Was Florence Nightingale at the Middlesex Hospital in 1854?
[excerted from 31 August 1854 (HU)]

My misadventure with Edward Cook.
I’ll begin with a cautionary tale about how I initially deviated from my normal research methodology and wasted a lot of time.

The misadventure began with an impulsive response to a reasonable thought. It occurred to me that my historical narrative should include descriptions of what was happening at the Middlesex Hospital, where many cholera victims were either carried or dragged themselves during the early days of the outbreak in St. James, Westminster. I had recently re-read two medical journal pieces by Alexander Stewart in which he described what happened at the Middlesex Hospital during the “Soho outbreak,” as he called it (the mind boggles at the variety of place-names for the same event). Then I vaguely recalled a biographer’s mention that Florence Nightingale had served as a caregiver at that hospital shortly before departing for the Crimea. Worth looking into, I said to myself. Nightingale’s experiences might permit me to add a perspective from the era prior to formal training of nurses.

These musings occurred as I was walking toward a parking garage on the Emory University campus. I didn’t have time that afternoon to retrace my steps to the main library and undertake a systematic literature search. My choice was to wait a few weeks for my next library trip and make a proper job of it, or (fatal error—the temporary measure I chose) to pop into the Health Sciences library close by the parking garage and check their holdings. The only scholarly work on Nightingale in that library was a biography by Sir Edward Cook (1913), longer in the tooth than the the one I had consulted while researching CC&SoM (Vinten-Johansen, et al. 2003), but frequently mentioned as a reliable work of scholarship. I located Middlesex Hospital in Sir Edward’s index, found the page, and read that in August 1854 Nightingale was vacationing at Lea Hurst, the family summer house in Devonshire.

Miss Nightingale cut short her holiday on hearing that an epidemic of cholera had broken out in London. She volunteered to give help with cholera patients in the Middlesex Hospital. She was up day and night receiving the women patients — chiefly, it seems, outcasts in the district of Soho — undressing them, and ministering to them. The epidemic, however, subsided, and she returned to her normal work in Harley Street (I:140).

Bingo! I copied the relevant pages with a hand scanner and headed home.
The next day I transferred the pages from Cook’s biography to my computer and considered my options. “Do nothing until you confirm Cook’s account in recent biographies,” whispered my empirical angel; “put Flo on the back burner until you make it back to a research library.”

“Nah,” countered my impatient angel. Don’t be such a brick and mortar Luddite; follow Cook’s leads with internet searches whilst the idea is fresh.” Point taken, there might be electronic versions of scholarly works on the internet.

It would be two weeks before I made another research trip, and although I knew that it would be much faster to pull more recent biographies of Nightingale off library shelves than Google my way to confirmation, impatience won out. I spent far too much time the next two weeks pondering my reactions to the paragraph in Cook’s biography and following premature or inchoate lines of research. For example, I checked to see if Nightingale had mentioned her experiences as a caregiver at the Middlesex in one of her letters. Nothing came up in Hugh Small’s online version of Sue Goldie’s calendar (short summations) of Nightingale correspondence.

But Cook had had unrestricted access to Nightingale’s papers when writing the biography, so I assumed he had come across something about her ministrations during a Soho cholera outbreak in August 1854. Cook’s time-frame didn’t jibe with the major outbreak for which the Broad Street pump turned out to be the culprit, but I nonetheless revisited a well-worn path through London medical journals for August and early September 1854, hoping to find something I had missed earlier that would substantiate Cook’s comments. The only suspect, an unlikely one at that, was a minor uptick in deaths among residents well to the west of Broad Street during the second half of August.

On the other hand, perhaps Cook had meant the big one that began Friday 1 September and simply gotten the date wrong. If so, how would Nightingale have learned about it in a rural part of Devonshire? I looked for telling articles or notices in the Times via an online data-base; the first report of a major cholera outbreak underway in Soho appeared on Monday 3 September. I checked railroad routes, connections, and timetables between London and Whatstandwell, the nearest railway station from Lea Hurst. The worst of the epidemic was over by Tuesday afternoon, so even if she took the train back to London on Monday and went straight away to the Middlesex Hospital, she would have still have missed the massive influx of cholera patients that appeared during the previous weekend. Cook’s account wasn’t panning out. We can all make mistakes, and perhaps I had stumbled upon one by Sir Edward Cook.

