

History of Medicine

CHANGELINGS*

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SUMMARY

North European legends concern infants substituted in the cradle by fairies. Changeling infants were probably mostly mongoloids, and while other syndromes have since been delineated and removed from the changeling category, a residue of odd children remains, strange in appearance and behaviour, and for whom the label strangeling seems appropriate.

And when I arose in the morning . . . behold it was not my son, which I did bear.

1 Kings 3: 21

Changeling and weanling are archaic words and even nursing and suckling are seldom used nowadays. And yet the ancient ideas persist even if the expressions are different. 'He's just not the same baby' or 'In the last month he's completely changed' are maternal complaints heard almost daily.

Perhaps all cultures have experienced fears of child stealing and certainly of infantile illness. The nights were peopled with evil spirits intent on spiriting away the lovely offspring of happy mothers. Babylonian sources mention child-stealing hags who perched on rooftops, ready to pounce on newborn babies, and there are Roman sources, mentioned by Pliny, recalling the shooting of arrows over rooftops in order to protect expectant mothers. The first century novelist Petronius noted that children could be suddenly changed.

But it was in northern Europe that the legend of the changelings really had its origins and what is known of it today in the Mediterranean lands filtered south with the passage of the centuries. Northern Europe and Russia, the Scandinavian countries, Iceland, Scotland, England, Wales and Ireland—here, where beliefs in fairies were strong, was the home of the changelings and of those who trafficked in them: fairies, elves, goblins, pixies. They were called 'the little people' and, paradoxically, 'the good people', for there were differing traditions on the nature of these little forest folk, on the reasons for them stealing and substituting infants and on what could be done about reversing the substitutions.

If the fairies were regarded with fear for what they might do, it is curious that they were not regarded with hate; perhaps anything diminutive is lovable and the playful dwarfs of forest clearings or underwater habitations were adorable creatures, 'good people'. In time ideas changed and hatred developed, but this was a consequence of the encroachment of Christian interpretations of these non-human dwarfs. The pre-Christian Celto-Germanic barbarians(!) were fond of their little imaginings.

Why did 'the good people' steal babies and substitute them with changelings? It was said that the fairy child was placed among humans in order that it might have the benefit of human milk and care, while the stolen infant was envied for its beauty, and through proximity with

'the little folk' could introduce beauty to them, a faculty for which they were very grateful.

The substitution might not be immediately obvious. The changeling might have an uncanny resemblance to the stolen infant, and only later would the altered appearance and behaviour become manifest. Or, sometimes, the change might be sudden, and a mother might have cause to exclaim 'he's just not the same baby'. The dictionaries define changelings as 'ugly, stupid, peevish', delineating their appearance and behaviour in the most gross instances. Some more detailed descriptions also exist: 'its proportions were wrong, its head too big for its body, its face was ugly or wrinkled, it looked old, for according to the legend, it was not a child at all but an age-old creature. Sometimes it had a thick throat and was for this reason known in many districts as Killcrop (*Kielkropf*, crop in the throat). It could not stand or walk but crept around like an animal. It drank greedily and insatiably and sucked four or five wet nurses dry. It did not laugh or talk but screamed and shouted interminably.'¹

Are we here dealing with pure phantasy or can a medical kernel be detected? It is surely significant that medieval folk found it possible to delineate a clinical entity, some syndrome for which the diagnostic explanatory label changeling evolved. Changelings must have shared some characteristics, especially as regards their appearance, in order to be dubbed as such, and Dunlop² has shrewdly suggested that most changelings were mongoloid babies, these being by far the largest single group of obviously abnormal children. There is much to recommend his diagnosis, even within the description of an ugly wrinkled child with wrong bodily proportions, delayed locomotor attainments, and delayed and perhaps hoarse speech. Fear of idiocy was also a factor for in Scotland a newborn baby's first sneeze was awaited with anxiety, it being generally believed that no idiot could sneeze and that all infants were potentially within the thrall of fairies until they sneezed. The peevishness, the interminable screaming and shouting, is an anomaly. Mongoloid infants are placid. Here we can invoke Shakespeare to assist us. He was a keen clinician and his plays are studded with shrewd medical observations about which several papers and even books have been written. Shakespeare writes of: 'A lovely boy, stolen from an Indian king; She never had so sweet a changeling' (*Midsummer Night's Dream*, Act II, Scene I).

