The Taylor Dynasty: Three Generations of 18th-19th Century Oculists

by

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Abstract

The “Chevalier” John Taylor was perhaps the most important itinerant oculist of 18th century Europe. His professional legacy is controversial, and he was accused by many contemporaries and subsequent historians of being a quack. Nevertheless, his writings demonstrate an understanding of ocular anatomy and disease better than that of most of his contemporaries, including the first published illustration of the semidecussation of the optic nerves. Taylor’s personal legacy is more favorable. His son, John Taylor, Jr., and his grandsons John and Jeremiah Taylor, were respected oculists. Their lives give perspective on ophthalmic practice in 18th and 19th century Europe.

KEY WORDS: Couching; John Taylor; Oculist; Ophthalmic history

INTRODUCTION

Before about 1950, the word “oculist” was much more widely used in written English than was “ophthalmologist” (Leffler et al. 2013). Before about 1800, many oculists had non-academic surgical training, and many practiced as itinerant surgeons, with associated negative connotations (Trevor-Roper 1989). Perhaps the most famous, or infamous, of these practitioners was the physician John Taylor (Figure 1, p.68). Taylor pretended he was of noble descent and began to use the title “Chevalier” in 1750 (Taylor 1750) and, from 1757 onwards, also described himself as “ophthalmiater” (Taylor 1757).

Taylor’s professional legacy is controversial, and he was called a quack by many of his contemporaries and subsequent historians.

Fortunately, his personal legacy is more favorable: his only son, also named John, was a prominent and respected English oculist, whose two sons, John and Jeremiah, continued the family profession. Their lives give perspective on ophthalmic practice in 18th and 19th century Europe.

Taylor’s life is well documented in the ophthalmic literature, although most of these articles were written in the 19th and mid-20th centuries, based on the ophthalmic knowledge at that time. Modern library databases allow access to additional primary source materials, including contemporaneous newspaper articles and advertisements, which offer additional insight. Further, the lives of Taylor’s son and grandsons have received considerably less attention from ophthalmic historians. We reviewed available medical and nonmedical texts published by John Taylor and his son and grandson John, and searched several online databases, such as the “Gale Cengage 17th-18th Century Burney Collection of Newspapers”, “Eighteenth Century Journals”, “ANNO” (AustriaN Newspapers Online), “ZEFYS” (Zeitungsinformationssystem), and ZVDD (Zentrales Verzeichnis Digitalisierter Drucke). Where word search was implemented, we searched for terms like “John Taylor”, “Chevalier Taylor”, and various spellings of “oculist”.

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Figure 1
The Chevalier John Taylor.
Note the designation “Ritter”, German for “Chevalier”. From Taylor 1750c.
THE CHEVALIER JOHN TAYLOR  
(1703-1772)

Biography

John Taylor was born in Norwich, possibly in 1703. He was the older son of a surgeon also named John Taylor, who died about 1709 (Coats 1915). Taylor’s grandson John subsequently wrote: “The chevalier, whom I was too young to remember, was, I have always heard, a tall, handsome man, and a great favourite with the ladies. He was much addicted to splendour in dress, and to an expensive style of domestic expenditure...” (Taylor III 1832a).

Taylor was trained by William Che-selden (1688-1752) at St. Thomas’s Hospital in London. He initially practiced as a general surgeon and oculist in Norwich, but began traveling throughout Britain in 1727, and throughout Europe in 1734. In Bern, the physician, anatomist, botanist and poet Albrecht von Haller (1708-1777) wrote favorably of his skills (Haller 1734). Taylor claimed that he was accepted as a member of the university faculty at Avignon (Taylor 1734c), but this was subsequently disputed (Morénas 1734). Taylor earned medical degrees from Basel and Reims in 1734, and from Liège and Cologne in 1735 (Taylor 1750a, Lee 1898), although these doctorates were later dismissed as “honorary foreign degrees” (Wood 1930).

