



His Last Bow

Adventure XLVI – The Adventure of the Dying Detective

Mrs. Hudson was distraught. Sherlock Holmes was dying, she told Watson. Three days earlier he had taken to his bed and had eaten nothing, drunk nothing, since that time. He was wasting away, she said, and it was possible that Watson might find him dead by the time he could get to Baker Street.

Watson hurried to Holmes' bedside, of course — or at least as close to his bedside as Holmes would permit. Holmes told Watson that the problem was caused by a deadly disease, contagious by touch and invariably fatal, that he had contracted while pursuing an investigation among coolie laborers in London's riverside dock area. When Holmes finally relented to Watson's insistence that expert medical advice be sought, he sent the good Doctor to fetch, not one of the specialists Watson recommended, but rather an obscure Sumatran planter named Culverton Smith.

He explained to Watson that Smith was personally familiar with this particular disease, and had researched it, thereby gaining the knowledge needed to reverse the course of the illness.

Good old Watson! Dissimulation was not among his many attributes, and so on occasion, Holmes saw fit to deceive him, lest his honesty bring all Holmes' efforts to naught. This is not the first case in which we see such deception; there was the long interval between FINA and EMPT when Holmes made sure that Watson thought him to be dead lest a kind impulse might cause Holmes' escape from Reichenbach to become known. There was HOUN, in which Holmes preferred that Watson thought of him as



being in London, and there is DYIN. “At four yards I could deceive you,” said Holmes. Whether there were four yards of free space in Holmes’ bedroom is a matter for conjecture, however.

Watson writes of Holmes’ “incredible untidiness,” which doubtless was a continuing trial to Mrs. Hudson. Yet I wonder what efforts she made to clean up after him? Picture her dilemma: A lodger who often remains in his rooms for days, sometimes weeks, on end, and who is prone to taking umbrage if disturbed for so menial a reason as housecleaning. If she deferred her tidying up until those times when Holmes was away from his quarters, she never knew at what moment he might return and demand a meal, or to be left alone. And how was the poor woman to know what to straighten up and what to let alone? Small wonder we seldom hear of Mrs. Hudson’s presence in 221B save to announce a visitor or to serve meals.

Remember that Watson was not a small person. “Middle size, strongly built” was how he was described in CHAS. Would there really be room for him behind the head of Holmes’ bed? Wouldn’t that have resulted in a rather peculiar placement of the bed in the room, thus arousing Smith’s suspicions? Smith might already have been a bit suspicious because Watson declined to accompany him from Lower Burke Street back to Baker Street, on the grounds that he “had another appointment.” Despite a desperately ill patient, he “had another appointment?”

There is no indication in the story that Smith’s nephew, Victor Savage, had been in circumstances where he might have contracted the lethal disease without “assistance.” No doubt Smith used some device, perhaps the same ivory box he sent to Holmes, to infect Savage. But shouldn’t the circumstances of Savage’s death have raised some suspicions among the authorities in light of the facts that (1) Smith stood to gain financially from Savage’s death, and (2) Savage died of a very rare – indeed, practically unknown — disease not seen before in London, but known to be epidemic in the part of the world from which Smith hailed?

When Inspector Morton arrested Culverton Smith, there was this sequence of sounds Watson heard from his sequestered position behind the bed: A rush; a scuffle; a clash of iron; a cry of pain; and then the click of handcuffs. What was the clash of iron?

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