The writer and cartoonist James Thurber (1894-1961) brought humor to a generation or more of Americans. But joy and laughter were not always part of his life, unfortunately. An arrow injury to his left eye at age 6 years resulted in the removal of that eye. While he was still a child, his right eye developed iritis with exudation over the lens surface, and he was diagnosed as having sympathetic ophthalmia, the inflammation in the good eye that can follow penetrating injury. For several decades, peering over and through hyperopic glasses, his remaining eye functioned relatively well. Then, when Thurber was in his early 40s, the sight in this eye began to fail. He underwent a series of operations for cataract and secondary glaucoma, only to become legally blind. The medical records and the remaining eye, which he willed to science, have disappeared, so the story of his ocular problems must be reconstructed from other sources.

Thurber’s best known work is “The Secret Life of Walter Mitty,” the story of a drab and timid man who escapes from his humdrum, henpecked world into a fantasy life of great adventure. Mitty is a very average man who dreams of accomplishing great things. In one of his reveries, he becomes an internationally famous surgeon who brings order and safety to a chaotic operating room. A medical syndrome has been named for this fictional character, the Walter Mitty syndrome, to describe an ineffectual dreamer. Even if one of Thurber’s colleagues at the New Yorker, Wolcott Gibbs, could say “Thurber has a firm grasp on confusion,” Thurber was not Mitty. He was an extraordinary man with a strong personality who worked long and hard on his writing.

His stories and cartoons were loved by millions of people worldwide. E. B. White, a colleague at the New Yorker, wrote of him: “Most writers would be glad to settle for any one of ten of Thurber’s accomplishments. He has written the funniest memoirs, fables, reports, satires, fantasies, complaints, fairy tales and sketches of the last 20 years, has gone into the drama and the cinema, and on top of that has littered the world with thousands of drawings. Most writers and artists can be compared fairly easily with contemporaries. Thurber inhabits a world of his own.” His fellow writers at the New Yorker tried to rationalize the zany thinking behind his creations. White’s explanation was that “His thoughts have always been a tangle of baseball scores, Civil War tactical problems, Henry James, personal maladjustment, terrier puppies, literary tide rips, ancient myths and modern misapprehensions. Through this jungle stalk the unpredictable ghosts of his relatives in Columbus, Ohio.”

Thurber was born in Columbus and spent most of his youth there. The family moved briefly to northern Virginia, where Thurber suffered the accident that was to change his life forever. Just 6 years old, he was playing with his 8-year-old brother, William, who had a toy bow and arrow. William told his younger brother to turn around to face a fence in their yard, so he could shoot him in the back. Later, Thurber claimed he told his brother that he would not shoot anyone in the back, but he did what was asked and faced the fence. William, not quick to do anything, took a long time to set the arrow in the bow, aim, and fire. Just as Thurber turned around to see what could take so long, the...
arrow struck him in the left eye. The pain and shock of the accident made him cry, but the pain soon decreased. The boys’ mother took him to a general practitioner, who placed a dressing over the eye.

After a few days, the pain became more intense, and his parents took him to see a specialist in eye disease, Swann Burnett, MD (1847-1906). Burnett was a well-trained and esteemed practitioner, a professor of ophthalmology at Georgetown University, Washington, DC, and the author of scientific books and journal articles, some of which appeared in the ARCHIVES.3 His wife, Frances Hodgson Burnett, was even more famous as the author of romantic novels, including Little Lord Fauntleroy and The Secret Garden. Their circle of friends included President James Garfield, and they were acquainted with many of the most famous personalities of their time. Burnett enucleated Thurber’s injured eye, but we do not know exactly how soon after the initial injury this was done.

Unfortunately, removing the traumatized eye did not prevent the development of problems in the other eye. Thurber often said the eye should have been removed sooner to reduce the chance of sympathetic ophthalmia occurring, and he remained angry with his parents because of the events that followed.