The relationship between Taylor and the French surgeon Jacques Daviel (1693-1762) is noteworthy. Taylor met Daviel in Marseille in 1734 and claimed to have introduced him to eye surgery (Taylor 1766a, Figarella 1979, Koch 2014). This claim was disputed by the ophthalmic historian Julius Hirschberg on the grounds that Daviel may have performed some eye surgeries prior to meeting Taylor (Blodi 1984). In any event, Daviel appears to have modelled one part of his early career after Taylor, as an itinerant oculist who advertised in the same periodicals (Daviel 1735) and sought the acquaintance of many of the same aristocrats. Perhaps the influence went in both directions. Daviel toured Spain and Portugal from June 1736 to April 1737, where he couched cataracts and was received by the kings of both nations (Figarella 1979). Shortly thereafter, in October 1737, Taylor arrived in Madrid and spent five years on the Iberian peninsula (Taylor 1761-1762), where he was received by both Philip V of Spain and John V of Portugal. Ultimately, the two men paths diverged, as Daviel introduced and popularized planned cataract extractions, a procedure which Taylor attempted but never fully accepted.

Taylor was appointed Royal Oculist to King George II in 1736 (Lee 1898). He treated a long list of celebrity patients, including many of the nobility in Britain and throughout Europe, as well as Johann Sebastian Bach, Edward Gibbon (Gibbon 1796, Jackson 1968), and very likely George Frederick Handel (Bäzner & Hennerici 2005, Tarkkanen 2013), although some dispute the latter (Coats 1915, Jackson 1968, Wood 1930).

Taylor traveled extensively throughout Europe from the 1730s until his death (Trevor-Roper 1989). During his journeys he collected numerous titles as court oculist of many sovereigns and he proudly named himself “Ophthalmiater Pontifical, Imperial and Royal”. The title “Imperial” was not bestowed by the reigning Holy Roman Emperor Francis I or his wife Maria Theresia. In Vienna he had been admitted only to kiss their Majesties’ hands (Taylor 1751). The title “Imperial” was granted in Munich from the dowager Empress Maria Amalia, the widow of Emperor Charles VII (Taylor 1750b).

The source of his title “Chevalier” (“knight”; in Italian, “Cavalier[e]”; in German, “Ritter”) is questionable. He apparently liked to claim that he was from a noble family, although his parents were not aristocratic. Only his younger brother, the Reverend James Taylor, had married Penelope Ryley, a lady from the landed gentry (Jessop 1879). In 1742 Taylor called himself “John Taylor Esq.; Oculist to the King; Knight of the Order of Portugal, Doctor of physick” (Taylor 1742), but otherwise he used the simple “Dr. Taylor” until 1750, when he started to use “Chevalier”, “Cavalier[e]” or “Ritter” consistently. In 1751, Taylor unsuccessfully treated the Duke of Mecklenburg’s uveitis, and the Duke’s physician Eschenbach found that Taylor’s Portuguese diamond-studded cross was mere jewelry and not a sign of Portuguese nobility (Eschenbach 1752). Finally, in 1755...
Taylor was nobilitated by Pope Benedict XIV, thus earning his title after all (Fitzadam 1755).

The exact time and place of his death are unknown. In 1770 the English musician and music historian Charles Burney dined with him in Rome and reported that he died there a few days later on November 16 (Burney 1969). He was also reported to have died in Paris (Coats 1915). Alternatively, in 1772 several London newspapers reported in early July that Taylor had recently died in a Prague convent (Anon. 1772a-f), into which he went having become blind from “gutta serena”. The Chevalier’s grandson John adhered to the latter version, when he wrote: “After many years absence from this country, my grandfather’s death was noticed in the following manner in a continental paper: ‘Having given sight to many thousands, the celebrated Chevalier Taylor lately died blind, at a very advanced age; in a convent at Prague’” (Taylor 1832a).

If this version is correct and Taylor’s vision had declined over years, this might help to explain why in his later life Taylor’s surgical results, and reputation, appeared to worsen. For example, during his last journey through the Continent (1768-69), Taylor was forced by the Count Palatine in Mannheim to refund his surgical fees to many patients with unfavorable outcomes. One newspaper reported, “La Charlatanerie de cet Avanturier ainsi reconnue ... [The charlatanism of this adventurer thus recognised ...]” (Anon 1768). He met with similar disapproval in Stuttgart, Gotha and Dresden, where patients sued him for malpractice. And finally in Prague, in 1769, he was given the “consilium abeundi” [advice to leave] and was forbidden to perform eye surgery in the Habsburg territories (Groß, 1769).

