

CHAPTER 1

Victoria and Albert

1841

‘Not feeling very well again and had rather a restless night,’ wrote Queen Victoria in her journal on 17 October 1841.¹ She was heavily pregnant with her second child.

Next day, the royal obstetrician, Dr Locock, examined the Queen and pronounced the birth to be imminent. Much against her will, she travelled from Windsor, where she was comfortable, to Buckingham Palace, which she disliked. Fat as a barrel and wearing no stays, the twenty-two-year-old Queen expected her confinement daily. She felt ‘wretched’ and too tired to walk.² Prince Albert watched his wife anxiously. He wrote in bold black ink in his large childish hand to the prime minister, warning him to be ready to appear at the palace at the shortest notice, ‘as we have reason to believe a certain event is approaching’.³ It was a false alarm, the first of many.⁴

Victoria had not wanted this baby, and she was furious to discover herself pregnant again only months after the birth of her first child. She had a ‘vein of iron’, but though she was Queen of England, she could not rule her own biology.⁵ Feeling nauseous, flushed and stupid, she was powerless to stop control of affairs slipping from her fingers. Still more did she resent her enforced abstinence from nights of married bliss with her ‘Angel’, Albert.

On the morning of 9 November, the Queen’s pains began. Only Albert, four doctors and a midwife, Mrs Lilly, attended the labour. At the prince’s request, the prime minister, his colleagues and the Archbishop of Canterbury did not witness the birth but, contrary to custom, waited in another room. Albert, always conscious of appearances, had insisted that the Queen ‘was most anxious from a feeling of delicacy that it should appear in the Gazette that at her confinement only the Prince, Dr Locock and the nurse were present in the room’.⁶ His own attendance at the birth, which was widely reported, gave an example to English manhood of how a modern father should behave.⁷

Delivering the royal baby was nervous work for Dr Locock. Although this was the Queen’s second confinement, her first child had been a

girl, and the possibility of a male heir to the throne meant that this birth was an important political event. The job of royal obstetrician was so risky that Locock was paid danger money – an exorbitant fee of £1,000.*⁸

At twelve minutes to eleven, a boy was born. The baby was exceptionally large, the mother was only four feet eleven inches tall, and it had been a difficult birth. ‘My sufferings were really very severe,’ wrote Victoria, ‘and I do not know what I should have done but for the great comfort and support my beloved Albert was to me during the whole time.’⁹ Albert, who (according to his private secretary) was ‘very happy but too anxious and nervous to bear his happiness with much calmness’, showed the baby to the ministers waiting next door.¹⁰ The healthy boy was the first Prince of Wales to be born since 1762, but for his mother this was not a cause for rejoicing.

The fate of Princess Charlotte, Victoria’s first cousin, can never have been far from the mind of Dr Locock. Charlotte died in November 1817 after an agonising fifty-hour labour, having given birth to a stillborn son. Her *accoucheur* – the fancy French title for what was little more than an unqualified male midwife – shot himself three months later.

If Charlotte had not succumbed to post-partum haemorrhage, Queen Victoria would not have been born. Charlotte’s death detonated a crisis of succession for the Hanoverian dynasty. Not only was she the sole legitimate child of the Prince Regent, later George IV, but, incredibly, she was the only legitimate grandchild of George III – in spite of the fact that he had fathered a brood of six princesses and seven princes. Not that the Hanoverians were an infertile lot. Three of the daughters of George III remained spinsters and the three princesses who married were childless; but the seven sons managed to sire an estimated twenty children between them.¹¹ All except Charlotte were illegitimate. The sons of George III had failed in their fundamental dynastic purpose: to ensure the succession.

When Charlotte died, Lord Byron threw open the windows of his Venice apartment and emitted a piercing scream over the Grand

*The medical bill for the birth totalled £2,500 (£110,250 in today’s money) and the doctors were solemnly informed that these lavish fees were paid solely ‘in consideration of HM’s having given birth to a Prince and future heir to the Crown of England and that they must not be considered as forming any precedent for future payments’ (RA VIC/M11/25, Sir Henry Wheatley to Albert, 11 November 1811).

Canal. She was the only member of the royal family whom the people loved, and with her death the credibility of the monarchy slumped. The Prince Regent, who reigned in place of his old, mad father, George III, was lecherous, gluttonous and grossly self-indulgent. How he had managed to father Princess Charlotte was a mystery. On his wedding night he was so drunk that he slept in the fireplace. He banished his wife and treated her with ostentatious cruelty, which made him deeply disliked. He and his brothers were the so-called wicked uncles of Queen Victoria, and even by the rakehell standards of the day, they were dissolute.