But mine was a mistake as needless as it was dumb. I know better than to engage in premature and stab-in-the-dark speculation like a spinning top, bouncing helter-skelter from one
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topic to another. I had permitted my fascination with the wondrous opportunities of online research to override a method I’ve used, and taught others, for many decades: 1, Formulate an historical problem that sets up a line of research; 2, undertake a focused review of primary and scholarly literature; 3, draft a preliminary thesis statement to guide me as I begin “writing up” the evidence selected from this literature; and 4, revise the thesis statement, if necessary, as my interpretation of the evidence evolves. Then repeat this process, over and over again, for each segment of the entire argument (see “The Research Essay” in Appendix A).

The next section demonstrates the first three steps in this method as applied to Nightingale’s potential involvement in the 1854 cholera outbreak in St. James, Westminster. Jump to the next section if you find my method at odds with what works quite well for you. There are many ways to do history.

1. Historical problem

Was Florence Nightingale at the Middlesex Hospital during the Broad Street cholera outbreak; if so, in what capacity?

2. Literature review

At my next research-library opportunity, I undertook a review of the available literature, guided by my two-part historical problem.

First I had to decide whether to begin by examining primary or secondary sources. Since eventually I would be looking at both, a blind search of Nightingale’s published works and correspondence seemed silly if other researchers had already found an answer that I could confirm later with a targeted search in primary sources. My historical problem was a narrow one, so it made sense to begin with secondary sources.

A catalogue search yielded nine titles that seemed to be interpretive studies of Nightingale. I pulled them all, found a free table in the stacks, organized the books in reverse order by publication date (most recent on top, Cook on the bottom), and set up my laptop computer and portable scanner. I decided to approach the topic from ignorance and allow the Secondary Way to inform me about the lay of this land and guide me to supporting primary sources — in short, I hoped for a clinching research-confirmation loop.

Ideally, scholarship builds on and corrects, as necessary, the work of our predecessors. I opened Mark Bostridge’s biography of Florence Nightingale (2008). A skim of the preface, table of contents, notes and bibliography suggested a comprehensive and balanced study. Chapter 8 dealt with Nightingale’s tenure as superintendent at the Establishment for Gentlewomen during Illness on Upper Harley Street, London, which I read quickly along with the relevant endnotes. Suggestion confirmed; this is a serious, scholarly study. Bostridge devoted one paragraph to her “temporary leave of absence from Upper Harley
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Street” as a volunteer at the Middlesex Hospital from 31 August until “the intensity of the epidemic receded” (199). I made electronic copies of chapter and endnotes, jotted down bibliographical information on the two sources he cited on her Middlesex Hospital sojourn, and then turned my attention to the other books I had pulled from the shelves.

I searched index and table of contents in every book for Middlesex Hospital, cholera, the Upper Harley Street institution for ailing gentle-women, and the years 1853-54. I scan-copied everything I found, even seemingly trivial or insignificant comments, on these subjects; and then preliminarily sorted my findings into four categories:

- No mention of Nightingale at the Middlesex Hospital — 3 (Cope 1958; Hobbs 1997; Small 1999).
- Documented evidence that Nightingale nursed patients at the Middlesex Hospital during the St. James/Soho cholera outbreak — 4 (Bostridge 2008, 199; Haldane 1931, 98; Huxley 1975, 53-55; Woodham-Smith 1950, 79-80). All four cited one or two letters by Elizabeth Cleghorn Gaskell from October 1854.
- Undocumented accounts that she was at the Middlesex Hospital during a London cholera epidemic — Cook (1913); Bishop & Goldie (1962).
- Some documented evidence that Nightingale was at the Middlesex Hospital, but she deliberately misled Mrs. Gaskell about what she did there — 1 (Smith 1982, 16-17).

All five secondary sources offering supporting documentation relied on Mrs. Gaskell’s letters; a quick search of the library catalogue identified re-prints in two scholarly collections. I then searched Florence Nightingale and identified five volumes containing selections from Nightingale’s works and letters during the time period that interested me. I checked them out to study at home.