Taylor’s wife was Ann Taylor (nee King), who died in 1774 (Anon. 1774, Jessop 1879). There was another Mrs. Taylor, who advertised her oculist practice in 1754, but it is unknown if she was related to the family (Anon. 1754c). The historical record suggests that Taylor may not have provided adequately for his wife, which appeared to cause tension between the Chevalier and his son John. Taylor, Jr. wrote in 1761 that he had to financially support his mother (Taylor Jr 1761a). A notice printed in 1759 does not name the Chevalier but appears to be written about him: “Whereas a certain flaring itinerant Oculist, of England, now travelling about the Country has run from his Bail: This is to acquaint him, That if he does not make immediate Satisfaction to his Son, his Name will be publish’d, and a Reward for taking him. N.B. He also left his Wife in Distress, to whom he has been married between thirty and forty years” (Anon. 1759).

The Chevalier’s lifelong financial difficulties are well documented. He was successfully sued by a Mrs. Nugent in London in 1735 for lodging postoperative surgical patients at her house without paying (Nugent 1736). A 1737 Berlin newspaper reported that Taylor, in debt, had to vacate his residence “bei Nacht und ohne Laterne [at night without a lantern]” (Anon 1737). In 1759, Taylor pawned a diamond-studded cross, possibly the Portuguese cross noted by Eschenbach (Anon 1760 a-c). A 1761 official notice reported that “John Taylor ... Doctor of Physick and [Oculist]” was reported among “Fugitives for Debt, and beyond the Seas ... [who] intend to take the Benefit of an Act of Parliament ... An Act for Relief of Insolvent Debtors” (Anon. 1761).

Medical and Surgical Care

The Chevalier expressed, in his writings, a solid understanding of what was then the current state of the art knowledge of ocular anatomy and of cataract surgery. For example, he wrote in 1735, “… there are no membranous Cataracts; but ... all Cataracts are from an Alteration of the crystalline Humour itself” (Anon. 1735), which reflects what was then a modern understanding that cataract was not, as was classically taught, an opacity anterior to the “crystalline humor”. He also performed the relatively new procedure of optical iridotomy (described as creating an “artificial pupil”), pioneered by Cheselden in 1727 (Mark 2003).

In addition to his work on cataracts, Taylor demonstrated advanced understanding of other important ophthalmic diseases. He is credited with the first illustration of the semidecussation of the optic nerves through the chiasm in 1738 (Figure 2, next page) (Bucker 1958, Wade 2008). Taylor wrote, “La moitié des fibres d’un nerf optique change de place avec
Figure 2: The Chevalier Taylor’s diagram of the semidecussation of the optic nerves. From Taylor 1750c.
la moitié de l’autre, à l’endroit ou ils se rencontre dans la tête [Half the fibers of an optic nerve change place with half the fibers of the other at the site where they meet in the head]” (Taylor 1738). Taylor’s description of what would now be considered angle closure included the passage: “... the Volume of the Chrystalline is so greatly augmented, as to raise the Circumference of the Pupil towards the Cornea, and violently press on the Uvea ... as to occasion ... a preternatural Pressure on the immediate Organ of Sight ...” (Taylor 1736b). Taylor also claimed to have treated strabismus (Taylor 1756, Anon. 1747). Objective evidence of successful surgical treatment is lacking, although his writings demonstrate a relatively advanced understanding of eye movement disorders (Berg 1967) (Figure 3 next page).

One of Taylor’s last publications was the 1766 Nova Nosographia Ophthalmica [New Description of Ophthalmic Diseases], a volume with 22 copper-engraved and hand-colored illustration plates of 243 images of eye diseases (Figure 4 see p.75) and short bilingual descriptions in Latin and German (Taylor 1766b). This was the first pictorial atlas of eye diseases, almost a century before that of Frederic Jules Sichel (Sichel 1852-1859).