Having only one good eye and a prosthesis for the other did not help the tall, awkward boy develop self-confidence. He was fitted with glasses to improve his vision and protect the remaining eye, which did not enhance his appearance either. Nor did the recommendations he was given for activity help him blend in with children his age. He was told to avoid strenuous activity to protect the good eye—no baseball, no running, none of the normal childhood sports. Always self-conscious about having just one eye, for posed photographs he would turn his head to the left, away from the camera. Still, his remaining eye allowed him to function relatively well until he became legally blind a few decades later.

During his college years, Thurber was tall and gangly, self-conscious about his eye, with long shaggy hair that made him look like a sheepdog. Although he had been president of his high school class, he felt a bit out of place in college until a fellow student befriended him and helped get him admitted to a fraternity. He spent much of his time writing for the college newspaper.

World War I coincided with much of Thurber’s undergraduate years. He entered Ohio State University, Columbus, in 1913 and left in 1918, without receiving a degree. By 1918, many students and faculty had left the university voluntarily for military service, but the one-eyed Thurber was constantly rejected by the draft board. This sent him into bouts of despair. He was several years older than most of his classmates and sincerely wanted to help the war effort. He had grown tired of some aspects of college life and half-humorously included as reasons for leaving school the endless military drills and his inability to see through a microscope in botany class. He tried to enlist and even lied about his vision, but he never could pass the physical examination. Nevertheless, the draft board continued to demand that he show up for more examinations. In his own words,

I had to take off all my clothes each time and jog around the hall with a lot of porter and bank presidents’ sons and clerks and poets. Our hearts and lungs would be examined, and then our feet; and finally our eyes. That always came last. When the eye specialist got around to me, he would always say, “Why, you couldn’t get into the service with sight like that!” “I know,” I would say. Then a week or two later I would be summoned again and go through the same rigmarole.3

He tried to become an ambulance driver in France and was again rejected, but no one who had ever driven with him was upset with that decision. Just after the end of the war, Thurber went to Paris, France, as a code clerk for the US State Department.

Thurber returned to Columbus and worked for 3 years as a reporter for the Columbus Dispatch. Next, he went back to Paris as a writer for French editions of the Chicago Tribune and the Paris Herald. In 1926, he wrote a friend, “I write mostly so-disant [so-called] humor, since I haven’t brains enough to write more solid articles and wouldn’t if I could. I often worry about my future since I am no doctor and at best but a mean scrivener.” Later that year, he moved to New York to write for the New York Evening Post. His experience as a reporter taught him the importance of clear, precise writing. He wrote fiction as well, and he sent a number of stories to a magazine that had just begun publication, the New Yorker. After 20 rejections, the magazine bought one, “An American Romance.” He soon met White, a writer for the New Yorker, who helped get him on the staff of the magazine. To his amazement, he was made the managing editor. Administration held no appeal for Thurber, and, fortunately, he was able to shift to writing the “Talk of the Town” column, a series of unconnected anecdotes, with White. This section of the magazine was responsible for its early success. Although his early role model for fiction was Henry James, Thurber found that James’ complicated writing style did not work well for him, nor would the editor of the New Yorker, Harold Ross, publish stories written a la James.

Thurber liked to draw cartoons, and when his sketches were introduced in the New Yorker in 1931, they were immediately popular. The simple linear forms, without shading or shadows, entranced the public. The Thurber dog and the battle between the sexes were his favorite subjects. He dashed off cartoons quickly, unlike the extensive time he took to write a story. According to his wife, Helen, Thurber never cared to be labeled a cartoonist or an artist.6 He had so much fun drawing that he never took his pictures seriously. The witty Dorothy Parker compared the rounded forms of Thurber people to unbaked cookies. A psychiatrist wrote him frequently, offering to cure him of the neuroses apparent in the drawings.7 Many parents said that their young children drew better. When the magazine was criticized for publishing the work of this “third-rate” artist, Ross defended Thurber, saying he was merely “third-rate” and just fine at that level.5 Later that year, he moved to New York to write for the New York Evening Post. His experience as a reporter taught him the importance of clear, precise writing. He wrote fiction as well, and he sent a number of stories to a magazine that had just begun publication, the New Yorker. After 20 rejections, the magazine bought one, “An American Romance.” He soon met White, a writer for the New Yorker, who helped get him on the staff of the magazine. To his amazement, he was made the managing editor. Administration held no appeal for Thurber, and, fortunately, he was able to shift to writing the “Talk of the Town” column, a series of unconnected anecdotes, with White. This section of the magazine was responsible for its early success. Although his early role model for fiction was Henry James, Thurber found that James’ complicated writing style did not work well for him, nor would the editor of the New Yorker, Harold Ross, publish stories written a la James.