Eventually I read and re-read everything I had found at the library and updated my chart with information gleaned from the five scholarly collections of Nightingale writings: three more “no mentions” (Harthill 1996; McDonald 2004; Vicinus & Nergaard 1990) for a total of six; and two more undocumented assertions that she was at the hospital nursing cholera victims (Bishop & Goldie 1962, 132; McDonald 2001, 27) for a total of four.

I decided that the half-dozen no-mentions among the secondary sources did not in themselves constitute grounds to answer my historical problem negatively. Two of the three were monographs on specialized subjects, and the third was a brief biography. The fact that none of these scholars chose to mention the 1854 London cholera epidemic did not seem decisive; it could simply mean that it wasn’t significant for their interpretations. Shifting to the Primary Way, I was disappointed that two collections of selected Nightingale letters made no reference to this epi-
demic or the Middlesex Hospital, but, as before, I could not expect these scholars to share my research interests when they made their selections. The absence of relevant keywords in the index of the volume on public health from Nightingale’s *Collected Works* was particularly perplexing since the editor had stated, without citation, in the introductory volume that she had “nursed patients at the Middlesex Hospital, notably ‘Soho outcasts’” (McDonald 2001, 27). Were the latter words Nightingale’s, and if so, where did they appear in the *Collected Works*? Were they the words of an editor who did not wish to seem politically incorrect? Or had the editor also taken Cook at his word, without the follow-up I was undertaking?

Since five “she-was-there” commentators cited Mrs. Gaskell, I shifted my attention to her letters. In October 1854, Elizabeth Gaskell’s first visit to Lea Hurst partially overlapped with the annual holiday to which Florence Nightingale was entitled as the Superintendent at the Establishment for Gentlewomen during Illness. Mrs. Gaskell wrote two letters during her stay that included extracts from descriptions Florence Nightingale ostensibly gave her parents, sister, and house guest about her experiences at the Middlesex Hospital. In the first, a letter started on Wednesday evening, 11 October 1854, Mrs. Gaskell wrote that Nightingale began her “superintendance” at the hospital on 31 August, that a flood of cholera patients from “the Soho district, Broad Street especially” overwhelmed her and the rest of the staff for the ensuing forty-eight hours, and suggests she remained at the hospital at least a week (Chapple & Pollard 1966, 305). In a second letter, Mrs. Gaskell elaborated on Nightingale’s “speeches” to the family about nursing prostitutes admitted with pronounced cholera symptoms to the Middlesex Hospital (Chapple & Shelston 2000, 115).

I then reviewed the use of these letters in the secondary sources I had consulted on Nightingale. Haldane (1931) appears to have been the first to print Mrs. Gaskell’s two letters nearly in full, including the descriptions of Nightingale at the Middlesex Hospital (93, 98), although O’Malley (1931) was close behind (207-08); either could have been the source for Woodham-Smith’s (1950) uncited snippets in her biography of Nightingale (79-80). It turns out that Cook (1913) was aware of the first letter Mrs. Gaskell wrote from Lea Hurst, and it was the likely basis for his undocumented assertion about Nightingale at the Middlesex Hospital; for he quoted other passages from this letter elsewhere in the biography. Bostridge (2008) based “the story of FN’s work at the Middlesex” on Mrs. Gaskell’s letters (583). He dismisses Smith’s contention that her version is flawed on the grounds that Nightingale’s sister, Parthenope, confirms it in an unpublished memoir, circa 1857 (583).

Whoops! This could be a she said, he said situation. Smith’s claim required closer scrutiny. Francis Smith’s (1982) thesis is that
Nightingale could not have "supervise[d] the admission of female cholera victims" at the Middlesex Hospital, as recorded by Elizabeth Gaskell "later in August while both were on holiday at . . . Lea Hurst"; this claim is the invention of a "titillating fabulist" (16-17). Smith selects a passage from Mrs. Gaskell’s letter of 27 October 1854, where she summarized Nightingale’s description of a constant stream of prostitutes suffering from cholera who “‘staggered off their beat’” to the hospital for treatment (16, citing Chapple and Pollard 1966, 318).