His allusion to an oriental origin to the changeling may also be significant and I would suggest that Shakespeare had correctly noted some of the characteristic clinical features of mongolism long before Langdon Down. The slow realization that an infant, apparently normal at birth, was physically and mentally retarded, would render mongolism especially suited to a retrospective diagnosis of changeling, of having been substituted many months earlier.

What could be done about changelings? There were

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preventive measures: a sprig of magical mistletoe laid within the cradle frightened off the questing fairies, and also efficacious were various amulets: bread, salts, garlic, iron, a light burning in the room at all times. Most important, the infant should be under constant surveillance because the danger of surreptitious change was greatest at night and at birth and during the first days or weeks of life.

But presented with a changeling in the cradle, what could be done? A minority view, prevalent in Ireland, held that the changeling should be well treated as a consequence of which 'the good people' would reciprocate and when they returned the original child he would be healthy and good-looking. Far more often the reasoning was that if the changeling were ill-treated the elves would feel so sorry for it that they would snatch it back, returning the stolen child; and so changelings were burned, beaten, poisoned, exposed to cold and half-drowned as inducements for 'the little folk' to come and collect their own.

Repeatedly there are prescriptions on dealing with the problem by compelling the mute changeling to talk or laugh, and here again we must associate the commonly observed mutism with idiocy. In a Grimm fairy-tale we read:

'Fairies stole a mother's child from its cradle and in its place laid a changeling with a big head and staring eyes who wanted to do nothing but eat and drink. In her distress the mother went to a neighbour for advice. The neighbour told her to take the changeling into the kitchen, set it upon the stove, make a fire and boil water in 2 eggshells. This would make the changeling laugh, and if it laughed, that would be the end of it. The woman did everything the neighbour had said. When she set the eggshells of water on the fire, the changeling said:

"I am as old as the Wester Forest

Yet never have I seen water boiled in an eggshell"

and it began to laugh. When it laughed, a troop of fairies came in, bringing with them the right child, which they set on the stove, and taking the changeling away with them."

When Christians mingled their fairy-tales with the Celto-Germanic ones, hybrid stories appeared, involving the inevitable saints and satanized goblins. In Spain and Italy it was the Devil who stole children, and changelings had horns (cf. the infant in Ira Levin's novel and film, *Rosemary's Baby*). If, in a mad moment, an angry mother shouted at her infant 'the Devil take you!' Satan would do just that. In his book, *Table Talk*, Luther advised that jabbering idiots (changelings conversing with the Devil) should be drowned in the river. The *Malleus Maleficarum*, the textbook of the Inquisition, also contributed its quota to the literature on satanic changelings. As preventive measures a cross or crucifix in the house was effective and even more so, baptism. Only an unbaptized infant was vulnerable, so that the christening had to be done as soon as possible after birth. Curiously, Afrikaners have a relevant expression for explaining the behaviour of an odd child: 'Hy is in die konsistorie omgeruil'. It seems to me that this allusion to a child 'swopped in the vestry' refers to a final satanic effort before baptism rendered the infant immune.

MODERN REMNANTS

The ancient legends have not died; they continue to propel themselves into our ken, and not only in the puzzled remarks of mothers about their changed babies. Rational explanations on changelings are not recent but begin early. In the mid-1600s, when the obsession with changelings was at its height, Thomas Fuller, a British ecclesiastical historian, wrote that 'A changeling . . . is not one child changed for another, but one child on a sudden changed from itself.' Such attitudes persisted so that it was reasonable for Macaulay, in his *History of England*, to write, in 1855, that 'The smallpox was always present . . . turning the babe into a changeling at which the mother shuddered.'