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toons, other critics were favorable and even saw similarities to the linear forms of the French artist Henri Matisse. This displeased a few artists, but it provoked a good laugh from Thurber. William Shawn, the magazine’s editor after Ross, described Thurber as “a master among comic artists, one of the great American writers of our time, and one of the few great humorists in all literary history.”

Toward the end of his life, when legally blind, Thurber no longer could write stories at the type-writer, but he dictated them instead. He continued to draw on large sheets of paper, using a magnifying loupe over his glasses (Figure). Well aware of his visual limitations since early childhood, one of the great American writers of our time, and one of the few great humorists in all literary history.”

1937 he wrote to a physician friend, asking for help in finding an ophthalmologist:

I wonder if you would have a moment . . . to suggest a really good eye man to me? He can be an expensive one, because I haven’t got any disease that needs treatment. I haven’t any million dollars to spend, but have become a bit wary of $10 or $15-an-examination men. Have you got anything around $50 or a hundred? I may have to have my glasses changed, and I may not. Oculists seem to disagree. I have just had three separate pairs of glasses made, none of which I seem to be able to stand wearing. You can imagine me with three pairs of new glasses and one old pair.

I can promise any eye man one of the remarkable clinical eyes of the country. All oculists agree on that. They start out by deciding I shouldn’t be able to see anything but moving shapes, end up with me reading two lines below normal on the chart, and finally discover a tiny hole left on a lens which otherwise is covered with “organized exudation.”

Can you drop me a brief note, giving me the name of a good eye doctor . . . ?

Gordon Bruce, MD (1901-1992), an ophthalmologist at Columbia-Presbyterian Medical Center in New York, was recommended and assumed care of Thurber’s eye. Bruce spent a long, distinguished career at Columbia-Presbyterian, interrupted only by service during World War II, when he reached the lofty rank of rear admiral in the US Navy. He was the youngest person to become a member of the American Ophthalmological Society, and he was editor of its Transactions and professor of clinical ophthalmology at the College of Physicians and Surgeons of Columbia University. Bruce did not operate immediately on Thurber’s cataract because of his concern for the risks of an eye with sympathetic ophthalmia, as well as Thurber’s work out of town and anxieties about the operation. He wrote Bruce a letter during a visit to California in 1939:

The old eye is the same as ever for distance but I’ll be goddam if I can read—except—and this is funny—under a big umbrella outdoors in a bright sun; under those conditions I see to read even newspaper type exactly as well without my glasses as with my distance ones (not reading ones)—or anyway, almost the same. If I use my right lens as a magnifying glass and pull it away, I can see as clearly for a fifth of a second as I did in 1890. I can also do a lot of other tricks, but I am getting crosser and snappier and sadder every minute straining and struggling to type and to read and to draw (the latter is the easiest). I’d rather atrophy those muscles in two years than by god go through life like a blindfolded man looking for a black sock on a black carpet . . . . Life is no good to me at all unless I can read, type, and draw. I would sell out for 13 cents.”

Bruce told him the cataract would have to be removed for his vision to improve, but Thurber was not prepared for this psychologically. He said that both he and his wife “went to pieces physically at once, nervously, and mentally, too, I guess. I have been until just a few days ago a shadow of my former self, a shell, a relic, and an old pooh-pooh.”

He could see was 45-point type at near and large neon signs at distance. In a letter written during the spring of 1940, he tried to put some humor into the problem: “I think that my eyesight is improving and that it rises and falls with my state of health and my weight. At first I bumped into horses by day and houses by night but now I only hit the smaller objects, such as hassocks and sewer lids that are slightly ajar.”