Smith (1982) then marshals evidence from relevant Admission Books in the hospital archives that disprove “this story” (16). First, Smith argues that Nightingale’s name is conspicuous by its absence from a report on how the hospital coped with an unexpected volume of cholera patients from late August through the third week of September, 1854. Second, none of the female patients named in the hospital’s Admissions Book were listed as prostitutes; according to Smith, Middlesex Hospital would not have jeopardized its reputation among its primary clientele — male patients, “mostly ‘respectable artisans’ from a neighbouring piano factory” — by admitting female prostitutes. Third, the first female admission with “‘undoubted [Asian] cholera’” did not occur until 5 September, well after the epidemic’s peak (presumably quoting from an Admission Book). In short, Mrs. Gaskell “story is not supported by the Middlesex Hospital archives” (16); the novelist was the unwitting source of an enduring fable that Florence Nightingale created for herself.

Francis Smith, however, is hoisted by his own petard. First, negative evidence from the records he consulted at the hospital archives only show that Nightingale was neither a regular staff member nor amongst those who responded to the hospital’s call for volunteers on 2 September. As to Smith’s second point, prostitution was not a registered vocation in Victorian England and it is unimaginable that any person admitting female patients to the Middlesex Hospital would have assigned such an appellation. Although this hospital did normally limit admissions to patients bearing a letter of recommendation from a subscriber, these were not normal times for any hospital whose catchment area included St. James, Westminster and St. Anne’s, Soho. In this instance, a simple newspaper-search would have shown that the General Board of Health issued a directive that all hospitals should admit anyone presenting symptoms of cholera and choleraic diarrhea during this horrific cholera outbreak. Third, Smith was misled by a hair-splitting nicety in contemporary medical terminology. There was much disagreement about the symptoms of Asiatic cholera. Whoever authored the report Smith cited had a different notion of what constituted “undoubted cholera” than Septimus Sibley, Middlesex Hospital registrar, who listed four or five females (depending on the gender of a waistcoat maker) dying from “cholera maligna” at the hospital on 1 and
2 September (UK, GRO 1854, 309). In short, Smith’s questionable evidence left me unconvinced that Nightingale was a “titilating fabulist” or that Mrs. Gaskell’s account is unreliable.

Had Sir Edward Cook inadvertently misled Smith, as he did me? Smith (1982) has high esteem for Nightingale’s early biographer; “he is accurate,” amongst a host of other accomplishments noted in the preface (xii). In essence, Smith considers every subsequent commentary on Nightingale, including his own, essentially derived from Cook. Smith follows Cook’s chronology, stating that Nightingale “moved” to the Middlesex Hospital in August 1854 and met Mrs. Gaskell “later in August” at the family’s summer house (16). By this reckoning, Nightingale would have been on holiday in Derbyshire, not at the Middlesex, when cholera burst forth in St. James, Westminster. Best I can tell, that’s why Smith thought the evidence he selected from hospital archives was so telling; they reveal Nightingale had been at the hospital in some undisclosed capacity but had left before this major outbreak.

Unlike Smith, I had found no reason why Cook’s chronology should trump Mrs. Gaskell’s. She wrote the letter Smith cites in October, shortly after arriving at Lea Hurst for a visit that only overlapped a few days with Nightingale’s “fortnightly” holiday that ended 10 October (Chapple & Pollard 1966, 305-07; Chapple and Shelston 2000, 115). That meant Nightingale could have been at the Middlesex Hospital during the height of the cholera outbreak and its aftermath in September. But I was still uncomfortable with Bostridge’s endorsement of Mrs. Gaskell’s account simply because it parallels what he found in a manuscript by Parthenope Nightingale. After all, Florence Nightingale’s sister seems to have been at Lea Hurst throughout September 1854, so whatever she wrote in her memoir about Flo’s doings in London then would have been second-hand knowledge, at best. It was time to see if the Primary Way could sort this matter.

I was aware of a document that Bostridge does not cite, written by someone closer to the action than either Mrs. Gaskell or Parthenope Nightingale, which could be used to assess the reliability of Mrs. Gaskell’s account. The Medical Times and Gazette of 7 October 1854 contained an article by Alexander P. Stewart, M.D., assistant physician to the Middlesex Hospital. Stewart had prepared a report with assistance from his colleagues containing “the complete statistics of the late fearful outbreak, so far as we have had to do with it” (364).