It is difficult, after more than two centuries, to evaluate the Chevalier’s surgical outcomes. Taylor’s own descriptions of his techniques are self-aggrandizing to a degree that modern readers may find egregious. Nevertheless, the journalist H. Cross-Grove wrote in 1742: “I was an Eye-Witness to his restoring to Sight Two Persons at my House on Thursday last ... which Two Persons in a few Minutes had so perfect a Sight, as to distinguish Objects ...” (Cross-Grove 1742). A testimonial from 12 patients in 1742 stated: “Dr. JOHN TAYLOR, Oculist to the King, recovered our perfect Sight, after having entirely [sic] lost it many Years ...” (Good et al. 1742).

Taylor himself published the unfortunate case of Sir Jeremy Sambrooke, who was monocular and presented with a cataract in the only seeing eye, as well as chronic occipital headaches which Taylor described as a negative preoperative sign. Taylor performed couching, but the vision did not improve, and the headaches persisted, which Taylor attributed to “a Defect in the Brain, obstructing the free Communication between it and the Immediate Organ of Sight.” Taylor subsequently noted “a small Quantity of Matter collected in the lower Part of the Cornea ...” which progressed “... into the Anterior Chamber of the Aqueous ... that Disease properly called Hyopion ...” Taylor described treating with repeated anterior chamber paracentesis, but the vision did not recover (Taylor 1743).

Taylor famously operated on Bach in Leipzig in 1750. Taylor wrote: “...at Leipsick, where a celebrated master of music ... received his sight by my hands; it is with this very man that the famous Handel was first educated, and with whom I once thought to have had the same success, having all circumstances in his favour, motions of the pupil, light, &c. but upon drawing the curtain, we found the bottom defective, from a paralytic disorder.” (Taylor 1761-1762). Following surgery, Bach was reported to have severe ocular and systemic pain, and he died several months later following a stroke. It has been suggested that Bach was initially couched and he may have developed postoperative acute secondary glaucoma (Zegers 2005, Tarkkanen 2013). The facts of the case remain unclear and it is uncertain even what surgery was performed (Ober 1969, Grzybowski 2013).

Historical Judgment of the Chevalier Taylor

Taylor was the most important itinerant oculist of the 18th Century. He was a controversial figure during his lifetime and conflicting opinions persist to the modern day. His contemporary Gerhard Ten Haaff (1720-1791) wrote of “de Beruchte [the infamous] TAYLOR” and his many patients operated for cataract who became “geheel [completely] blind” (Ten Haaff 1761). Samuel Johnson (1709-1784) famously derided Taylor as an example of “how far impudence may carry ignorance” (Barrell 2004), but Taylor’s grandson John offered the Chevalier’s fluency in Latin as “a full refutation of the insolent abuse of my grandfather by Dr. Johnson” (Taylor III 1832a). The actor and playwright Samuel Foote mimicked and lampooned Taylor in his first play at the Haymarket Theatre, with the audience in stitches and the Chevalier among them: “The celebrated Chevalier Taylor the Oculist, who was at that time in the height of his vogue and popularity, was
Figure 3
The Chevalier Taylor’s diagram of the extraocular muscles, as well as other ophthalmic drawings.
From Taylor 1750c.
also another object, and indeed a deserved one, of Mr. Foote's mimickry and ridicule …” (Anon. 1765)

The Oxford academic William King (1685-1763), in his posthumously published memoirs, discussed his experiences with Taylor. King wrote of a relative, Sir William Smyth, who was successfully couched by Taylor (“Sir William was able to read and write without the use of spectacles during the rest of his life”) but cheated Taylor out of most of his surgical fee by feigning persistent visual loss (King 1819). King’s description of Taylor appears to summarize many of his positive and negative aspects: “He seems to have understood the anatomy of the eye perfectly well; he has a fine hand and good instruments, and performs all his operations with great dexterity; for the rest, Ellum homo confidens! [Look, there is a confident man!] who undertakes any thing (even impossible cases) and promises everything. No charlatan ever appeared with fitter and more excellent talents, or to a greater advantage …” (King 1819).

