

‘We have not lost faith, but we have transferred it from God to the medical profession’: Medicine in Mainstream Literature – Part I

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Our previous reviews have inspected the intersection of literature and medicine. This essay will detail some specific and important medical characters in mainstream literature, expanding on the title of this essay: ‘[w]e have not lost faith, but we have transferred it from God to the medical profession’,¹ as well as a reading of a textbook that specifically details the topic.

This is, perforce, a superficial appraisal as the material has been extensively and broadly reviewed in journals such as *Literature and Medicine* and *Medical Humanities* which are devoted to exploring interfaces between literary and medical knowledge. Some excellent books have also focused on this topic, such as Norman Cousins’s *The Physician in Literature* (1982),² and we will now review this text in some detail.

Norman Cousins’s *The Physician in Literature* (1982) illustrates the myriad ways in which doctors are portrayed in mainstream classics. This anthology contains short stories, essays, poems and excerpts that highlight doctors and medicine in classical literature. Literary selections are organised into self-explanatory categories which include Research and Serendipity, The Role of the Physician, Gods and Demons, Quacks and Clowns, Clinical Descriptions in Literature, Doctors and Students, The Practice, Women and Healing, Madness, Dying, The Patient, and An Enduring Tradition.

Cousins’ introduction calls for an interesting argument in that doctors are trained to utilise the scientific method of inductive reasoning, appreciating errors and performing self-corrections. This allows practitioners to remain updated in medical advances. However,

the art of the actual practice of medicine remains unchanged. Writers, on the other hand, deal with absolute and immutable human values that defy and transcend change. Cousins, for example, comments on Pasternak’s *Dr. Zhivago* (1958),³ which demonstrates that a doctor’s skill ‘depends as much on his knowledge of life as it does on his knowledge of disease’.²

Han Zinsser’s autobiography *As I Remember Him* (1970) is frequently mentioned throughout.⁴ Zinsser was a microbiologist who made major contributions to bacteriology and public health. He also strove to understand the meaning of life and to act as a liaison between medicine and the general public, in true interdisciplinary fashion.

The pathos of life and disease, both in literature and in authors’ lives, is repeatedly highlighted in this anthology of essays. The successive chapters frequently deal with negative portrayals of doctors and medicine in mainstream literature, and while not stated explicitly, doctors are often viewed in one of two ways: ineffective quacks or rogues, often tinged with arrogance and conceit and a specific example will be cited.

George Bernard Shaw’s *The Doctor’s Dilemma* (1906) depicts an obvious medical choice that is inextricably woven with, and complicated by an ethical quandary. Moreover, the play places the entire Edwardian medical establishment on stage, and depicts a surgeon who invents a useless operation on a nonexistent organ, the removal of the ‘nuciform sac’. The thesis of the play was revolutionary for its time as it posed the hitherto almost never voiced possibility that doctors may feel that they need to perform unnecessary operations in order to

earn their livelihood. The play was aimed to parody Sir William Arbuthnot-Lane, 1st Baronet, who was a Scottish surgeon, and separates doctors into two types, the arrogant and conservative diehards who practice the venerable art of medicine, and the humane, modern scientific practitioners.⁵ Shaw was greatly influenced by two doctor friends, and he criticised some doctors for being poor and ignorant, conceited and often only availing themselves of obsolete and spurious knowledge, lambasting surgeons who commence operating without even an hour of practice. He also condemned doctors who behave like mechanics, treating diseases with no care as to their cause. He argued that doctors should behave like biologists, with fundamental knowledge that permits the treatment of cause and not just effect. It is also worth noting at this point that this play may also have been poking fun at Dr. Isaac Baker Brown who advocated and performed clitoridectomy (surgical excision of the clitoris) at his London Surgical Home in the 1860s.⁶ The evil physician features not only in mainstream literature, but occasionally also in science fiction, and only one example will be given here, the classic *Caduceus Wild* (1959) by Moore⁷ wherein doctors are not witnessed in their medical capacities but as world oppressors and outright tyrants in the trope of *Big Brother*.