I compared a critical passage in Mrs. Gaskell’s letter to Catherine Winkworth with four passages from Dr. Stewart’s article on how the Middlesex Hospital coped with cholera victims coming from “the Soho district of St. James’s parish” during the first week of September (reproduced on the next page). Mrs. Gaskell took several evenings to write this letter. She states...
all the people who write about poor George Duckworth's death say that Cholera is not infectious i.e. does not pass from one person to another. Mr Sam Gaskell says so too; and last authority Miss Florence Nightingale, who went on the 31st of August to take superintendence of the Cholera patients in the Middlesex Hospital (where they were obliged to send out their usual patients to take in the patients brought every half hour from the Soho district, Broad St especially,) says that only two nurses had it, one of whom died, the other recovered; that none of the porters &c had it, she herself was up day & night from Friday\sep 1\afternoon to Sunday afternoon, receiving the poor prostitutes, as they came in, (they had it the worst, & were brought in from their 'beat' along Oxford St—all through that Friday night,) undressing them—& awfully filthy they were, & putting on turpentine stupes &c all herself to as many as she could manage—never had a touch even of diarrhea. She says moreover that one week the chances of recovery seemed as 1 to 10, but that since the chances of recovery are as 20 to 1.

Elizabeth Gaskell to Catherine Winkworth, Wednesday evening, 11 October 1854; Lea Hurst (Chapple and Pollard 1966, 305).

the Middlesex Hospital has been the receptacle of a very unusual number of the victims of the late epidemic in the Soho district of St. James's parish.

On the morning of Friday, the 1st inst., however, the numbers suddenly increased. Above a dozen were admitted in the course of a few hours; and, as it quickly became evident, from the fresh applications that came continually pouring in, that the demand for beds was only beginning, our first care was to discharge as many patients, both Surgical and Medical, as could with any propriety be sent home. Their places were soon filled by patients in all degrees of collapse, who were admitted, to the number of 57, before mid-day of Saturday, the 2nd instant, a very large proportion of these being, on admission, far beyond the reach of remedial skill. Such being the case, it is not wonderful, that of nearly 90 cases admitted during the fifty hours ending at one p.m., on Sunday, the 3rd of September, forty were at that hour already dead. That life, however, was prolonged for two, four, or six hours, in many even of the worst cases, by the warm bath, the mustard emetic, and the counter-irritants used in almost every case, does not admit of reasonable doubt.

The whole duties, therefore, overwhelming as they were, from the morning of the 1st till midday of the 2nd of September, fell to be and were discharged by the ordinary staff of the Hospital. To lessen this extraordinary pressure, which, if long continued, must have been attended with disastrous consequences, a large temporary addition was made as quickly as possible to the staff of attendants;

only two of the inmates have contracted the disease. One of these, after disregarding the premonitory symptoms, which were present for 12 hours before the fatal seizure, was allowed to pass into a state of hopeless collapse before advice was applied for. The other, who had had severe diarrhea for eleven days before she made any complaint, is now completely convalescent.

Alexander P. Stewart, "Cholera in the Middlesex Hospital" (1854a, 364-65).
that Nightingale went “on the 31st of August to take superintendance of the Cholera patients in the Middlesex Hospital,” that an unexpected influx of patients began arriving at the hospital the following day, that Nightingale took part in nursing them, and that she remained at the hospital long enough to see a reduction in virulence as the epidemic abated.

Mrs. Gaskell composed this passage on Wednesday, 11 October, the day after Nightingale had cut short her holiday and returned to London. The context leads me to think that she had heard Nightingale describe her experiences the previous week, that is, before Stewart’s article appeared. However, someone who wishes to compound Nightingale’s character flaws as a plagiarizing fabulist could claim that she cribbed from Stewart’s article if it could be shown that the 7 October issue of MTG had been sent to Lea Hurst prior to the account documented by Mrs. Gaskell. I have found no evidence to that effect.

There are sufficient parallels between Mrs. Gaskell’s account of Nightingale’s first week at the Middlesex Hospital and the selected passages from Stewart’s article to convince me that Nightingale must have worked at that hospital during the point-source cholera outbreak in St. James, Westminster. Both authors are discussing the same local outbreak: Mrs. Gaskell refers to “the Soho district, Broad St especially,” which lies within the parish of St. James, Westminster mentioned by Stewart. Only an “insider” in a position of some authority would have known (1) that no more than two nurses came down with cholera, one of whom died and the other survived; (2) that the hospital discharged non-critical patients on Friday 1 September to free up beds for the mass of new cholera patients who required admission; (3) that the rush began mid-day on Friday 1 September and continued for forty-eight hours; (4) that the therapeutic policy of this particular hospital called for the employment of counter-irritants such as stupes — cloths moistened in hot turpentine; and (5) that very few of the cholera patients admitted to a hospital ward the first week of the epidemic survived the disease. In short, I now felt comfortable in accepting Mrs. Gaskell’s account that Florence Nightingale had been at the Middlesex Hospital during this cholera outbreak. But in what capacity?