JOHN TAYLOR, JR.  
(1724-1787)

Taylor had one son, also named John (Coats 1915). The son typically referred to himself as “John Taylor, Jr.” although he was at least the third consecutive John in the family. He was educated in the famous Paris Collège du Plessis (Lee 1898). He returned to London about 1739 and studied under his father, but he did not receive a medical degree. He then opened his own practice (Lee 1898). Ophthalmology was viewed then as an “uncertain profession” and Taylor, Jr. lived a more conservative lifestyle than did his father (Taylor III 1832a).

The Chevalier’s grandson John wrote that Taylor, Jr.’s “first great patient was the Duke of Ancaster … the Duke had nearly succeeded in procuring for him the honour of being oculist to King George the Third, but the Duke of Bedford having had an operation for the cataract successfully performed by the Baron de Wenzel, obtained the appointment for the Baron” (Taylor III 1832a). Despite failing to receive this position, Taylor, Jr. was held in high professional esteem, including by Cheselden, who frequently referred patients (Coats 1915).

Taylor, Jr. performed much charitable care for indigent patients (Taylor Jr 1748, Taylor Jr 1754), including patients referred to him by the church (Taylor Jr 1761b, 1772, 1777a). He advocated the creation of a foundation, which appears to be a forerunner of the modern health management organization, in which “… any person, subscribing two guineas a year, for medicines, operations, &c. shall be entitled to send as many patients to [Taylor, Jr.] as they shall think proper” (Taylor Jr 1777b).

Clinical Outcomes of Taylor, Jr.

Many publications appear to reflect well upon the clinical outcomes of Taylor, Jr. One William Austin published a testimonial in 1745 for curing “a violent Distemper in my Eyes, attended with the most excruciating Tortures, and an entire Loss of Sight” (Austin 1745). Similarly, a 1751 testimonial reported that “James Daufit … was blind of both Eyes, with a Gutta Serena; but by the Help of God, and the Assistance of Mr. John Taylor, [Oculist], in Great Queen-street, Lincoln’s Inn-Fields, London, is restored to Sight” (Stace et al. 1751).

Taylor, Jr. was reported to have successfully treated at least two patients with congenital cataracts. Congenital cataract surgery was considered especially challenging and was not reported in the English language until 1663 (Leffler et al. 2014). A 1751 testimonial by the apparently unrelated William Taylor stated, “I hereby certify, that my Son, a Boy of eight Years old, was born blind; but by the Help of God, and the Assistance of Mr. John Taylor, Oculist, in Hatton-Garden, London, was restored to Sight” (Taylor Jr 1751). The case was published by Taylor, Jr.’s friend William Oldys (1696-1761). After surgery, Oldys wrote of the patient: “… he was set before a Looking-glass, and was greatly delighted with the little Man he saw in it, whom he would have to be his own Man, because he so obediently imitated, or repeated all the Motions and Gestures, which he made, with his Head, Mouth, and Hands; but said, He would not close his Eyes …” (Oldys 1753). This scene of William admiring his face in the mirror was depicted on a copper engraving by Thomas Worlidge in 1752 (Anon. 1752). (Figure 5 see p. 76)
Clearly, the historical record appears kinder to Taylor, Jr. than to his more famous father, at least in terms of clinical outcomes. It is uncertain why this should be so. Perhaps the relatively better press reflects the son’s more agreeable personal characteristics. While the Chevalier Taylor was boastful and traveled extensively, the son was more modest, primarily stayed in London, and provided much indigent care to the community.

John Taylor, III
(1757-1832)

Taylor, Jr. had 11 children, of whom 5 died in infancy. John, the Chevalier’s grandson, (Figure 6 see p.76) was the first born (Taylor III 1832a). He referred to himself as either “John Taylor” or “John Taylor, III”, even though he was at least the fourth consecutive John in the family. Taylor, III had the least distinguished ophthalmic career in the family, but because of his extensive non-medical writings, much about his personal life is
known. The Chevalier was “very fond” of his first grandson and wanted to bring the child abroad for “the best education” but Taylor, Jr. (the Chevalier’s son and the child’s father) declined (Taylor, III 1832a). The grandson wrote of his education: “I attended the late Dr. William Hunter’s lectures on anatomy at the same time that Mr. [Edward] Gibbon and Dr. Adam Smith were fellow pupils …” (Taylor III 1832b).