Medical students are also susceptible to this brand of arrogance, and *Arrowsmith* (1925), a novel by Sinclair Lewis, is used as a typical example.⁸ Indeed, in a later chapter, Oliver Wendell Holmes’s valedictory address to the graduating class of Bellevue Hospital, *The Young Practitioner* (1871) is mentioned. This cautions the new doctors that their knowledge will soon be forgotten if unused, and that the



possibility of new acquisitions of knowledge should never be outgrown, among other practical advice.⁹

The next section will cite some specific examples of doctors and medicine in literature, including Pangloss, Caius, Hyde, Manette then finally focussing Lydgate.

An example of a semi-medical individual is Pangloss, a character in Voltaire's novel *Candide* (1759) who is described as an individual with a vast breadth and depth of lore, including medical knowledge. Throughout the play, he has few personality traits and these do not evolve. Pangloss contracts syphilis, becoming weakened and deformed, and is unable to obtain a cure as he has no money. When a benefactor finally materialises, a cure is obtained, albeit with the further loss of an ear and an eye. Pangloss stoically rationalises syphilis, stating that it was necessary for this disease to be brought back by Columbus and his men from America along with other New World wonders such as chocolate.¹⁰

Medicine in literature also reflects the practices of the times. For example, William Shakespeare's era was an exceptionally chaotic period for medicine in England, laced with quacks and empirics who practiced unsafely. Shakespeare himself was influenced by medical practice and was

[a]n astute observer and an insatiable reader of the many books in print. Some of these were the works of old masters—Hippocrates' *Aphorismi and Prognostica*, Galen's *De usu partium*, and Celsus' *De Medicina*. Other, more 'modern' works included Vesalius' *De Humani Corporis Fabrica*, Pare's *Apologie and Treatise*, Vicary's *A Profitable Treatise of the Anatomie of Mans Body*, Caius' *Boke or Counsell*

against the Disease called the Sweate, Boorde's *The Breuiary of Helthe*, Bullein's *Bulwark of Defence against all Sicknes, Sores and Woundes*, and Bright's *A Treatise of Melancholie*.¹⁰

Furthermore, in the late 1500s, Shakespeare lived close to the infamous psychiatric hospital of St. Mary of Bethlehem (Bedlam). He later moved to Cripplegate, close to the Barber-Surgeons' Hall, where three annual public demonstrations in anatomy were regular attractions. Moreover, Shakespeare's eldest daughter married John Hall, a Cambridge graduate in Arts with medical training. Unsurprisingly, virtually all of the common diseases in Shakespeare's time are mentioned in his plays along with perceived aetiologies that were attributed to various imbalances of the four bodily humours ie sanguine, choleric, melancholic and phlegmatic. Interestingly, the later plays also reflect the then diminishing importance of the classical views of Galen due to the ascendancy of the new masters of medicine, such as Vesalius. Specifically, in this period, the correct treatment of wounds was crucial and life-saving, and the Galenic theory mandated the wound formation of 'laudable pus'. For this reason, wounds were packed and dressed with greasy, irritating and therefore highly infective unguents, a potentially fatal practice maintained until the Listerian era.

Surgeons are frequently sought in Shakespeare's plays in order to treat wounds and while the speciality of orthopaedics had not yet been introduced, Shakespeare was fully aware of its importance, with attendant deformities, fractures and dislocations,

usually the result of violence: domestic, criminal, civil or war. The importance of syphilis is also stressed, along with its debilitating effects on the central nervous system and on joints and bones.

Shakespeare's profound grasp of disease and its contemporary treatment was first chronicled by Dr. Charles Bucknill in *The Medical Knowledge of Shakespeare* (1860).¹¹ However, it should be noted that in these plays, disease is almost invariably a metaphor, a representation of moral weakness in an individual, professional or in a society. It was thus that well into the 18th century, doctors were frequently (and often correctly) deemed quacks and impostors, beneficiaries of the suffering of others. S

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