Children still read about changelings. A 1959 children's book on Welsh legendary tales relates how a wise old man advised a distressed mother to boil stew in an eggshell (at which the changeling spoke) after which she ran to a nearby pool and made as if to drown the changeling; immediately the goblins appeared, snatched it away from her and returned the original baby.

A comic book, printed in 1970, featured a story concerning the infant daughter of a Cornish blacksmith, one Morna Tregan, who was diagnosed by neighbours as being a changeling. They cried 'God save us! 'Twill bring only misfortune! They do say if you whip it often enough the little people will come to take it back.' The badly treated Morna eventually grew up to marry a local nobleman. The strip is well researched, with allusions to Charles I and Cromwell and even to the use of the word *piskey*, an Old English dialect and a variant of the Scandinavian *pixy* or *pixey*.

A few years ago 'troll dolls' suddenly appeared in South Africa, were immensely popular for some months



Fig. 1. A troll doll

and then vanished from the scene. Whatever the modern connotation of troll, in the early Scandinavian literature trolls were fairy dwarfs. These troll dolls were ugly achondroplastic-like creatures with immense quantities of unkempt hair straggling from a non-existent forehead and crown (Fig. 1). Some troll dolls had slant eyes.

Most interesting was the description, in 1954, of leprechaunism, leprechauns being (Irish) hairy sprites. The condition manifests a hairy elfin facies and, appropriately enough, the syndrome was described by Irish-American Donohue.³ Though he made no mention of changelings in the preamble to his article, clearly the ancient myths still stirred his modern mind.

STRANGELINGS

So have changelings vanished, fairies disappeared? Not really: like the godlings, old goblin(g)s never die, they simply change their names. The little folk have become even smaller, microscopic creatures. Fairy demons have become minidemons, microdemons, microbes,⁴ and changelings have become strangelings. For I aver that strangelings exist and they are many. A residue of the changelings, strangelings are yet frequently encountered. Most changelings have disappeared because other diagnostic labels have been pinned on them; they have been removed from the fairy scene, and classified elsewhere. Microscopic elves and goblins have inflicted their sudden cerebral trauma and within days or weeks a changeling is made, only he is called hyperkinetic, postencephalitic, aphasic, mentally handicapped, autistic, or minimally brain damaged. And some cannot be classified—strangelings.

In 1955 Boston physician Bierman⁵ described a hitherto unrecognized disorder. Y00-Y00 disease was 'an often encountered but ill-defined condition'. A completely mystifying syndrome, it could not be classified among any known disorder according to the Standard Nomenclature of Diseases and, in all its clinical puzzlement, had to be listed under 'unclassifiable' designated y00-y00.

Strangelings are in a like predicament. We encounter one or two every month. They are not mongoloids—easy to recognize—and, if it takes longer, it is generally easy to exclude also mental retardation, cerebral palsy, deafness, autism and even more nebulous disorders like dysautonomia. But a residue remains, strange children, who cannot be labelled with the words found in the standard paediatric textbooks. If they look a trifle odd, American paediatricians have a name for them: FLK (funny-looking kid), and FLKs are part of the spectrum of strangelings.