Charlotte's death forced these middle-aged roués, with their dyed whiskers, their wigs and their paunches, to enter into an undignified race to beget an heir. One by one they dumped their mistresses and hastened to the altar. Their choice of brides was limited by the Royal Marriages Act, introduced by George III in 1772, which made it illegal for the King's children to marry without his consent. The royal family disapproved of princes marrying into the English aristocracy, as this involved the monarchy in party politics. Under the Act of Settlement of 1701, Roman Catholics were excluded from the succession. So the royal marriage market was effectively confined to the small Protestant German courts, which acted as stud farms for the Hanoverian monarchy.

Prince Edward, Duke of Kent, was the fourth son of George III. Neither dissolute nor vicious, he was large and talkative with a certain sly cunning. He smelled of garlic and tobacco, and he was always in debt. In the army he was a stickler for uniforms and a harsh disciplinarian, heartily disliked by the rank and file. He had lived contentedly for twenty-eight years with his bourgeois French mistress, the childless Julie de St Laurent. When the death of Princess Charlotte gave him the opportunity to supplicate Parliament to pay off his debts in exchange for trading in his bachelor status, the duke did not hesitate to discard Julie and marry a German princess. His choice was Victoire, the thirty-year-old widow of the minor German prince of Leiningen and the mother of two young children. She was also the sister of Prince Leopold of Saxe-Coburg-Saalfield, the widower of Princess Charlotte.

The Kents shared a double marriage ceremony in 1818 with William, Duke of Clarence, the third son of George III, who married another German princess, Adelaide of Saxe-Meiningen. Two weeks earlier, the seventh brother, the virtuous Duke of Cambridge, his mother's favourite, had married yet another German princess, Augusta of Hesse-Cassel. The Duke of Cumberland, who had married a German princess four

years before, and had as yet produced no children, was now hard at it. The race was on.*

Kent won. On 24 May 1819, the duchess gave birth to a daughter, Victoria. This baby was fifth in line to the throne, coming after the Regent and his three younger brothers.†

No one questioned Victoria's legitimacy at the time, but the rogue gene for haemophilia which she carried throws doubt on her paternity. Two of her daughters were carriers of the gene for the condition which impairs blood-clotting, and one of her sons, Leopold, was a bleeder.‡ Victoria's gene was either inherited or the result of a spontaneous mutation. Haemophilia cannot be traced in either the Hanoverian or the Saxe-Coburg family; and as the odds of spontaneous mutation are 25,000:1, Victoria's gene has prompted speculation that the Duke of Kent was not her biological father. According to one scenario, the Duchess of Kent, despairing of her husband's fertility, and desperate to win the race for the succession, decided to take corrective action and sleep with another man. Unfortunately, this lover happened to be haemophiliac.¹²

This melodramatic hypothesis is entirely speculative, and there is not a scrap of historical evidence to support it. The Duke of Kent was not infertile; on the contrary, he is credited with at least two well-attested illegitimate children.¹³ Victoria, along with her eldest son, inherited unmistakably Hanoverian features, such as a receding chin and protruding nose (her profile in old age is remarkably similar to that of her grandfather, George III), as well as a tendency towards obesity and explosive rages. Courts are hotbeds of gossip, but there was no whisper at the time that Victoria was illegitimate. Scientists believe that the faulty gene was a new mutation. At least one in four incidences of haemophilia are the result of new mutations, and this is especially likely in the case of older fathers; the Duke of Kent was fifty-one when Victoria was conceived. So the odds are that the gene, which was later to wreak havoc with both the Spanish and the Russian

*Three other brothers were unable to take part in the race for the succession. The Prince Regent was still legally married to his estranged wife, Caroline of Brunswick, who was too old to have another child. The second brother, Frederick, Duke of York, was married to a Prussian princess, but the marriage was childless. Augustus, Duke of Sussex, brother number six, had ruled himself out by marrying Lady Augusta Murray in defiance of the Royal Marriages Act.

†Next in succession after the Regent came the Duke of York (childless), then Clarence (childless) and fourth, Victoria's father, the Duke of Kent.

