar, eye opacification, and the loss of limb.

The blow to the head may have resulted in Nelson suffering excruciating headaches for the remainder of his life. Moreover, in the Battle of Copenhagen in 1801, Nelson was thought to be suffering from ‘heatstroke’, associated with nausea and vomiting. He expressed a conviction that he was near death. While at Gibraltar in 1802, Nelson wrote to Emma Hamilton that he was suffering from seasickness, a toothache, fever, dysentery, a ‘heavy cold’, and recurrent numbness in his left hand.²⁷ His prior infectious illnesses or injuries cannot explain the etiology of his left-sided paresthasias, nor is there evidence of loss



Detail, engraving, *Extirpation of the plagues of Egypt*, James Gillray,
Published by Hannah Humphrey; engraving, published 6 October 1798.

of function in his hand that would suggest an impingement of a nerve in his cervical (neck) spine or carpal tunnel syndrome. The symptoms came on intermittently years before his blow to the head. Regardless, there was never a mention of visible changes to the hand, loss of motor function, nor of permanent deformity that could have been represented pictorially.

At the same time, Nelson's scandalous affair with Emma Hamilton was widely publicised in the press and illustrated in satirical engravings. The engraving, 'A Mansion House treat', shows Emma drawing on a long-stemmed pipe in her mouth, while Nelson smokes an even longer pipe ejecting profuse white smoke with an obvious phallic connotation, the pair meanwhile exchanging double entendres. Despite the absence of his right arm, Nelson is shown as a randy and vigorous man in prime health.

By the time of the Battle of Trafalgar in 1805, Nelson, aged forty-seven, had been ravaged by acute and chronic infectious diseases, sustained several life-threatening injuries including possible traumatic brain injury, and laboured under the stress of command mandated by the imminent threat of an invasion of Britain by Napoleon.

Comparable to Guzzardi's unflattering portrait, the painting of Nelson completed in the same year by Devis shows the culmination of these abuses. The face is sunken and care-worn, with heavy eyelids and dark circles beneath



Detail, *A Mansion House treat – or smoking attitudes*, London, 1800, Artist unknown.

the eyes, a distant stare to them. The cheeks and lips remain blushed, whether true or not. The body is lean, somewhat unusual for privileged middle-aged men who tend to gain girth at this point – unlike Guzzardi’s portrait that suggests a slight paunch. If so, then Nelson had lost weight in the intervening six years since Guzzardi’s painting. The shoulders appear more narrowed from other portraits, augmented only by the epaulettes of an admiral. Once more, the left side of the subject is presented to us, muting the loss of the right arm. The green visor attached to the front of his hat to protect the sight in his left eye also serves to conveniently hide the disfigurement of the right side of the forehead and eyebrow. Our attention is drawn more to the various decorations on his left breast, the uniform embellishing the otherwise weary, chronically ill man within. Nelson wrote around this time, ‘Wounds received by Lord Nelson: His eye in Corsica, His belly off Cape St Vincent, His arm at Teneriffe, His head in Egypt ... Tolerable for one war!’²⁸

On 21 October, a clear Sunday morning, Nelson's fleet had caught up to Villeneuve's combined French and Spanish fleet breaking out from a blockade of Cadiz, and sailing toward the Mediterranean after failing to clear the English Channel in preparation for Napoleon's invasion troops. As is well known, Nelson was shot in the heat of battle by a French marksman from the *Redoubtable's* mizzenmast, the ship's shrouds entangled with those of *Victory*. The musket ball entered the chest near the left shoulder just below the collarbone, carrying a part of his epaulette and cloth from his jacket into the tract of the missile. The musket ball passed obliquely through the left lung and transected the sixth and seventh thoracic vertebrae, causing paralysis from the nipple level down.²⁹

During their previous circuit of the quarterdeck while the battle raged, Nelson and Captain Hardy were witness to the death of their secretary, Warrant Officer John Scott, who was cut in two by cannon shot. On their next circuit, at 1.30pm, Nelson had just approached the pool of blood from the recently transected Scott when he himself was shot from above. Nelson fell into the puddle, supporting himself with his left hand. Initially, Hardy and those in



Portrait of Admiral Lord Nelson KB,
Arthur William Devis, 1805.



Portrait of Vice-Admiral Lord Nelson,
Leonardo Guzzardi, 1791.

proximity believed the blood to be Nelson's. Besmirched with Scott's blood, Nelson was carried to the cockpit of *Victory*, where he was undressed, covered with blankets, and attended to by his staff and Dr William Beatty until death ensued three hours later. Nelson's demise resulted from bleeding within the chest, but, as importantly, his autonomic nervous system had been irreparably damaged by the spinal injury, which could have otherwise compensated for a conceivably survivable blood loss.