A few years later, he walked into someone else’s apartment, hung up his coat in the closet, and recalled he had left a
Thurber wrote that in France during the 1920s, Monet had been used for the artist Claude. This was the same method that was followed by extraction of the cataract. For another opinion, Bruce had recommended a 2-stage operation, a preliminary iridectomy followed by extraction of the cataract. This was the same method that had been used for the artist Claude Monet in France during the 1920s.

Bruce recommended a 2-stage operation, a preliminary iridectomy followed by extraction of the cataract. This was the same method that had been used for the artist Claude Monet in France during the 1920s. Thurber wrote that Bruce will do two operations, instead of one. . . . The first in June maybe, the next in the fall. In between I will be able to see better. I will have to be in the hospital for five days, he said (probably means 7) but all that worries me is whether they will let me get up and to the bathroom, as I do not care about using jugs and bowls, but I am a great hand at slapping nurses and may learn to knit or make little pin trays and bread boards.

In a letter to Bruce from Bermuda, Thurber wrote, I probably see as well as the water buffalo, reputedly the blindest of all large jungle animals. It is interesting to note that the water buffalo can lick a tiger in spite of his opacities and indifferent, if not, indeed, detached retina. My opacities, or spaniel hair, as I like to call them give me lots more annoyance than my buffalo sight. Since I can’t see very far beyond them, I sometimes just sit and look at them. I am familiar with all the new shifts they make and could draw an accurate map of the whole dirty brown constellation. (If I did, the Bermudians might think it was a map of the islands and put me in the military jail.)

Thurber recalled being under the care of C. F. Clarke, MD, in Columbia-Presbyterian, John Dunnington, MD (1894-1977). An influential man in ophthalmology, he was president of the American Academy of Ophthalmology and Otolaryngology and of the American Ophthalmological Society, as well as a member of the editorial board of the Archives. Dunnington agreed that surgery was indicated.

Bruce underwent 5 operations to his right eye during 1940 and 1941. The first was a preliminary iridectomy in June 1940. Shortly afterward he wrote, “I have not had a very good summer in my mind, it being full of dark gibbering figures dressed in black bombazine with lamb’s blood on it, whilst the background scanner the gray wet bodies of dozens of little cheeping wailwice and grunting chudhubs and small round mailbacked cerebiles whose scales come off in your hand and stick to you like wet onion skin.” He noted that his vision was no better, but not much worse, and that he was able to type a story for the Saturday Evening Post. He described getting into difficulty because of his poor vision: “Do you raise them? I said to a lady on a bus. Raise what? she says. Those chickens like the one you have in your lap, I said. She pulled the emergency cord and brought the bus to a halt at the corner of Mobrae and Pineberry Street in Jersey City. What she had on her lap was a white handbag. I may be put away any day now. . . .”

The cataract was removed in October 1940. This was not easy for either the patient or the surgeon. Thurber’s wife reported, “Things didn’t turn out as planned. Dr Bruce told me afterwards it was touch and go for the fifteen minutes of the operation. His eye was so stuck up the old scar tissue from the bad iritis [sic] he had had as a kid . . . that he thought the whole thing was gone.” Postoperative inflammation required 5 weeks of hospitalization, which totally exhausted Thurber emotionally. He was able to see large objects, such as the mirror in his bathroom. After discharge, bleeding scared him into rushing back to the hospital once more.

Secondary glaucoma and iritis followed, and 2 additional operative procedures took place during March and April 1941. Sources differ on what was done: further iridectomies, drainage procedures, or capsulotomies. In May, the fifth and final operative procedure occurred, to control the intraocular pressure. All the operations were conducted under local anesthesia, which Thurber’s wife noted was “harder on his nerves” and left him in “pretty bad shape.” After this exhausting ordeal, Thurber refused to stay in the hospital. Helen Thurber reported, “so down we came nurses and all, and one got measles the first day, and the second one got cramps, and we finally settled for a flat-footed old maid who has never been sick a day in her life but was as dull as an old copy of the Christian Herald.” Helen Thurber described the situation sadly: “He cannot go out alone, has to be led around, except indoors, where he is very agile. And the worst is that he cannot read or draw. He writes in longhand on yellow paper, but cannot see what he writes.”