He was appointed Oculist to the Prince of Wales in 1789 (Anon. 1789). The Prince, like Taylor, III, was known to be myopic, and a poem was published making light of this fact (Taylor III, 1832a):

**IMPROMPTU,**

*On the appointment of John Taylor, Esq. to be Oculist to His Royal Highness the Prince of Wales.*

Oh! Prince, since thou an oculist
Hast ta’en into thy pay,
‘Tis hoped he’ll chase dull party’s mist,
And spread truth’s radiant day.
But if, whate’er may be his skill,
That mist we still shall find,
The homely adage to fulfil,
The blind will lead the blind.

Taylor, III had quit practicing by 1811 (Coats 1915). Of this decision, he wrote bluntly, “… I began to turn my attention towards literary pursuits … considering it a shorter and more probable path, than my profession afforded, to that independence which, from a very early period of my life, I was always anxious to attain” (Taylor III 1832a). The title page of his autobiography describes him as “Author of ‘Monsieur Tonson’” (Taylor III 1832a) rather than Oculist to the King, as does the first line of his obituary (Anon. 1832).

When, late in life, he fell upon financial difficulties, he published a book of poetry in an attempt to recoup his losses (Taylor III 1827a, 1832b) but does not seem to have considered returning to ophthalmic practice.
As a journalist Taylor, III edited and owned (or co-owned) several newspapers, and these pursuits occasionally led him into controversy. In 1795, his friend, the poet Robert Merry (1755-1798), disagreed with an anonymous newspaper article he mistakenly thought was written by Taylor, III and, in response, wrote: “Who is the man that is false to his friends, inimical to the liberties of his country, the slanderer of all merit, the panegyrist of all infamy? Who is the most venal, the most shameless, the most savage of mankind? The enemy of hope, the advocate of despair? IT IS THE REPTILE OCULIST” (Taylor III 1832b).

The “reptile oculist” article was definitely directed at Taylor, III, but some later historians have confused him with another John Taylor of approximately the same age, who was involved in several dramatic and highly publicized adventures in the early 1790s. These included inciting riots in Edinburgh (Anon. 1792), serving as a government informant in multiple treason trials (Anon. 1794a), and a conviction for bigamy (Anon. 1794c). It is clear, however, that John Taylor the oculist and journalist was not the same as John Taylor the bigamist and spy (Barrell 2004).

JEREMIAH TAYLOR
(after 1760-1822)

Jeremiah Taylor, grandson of the Chevalier and younger brother to John, III (third son of John Taylor, Jr.), was appointed oculist to the King in 1790 (Anon. 1790b), one month after his brother. He had received the academic medical training that had been denied to his elder brother. Like his grandfather, he graduated from the University of Basel [Basel] (Innes-Smith 1996, Triet et al 1980). He was described as “the most skilful [sic] and experienced Oculist of his day” (Anon. 1822). Taylor advertised a book, “REMARKS on INFLAMMATION of the EYE,” in 1787 (Anon. 1787) and he wrote an 8-page pamphlet on the treatment of eye diseases, but otherwise does not appear to have published or advertised extensively.

Jeremiah died in 1822 (Anon. 1822) after a long and chronic disease. His brother John, III (1827b) wrote an “Elegiac Tribute” to his memory that begins:

“Brother, farewell! To all who knew thee Thy various merits, ill-returned here, Are gone for endless recompense above, To share the blessings of Almighty Love. On earth with awful reverence be it said, Thy course through Life, averse to vain page, Was still to prove thyself with god-like aim, ‘Sight to the blind’ and ‘feet to the lame’.”

Summary

The Chevalier John Taylor remains a controversial figure more than two centuries after his death. Whether he should be considered a positive or a negative role model to modern ophthalmologists is debatable. His son and grandsons, however, appear to have practiced skillfully and honorably by the standards of their day. Collectively, their lives offer a glimpse into ophthalmic practice in 18th and 19th century Britain and Europe.

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