A month after Nelson's death, engraver Josiah Boydell offered a prize for the best painting of the event. Arthur William Devis was apparently released from debtors' prison for the explicit purpose of entering the competition to pay off his debts. Devis was allowed a week aboard *Victory* to gain material for his painting. His major competitor was the famous American expatriate, Benjamin West. West created a more idealistic painting of Nelson's death, inaccurately having Nelson die on the quarterdeck rather than below decks, and with Hardy present (he was not). West, and later Maclise, painted a symbolic patch of blood on the deck next to Nelson, but Nelson's uniform is immaculate.

Devis also took artistic liberties with his *Death of Nelson*, though accurately portraying the moment of death adjacent to the cockpit deep within the ship's bowels. The gloomy space, however, is shown as much larger than in reality in order to accommodate all the principal characters associated with Nelson's last moments. Hardy is also pictured next to Nelson, though he was not actually present at the moment of death. Notably, Nelson's pillows are adjusted behind his head in a manner suggesting a halo; the saintliness of the dying hero of Trafalgar. He is correctly shown propped up to assist his breathing, as his left



Detail from *The Death of Nelson*, by Daniel Maclise, 1859–64. (Walker Art Gallery)

lung was collapsed and compressed by bleeding within the chest. But, there is no evidence of a gunshot wound to the left supraclavicular area, unlike West's painting in which an assistant is holding a compress dressing against the wound, and that of Armitage adding a blood stain on the pillow. (Devis' painting is shown on page 34; West's painting is shown on page 40. Armitage's painting is not shown).

Actually, such a wound would have been contused but relatively small and with little external bleeding, all the bleeding occurring internally from transected pulmonary blood vessels. The sentiments and composition of the painting serve to express the nascent Romantic notions of the time, while representing the event as accurately as possible. Boydell thought so, as well, selecting Devis's painting over West's for the prize. West had gone to considerable lengths to create his own painting of Nelson's demise, having interviewed more than fifty men who had participated in the battle. In the end, he admitted that it was still a depiction 'of what might have been, not of the circumstances as they happened'.³⁰

Following his death and funeral at St Paul's, Nelson was lionised as the man who had given his life to defend Britain against French invasion, though Napoleon had by then withdrawn his invasion troops from the coast, sending them east to new threats culminating in the Battle of Austerlitz. The monument in Trafalgar Square of Nelson and the one in St Paul's attest to Nelson's elevation to the pantheon of greats by his grateful countrymen. Innumerable images were created afterwards, especially on commemorative objects related to his funereal ceremonies. Every form of visual art was used to preserve and propagate his legacy to the point of the mythological. By the twentieth century, these arts included cinema, television, and popular art.

The representations of Nelson mandated heroic depictions of his exploits, sacrifice, and physical characteristics corresponding to the level of deification he attained. Paradoxically, his most visible physical infirmities had to be emphasised to underscore the sacrifices he made without diminishing from a visual perception of indomitability. The significant loss of a limb and disfiguration of an eye were far more compelling than a disfiguring scar of the forehead and eyebrow, loss of teeth, frailty from chronic illnesses, or a pouching abdominal hernia. Moreover, the graphic presence of a useless stump could be genteelly concealed by the flap of an empty sleeve or a tattered sleeve simulating the presence of a limb. The injury to the right eye was either disregarded, the face shown from the left aspect, or dramatically concealed by a scarf or patch, the injury again implied rather than seen.

A First World War poster, 'England Expects, 1805–1915,' showed Nelson as an embodiment of duty and patriotism. When the United Kingdom survived the



Nelson in a First World War poster.

horrific losses consequent to the First World War and faced invasion once again from Germany during the Second World War, it was only natural to use the new art of cinema to appropriate one of its greatest champions to sustain morale and create patriotic fervour. Any physical or moral infirmities contrary to a culture's veneration and mythology regarding its heroes are necessarily contrary to how that culture optimally views itself. Thus, Nelson was portrayed as robust despite the loss of limb and eye, long of limb and virile, even in satire, commensurate with a historical and culture-wide tradition of portraying a nation's champions in art and literature as the idealisation of its highest values and expectations. Among the general public, particularly outside of the UK, the image of the one-armed admiral wearing an eyepatch and an empty-sleeved eighteenth-century naval uniform is the epitome of that Age of Sail and a stereotypical representation of the best of the Royal Navy of the Georgian era, a romantic idealism without recourse to the grim realities of everyday service and danger in that era.

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Nelson in conflict with a Spanish launch, 3 July, see colour plate 1
Apotheosis of Nelson, Scott Pierre Legrand, c1805–18, see colour plate 2