

His Last Bow

Adventure XLVI – The Adventure of the Dying Detective

Seventeen thoughts for further ponderance of "The Adventure of the Dying Detective" by Sir Arthur Conan Doyle.

1. The Invasion Of Mrs. Hudson's Flat

We are given a few examples of Mrs. Hudson's long-suffering nature in this tale, the first of which being: "Not only was her first-floor flat invaded at all hours by throngs of singular and often undesirable characters..."

Reading this in the past, I've always assumed this meant Holmes's clients coming through the entryway. Looking at it now, however, I get a feeling people were wandering into Mrs. Hudson's living quarters. Would the front door at 221 Baker Street have been kept locked or unlocked during daylight hours? Would over-eager or distraught potential clients (not to mention those mad folk who just took an inkling to see Mr. Sherlock Holmes in the flesh) have just been wandering through the house looking for Holmes?

2. A Very Tricky Manipulation

Mrs. Hudson tells Dr. Watson, "This morning when I saw his bones sticking out of his face and his great bright eyes looking at me I could stand no more of it. 'With your leave or without it, Mr. Holmes, I am going for a doctor this very hour,' said I. 'Let it be Watson, then,' said he."

Holmes's entire plan seems to depend upon Mrs. Hudson's concern for him, and taking the action she explains above. What might Holmes have done had he had a landlady who was content to let him dwindle away, if he were trying to set the same trap?



3. Mrs. Hudson's Knowledge Of Holmes's Cases

"He has been working at a case down at Rotherhithe, in an alley near the river, and he has brought this illness back with him."

Did this information come to Mrs. Hudson only when Holmes fell sick, or did he keep her vaguely apprised of his current work with no Watson present?

4. The Dutch Medical Experience In Sumatra

"I know what is the matter with me. It is a coolie disease from Sumatra-- a thing that the Dutch know more about than we, though they have made little of it up to date."

One would expect the Dutch to know more about Sumatran disease than the British, given the British relinquished their Sumatran holdings to the Dutch earlier in the century, but why have the Dutch made so little of what seems to be a very contagious disease? Just the state of things at the time, or were they behind the British in medical research? What nation was the world's medical leader in the late 1800s?

5. The Ref Calls Unnecessary Roughness!

"But facts are facts, Watson, and, after all, you are only a general practitioner with very limited experience and mediocre qualifications. It is painful to have to say these things, but you leave me no choice."

Couldn't Holmes have simply pleaded with Watson to get him a specialist without cutting the doctor down first? Would Watson have insisted on checking Holmes out before getting the specialist? Would Watson's assessment of Holmes's medical knowledge have allowed him to get a specialist based on Holmes's word alone?

6. Did These Fellows Make House Calls?

Watson asserts: "I happen to know that Dr. Ainstree, the greatest living authority upon tropical disease, is now in London. All remonstrance is useless, Holmes, I am going this instant to fetch him."

Does one fetch "the greatest living authority" just like that? What about Sir Jasper Meek or Penrose Fisher, or any of the best men in London? Could Watson fetch any of these experts in their field and get them to come to Baker Street just like that?

Would Holmes's prominence in the 1890's have made such a thing more probably than in his 1880's beginnings?

7. Holmes's Bedroom Gallery

"Then, unable to settle down to reading, I walked slowly round the room, examining the pictures of celebrated criminals with which every wall was adorned."

What do we make of the walls in Holmes's room? Sure, he's a criminal specialist, but why would he have pictures of criminals on his walls? Would they be art-type paintings or drawings, or actual photos? Were they to inspire him or remind him of some past injustice? Was he memorizing faces to recognize them at first sight?

8. Holmes's Bedroom Collections

"Finally, in my aimless perambulation, I came to the mantelpiece. A litter of pipes, tobacco-pouches, syringes, penknives, revolver-cartridges, and other debris was scattered over it."

We know Holmes has many pipes, as pipe-enthusiasts commonly do. But how many different tobacco-pouches, syringes, or penknives would one expect a man of Holmes's habits to have lying around? Did syringes have other uses than injecting drugs, as we saw in "Missing Three-Quarter"?

9. That Dr. Watson Will Drive You Crazy!

"I hate to have my things touched, Watson. You know that I hate it. You fidget me beyond endurance. You, a doctor--you are enough to drive a patient into an asylum. Sit down, man, and let me have my rest!"

How much of that outburst was due to Holmes's horror at Watson playing with the deadly box-trap, and how much was a reflection of Watsonian habits that Holmes found irritating during their residence together? Was Watson always touching Holmes's things back then, and getting scolded on a regular basis?

10. The Culverton Smith Story

"Mr. Culverton Smith is a well-known resident of Sumatra, now visiting London. An outbreak of the disease upon his plantation, which was distant from medical aid, caused him to study it himself, with some rather far-reaching consequences."

Was Smith an Englishman? If so, would it have been unusual for him to have a plantation in Dutch Sumatra? Was coffee his most likely crop?

11. JUST HOW FAUX-DELIRIOUS WAS HOLMES?

"Indeed, I cannot think why the whole bed of the ocean is not one solid mass of oysters, so prolific the creatures seem . . . No doubt there are natural enemies which limit the increase of the creatures."

So what's the real deal with oysters? Are they truly prolific creatures? Who are their natural predators? What are their limits? Climate?

12. Scotland Yard Almost Blows It

Upon leaving Holmes, Watson encounters Inspector Morton, who asks how Holmes is. When Watson replies that Holmes is ill, we read:

"He looked at me in a most singular fashion. Had it not been too fiendish, I could have imagined that the gleam of the fanlight showed exultation in his face."

"I heard some rumour of it," Morton then replies, undoubtedly chuckling to himself.

Was it really necessary that Morton check Watson's frame of mind as the doctor left? Could Morton have tripped Watson to the game with such an encounter?

13. That Space At The Head Of The Bed

This one has been debated to death, but it bears mentioning: How does Holmes have room behind the head of his bed for Watson to hide? Is his bed set on a diagonal to the room? Is Watson still "as thin as a lath" from the Afghan campaign? Why not just crawl under the bed?

14. Three Days Without Water

"I give you my word that for three days I have tasted neither food nor drink until you were good enough to pour me out that glass of water."

This can't be good. Are there any long-term effects to depriving one's self of water for three days? And what of the short-term ones?

15. The Symptoms Of A Dying Detective

"Could I fancy that your astute judgment would pass a dying man who, however weak, had no rise of pulse or temperature?"

Aren't there any diseases one can die of that don't involve a rise in pulse or temperature?

16. Disease Or Poison?

"He took to his bed on Wednesday afternoon and has never moved since."

"Do you remember a box--an ivory box? It came on Wednesday."

Don't most diseases have some sort of incubation period, in which the infection takes hold and spreads through the body? Is any disease so virulent that a morning exposure leads to afternoon symptoms?

17. Victor Savage's Fortune

"I dare say it was by some such device that poor Savage, who stood between this monster and a reversion, was done to death."

Okay, I'll admit it. I still don't understand the concept of "reversion" which seems to have been the motive here, even after reading Baring-Gould's not on it. Does anyone have "The Dummies Guide to Reversions" handy, and can explain it clearly and concisely?

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