Mrs. Gaskell wrote that Nightingale was at the hospital as a superintendent of patients, which meant that her intended task was to manage workers involved in patient care. Stewart is explicit that “the ordinary staff of the Hospital” handled the unexpected influx of cholera patients that began late Friday morning, 1 September, and lasted for twenty-four hours, at which point they were so knackered that “a large temporary addition was made” for an unspecified period. Recall that Smith could not locate Nightingale’s name among those of regular staff members and volunteers listed in a report on the outbreak housed in the Middlesex Hospital Archives. Not surprising.
Nightingale was not on staff; she was superintendent of the Establishment for Gentlewomen during Illness on Upper Harley Street until mid-October 1854. She wasn’t a volunteer, either; Mrs. Gaskell is very explicit that Florence Nightingale arrived at the hospital on Thursday 31 August, and, according to Dr. Stewart, the hospital did not send out an appeal for volunteers until mid-day on 2 September. What could Nightingale have been doing at the hospital since 31 August that Dr. Stewart would have considered “ordinary”?

Nightingale’s experience at the Upper Harley Street establishment for ill gentlewomen only qualified her for two staff positions at a major London hospital: as the Matron, who managed domestic matters, and as a Sister, sometimes termed a Head Ward Nurse, who superintended salaried nurses. Domesticity had consumed so much of Nightingale’s time in her first year at the Upper Harley Street establishment that she had recently given its steering committee notice that she would soon depart. So it seems highly unlikely that she would have considered replacing the hospital Matron, even for a short period, and equally unlikely that the medical and surgical staff at Middlesex Hospital would have sanctioned such a temporary appointment without a formal interview process (which chatty Flo would surely have mentioned to someone in her family, and Bostridge duly noted).

Instead, I thought it very probable that Nightingale took the place of one of the regular ward Sisters who was scheduled for leave or a holiday in September, normally a slow period since the medical students were still on summer recess and the hospital deferred all but emergency surgeries until their return by the beginning of October. The Matron could make such an appointment on her own. Subbing for one of the regular Sisters at the hospital falls within Mrs. Gaskell’s description that Nightingale went there to superintend the care of patients. Nightingale’s experience as supervisor of salaried nurses for a year in what amounted to a small, private infirmary matches what the matron of a large metropolitan hospital would expect from a locum Head Ward Nurse.

Although I had already come up empty-handed during the literature review from a search of Nightingale’s *Collected Works* about being at the Middlesex Hospital during the 1854 cholera epidemic, I did find two suggestive summations by Sue Goldie (1983) in the “Calendar of the Letters of Florence Nightingale” (now available online, thanks to Hugh Small — URL in the bibliography for Goldie 1983; I searched for “Middlesex”). In 1859 Nightingale recommended the Middlesex Hospital as the best in London (FN to her mother, 20/3/59), and in 1862 she described it as a great London hospital (FN to Douglas Galton, 9/11/62). Were these recommendations just based on a previous on-site investigation, part of the survey of metropolitan hospitals she undertook in the winter and spring of 1854? Perhaps, but they
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could just as well reflect an intensive, personal experience during the 1854 cholera epidemic, as described to her family in Mrs. Gaskell’s presence.

3. Preliminary thesis statement

Florence Nightingale was probably substituting for one of the regular head ward nurses at the Middlesex Hospital when the Soho cholera outbreak began, and she remained in that role until the outbreak was essentially over.

I employ a preliminary thesis as the starting point for writing narratives and a lodestone for choosing lines of research required to answer questions that emerge as I write. The assumption is that the preliminary thesis will surely be tweaked, possibly discarded, depending on what happens as I write and research. If I end up with something satisfactory, I revise the thesis statement to reflect the argument imbedded in the narrative.