In a letter to Bruce dated only spring 1941, Thurber stated, “I’m adjusted to the new glasses now. Things seem out of the edge of the lens, curled up like burning paper, but I have got used to that, too. I can make out the pencil point now and Helen says I write a straighter line, though often writing meaningless words.”

After the fifth operation, Thurber endured a psychological crisis with depression. In his own words, “I cracked up. I’m told most patients crack up from shock after the first such operation—and usually lesser operations than mine were. So I had a pretty bad case of nerves.” His despondency and misanthropy are evident in the writings that followed his multiple operations. The war in Europe only made his personal feelings worse. The poet and critic Mark Van Doren reported that Thurber asked him if his blindness “was not a punish-
ment for the kind of writing he had done. ‘I have done nothing,’ he said ‘but make fun of weakness and folly; wisdom, strength, goodness have never been my subjects as they ought to be for anybody—as they are for you. I have been pitiless, trivial, destructive. And now this trouble comes.’ 14 Van Doren noted that at least he did not sink into self-pity.

His spirit improved a few months later, at least in a letter to Bruce from July 1941: “That thing which was once an eye (circa 1899) is holding its own very well. There is no pain or discomfort, and no irritation from the drops. . . I wore the new glasses for eleven minutes and then said the hell with it. The improvement in vision isn’t enough to help much.” 11(p77)

During World War II, Bruce served as a naval officer in the Pacific; at one time, he commanded 60 doctors and 2 hospitals and was responsible for the health of 14000 men. The 2 individuals maintained a friendly correspondence by mail. While Bruce was gone from Columbia-Presbyterian, Arnold Knapp, MD (1869-1956), took care of Thurber. Knapp, professor emeritus at Columbia, was the editor of the Archives for 38 years, as well as being the son of the founder of the Archives. 15 After the war, Bruce returned to Columbia. Thurber wrote him of his intention to leave his eye to Columbia after his death.

I have always had a suspicion that I either had two optic nerves or a piece of old pocket mirror somewhere in the back of my eye and if you think an examination of the battered orb would be of any benefit to medical science or mankind, I would be glad to contribute an old useless eye to this end. You and Dr Knapp know the condition and history of the eye, but my chances of outliving you both are, of course, considerable, because you work too hard. I would not want anybody monkeying around with the thing who did not know the history of the eye, and that is why you should get around to writing the article on it you once mentioned. . .

A psychiatrist acquaintance of mine asked me recently if the brother who shot the arrow had ever married, and when I said he had not the psychiatrist said that this was to be expected. The human being is indeed a complex creature. 11(p82)

His eye was studied microscopically, and the findings were consistent with the clinical picture. 13 Unfortunately, Thurber’s medical records have vanished from Columbia-Presbyterian. A few years before Bruce died, I spoke with him about Thurber’s vision. He said that Thurber was his friend as well as his patient, and he did not want to divulge any more information than was already public.

Thurber and Bruce kept in communication by mail when not in New York. During a trip to England, Thurber wrote Bruce, “I am having a wonderful time in the Duke-Elder country.” 11(p90) (Sir Stewart Duke-Elder [1898-1978] was the author of the definitive ophthalmic textbook of the period.)

After the terrible ordeal of multiple operations on his remaining eye, Thurber found something positive in it: “Today I have 6 per cent vision at most. But blindness is only a challenge, not a handicap. In many ways it’s actually an advantage for a writer. There are less distractions by useless reading, or a bird at the window, or a pretty girl passing by. . . I now am able to write complete stories in my head. I can remember a 3,500-word story without missing a punctuation mark.” 16 Thurber dictated stories, drew cartoons, and promoted ocular safety until a few years before his death in 1961.

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