Strangeling-ism is not a single disorder, though I would guess that its operative feature is cerebral or neurological. Inexperienced doctors might label strangelings those whom more knowledgeable physicians would diagnose more accurately and classify elsewhere. I have known many strangelings whom, had I been compelled to do so, I would have had to classify with a y00-y00 label, but perhaps the most puzzling strangeling I can recall is one under my care at present:

Carol, 2 years old, is the third child of university graduate parents who are of normal physical appearance though both are rather short. Early pregnancy was marred by bleeding but at term a normal-looking 6-lb infant was delivered. Immediately there was trouble: she refused to feed. The mother, who had successfully suckled

her first two babies for many months, had to abandon nursing within a few weeks. The bottle was equally unsuccessful. Her appetite was execrable: 2 oz feeds, 1-oz feeds. Mercifully, she hardly ever vomited. But diarrhoea was a daily feature during the first several weeks of life—and feature is the correct word: the diarrhoea was only manifest between 3 p.m. and 6 a.m. after which, it seemed, a magical spell kept the bowels closed until the next 3 p.m. A *Pseudomonas pyocyaneus* bacterium was cultured from the stool and a suitable antibiotic given without effect and it seemed indeed that the diarrhoea was circadian and neurologic rather than bacterial in origin. By the age of 3 months it was over.

Thereafter 2 features were prominent, and to note that they were troublesome and worrying is a vast understatement. She would not eat; imagine, a child of 8 months taking 2-3 oz of milk 3 times a day. Perhaps once or twice a week she would surprise everybody by gorging herself with 6 oz, but mostly the intake was pitiful. Now and then a few teaspoons of egg, fruit, and even cereals and vitamins in desperation. She seemed not to experience the sensation of hunger and was mechanically fed otherwise she could easily have starved herself to death. On 3 or 4 occasions her hunger strikes were of such dimensions that I forcibly tube-fed her, twice daily (6-8-oz feeds) for up to a week at a time.

Her fluctuations of weight were hair-raising. She could gain or lose 8 oz a day for no reason. A hired scale has been in the house for more than 2 years. If she had 1 or 2 loose stools during the course of an illness, or otitis media (several episodes, one requiring myringotomy) or sore throat, or roseola, she could lose almost 1 lb in a day; then she would take 3 miserable feeds and be back to normal the day after.

And what was normal? At the age of 1 year she weighed 16½ lb and was 28 in tall; at 2 years she weighed 18½ lb and was 30 in tall. Meaningful gains were painfully slow. She carried weeks at 9 lb and 13 lb. It took 6 months for her weight to increase from 16 to 17 lb and another 6 months to increase from 18 to 19 lb. She is very thin, with little strips of muscle slung athwart her bony legs which only now, at 26 months, are beginning to propel her without assistance across a room.

And her temper! It is vile! From the earliest days she shrieked interminably for no reason. Nothing satisfied her and she never smiled. A visitor or a new face was enough to cause hours of hysterics. And in order to ensure that she would sleep every night the tiny tot had at least 10 ml of Tricloryl at 6 p.m. plus a few other sedatives now and then. When her behaviour was especially abominable then one learned—and this is quite extraordinary—that in 3 or 4 days' time she would be ill and, sure enough, when Carol bawled all day and all night on Sunday, then on Thursday or Friday her temperature would be 103°F or her left ear (it was always the left) full of pus, or a massive diarrhoeal campaign instituted.

At the age of 2 years she began to smile (occasionally) at humorous situations. Otherwise she glares at me with profound suspicion and should I make a false move, or somebody say something, or the servant offer her a banana, or she be taken to a strange place, or her brother try to kiss her (she hates affection), she screams the house down.

She seems intelligent within the limits of her restricted

experience: she has only now begun to walk and explore her environment. She says 2- or 3-word sentences and appears to have a shrewd understanding of what is going on in the house and what the parents are talking about, but she is the boss; she just has to screw up her eyes and open her larynx, or refuse 20 feeds in a row and the whole household dances to her tune.

Her urine is normal, blood count normal, protein-bound iodine high normal and X-ray of the skull normal. The electroencephalogram at the age of 14 months showed an

area of irregular high-voltage activity over the right occipital region with considerable interhemispheric asynchrony (similar findings on an EEG done at 26 months). Paediatric and neurologist colleagues are mystified and agree with the parents that 'she is such a strange child'. I think more; I think she is a strangeling.

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