‡The haemophilia gene is carried on the X chromosome, which means that women can be carriers, though, like Victoria, they show no symptoms.

royal families via marriages to Victoria's granddaughters, originated in the testicles of the Duke of Kent in 1818. The genetic time bomb of haemophilia was the tragic price paid by his descendants when Kent won the race that the wits dubbed Hymen's War Terrific.¹⁴

Victoria's doctors and family worried not that she was illegitimate, but, on the contrary, that she had inherited the Hanoverian insanity. Mention of the madness of George III was suppressed in the nineteenth century, largely because Victoria herself was sensitive on the subject, but the royal doctors were well aware of it. It blighted the lives of the daughters of George III, who, prevented from marrying, were confined to the so-called 'nunnery' at Windsor. In the 1960s, the mother-and-son medical historians Macalpine and Hunter made the diagnosis of the genetic disease porphyria. Symptoms include severe rheumatic pain, skin rashes, light sensitivity and attacks of acute illness, but the diagnostic clincher for this rare metabolic disorder is red-stained urine. The disease had apparently bedevilled the royal family since Mary, Queen of Scots and James I, but only caused madness in extreme cases.¹⁵ A recent analysis of the hair of George III shows abnormal levels of arsenic. This was prescribed by his doctors, but the medication may have been counterproductive and made his illness worse.¹⁶

Building on the work of Macalpine and Hunter, researchers have conjectured that most of the children of George III were afflicted by some of the symptoms of porphyria. The Prince Regent was laid low by bouts of acute illness and episodes of mental confusion, and he complained of a range of porphyria symptoms, which he self-medicated with alarmingly large doses of laudanum. He and his brothers were all convinced that they suffered from a peculiar family disease.¹⁷ The medical history of Victoria's father includes attacks of abdominal pain, 'rheumatism' and acute sensitivity to sunlight, all symptoms of porphyria. Earlier biographers insisted that Victoria was completely unaffected, but the picture is not quite so straightforward.¹⁸ One of her granddaughters, Princess Charlotte of Prussia, whose distressing medical history is fully documented, seems to have suffered from the disease. She may have inherited it through Victoria, though Victoria herself was asymptomatic, or at worst a mild sufferer.*

*Porphyria is a dominant gene, which means that each child of a carrier has a 50 per cent chance of inheriting the disease. However, one of the peculiarities of the illness is that in 90 per cent of those with the faulty gene, it remains latent and they show no symptoms of the illness. The gene can thus appear to skip generations and then resurface. Queen Victoria's medical history includes some of the physical symptoms of

Much of this is speculative. The porphyria theory is known to be shaky and incapable of real proof, and it has come under attack from other medical historians. No one knows for certain what was wrong with the unfortunate George III. It is conceivable that contemporaries were right after all, and he really was mad. The latest theory is that he was afflicted by bipolar disorder.¹⁹

Victoria's father, the Duke of Kent, died unexpectedly of pneumonia when she was eight months old. Six days later, her grandfather, George III, also died, and she advanced from fifth to third in the line of succession.

Victoria was brought up in seclusion and (by royal standards) reduced circumstances by her mother, the Duchess of Kent, in an apartment in Kensington Palace. Her mother quarrelled with George IV, 'whose great wish', as her uncle Leopold told Victoria, 'was to get you and your Mama out of the country'.²⁰ Had Victoria lived in Germany, as the King desired, she would have been perceived as just another German princess. The duchess, however, was an ambitious woman, and she took great care to ensure that her daughter was brought up as heir to the English throne.

The rift between the Duchess of Kent and George IV meant that her mother kept the young Victoria under constant surveillance. She was never alone without a servant. She was not allowed to walk downstairs without someone holding her hand. At night she slept in a bed in her mother's room. She was allowed no friends. Even her half-sister, Feodora, twelve years her senior, was banished, married off to the minor German prince of Hohenlohe-Langenburg, where she lived in a freezing palace in a dull court. Lehzen, Victoria's governess, was appointed because she was German and knew no one of influence in England. Victoria was effectively a prisoner, with her mother acting as gaoler.

In 1830, George IV died and was succeeded by his brother, the Duke of Clarence, now William IV. The Duchess of Kent became paranoid about the new King, whom she suspected of plotting to cut her out and promote Victoria as his heir. Determined to ensure that she should be regent, the duchess kept her daughter away from court. She refused to allow Victoria to attend the coronation, and she enraged the new King by taking her round the country on

porphyria, but they are neither specific nor acute enough to make a convincing case for a diagnosis (Rohl et al., *Purple Secret*, pp.6-7, 117, 222-3).