

“Doctor, Doctor – Medics in Movies and

Without a doubt the 20th century will be remembered for the birth of cinema and television. They played an important role in shaping our lives and cultures due to their growing popularity and now easy accessibility forever instilling in us a passion for screen entertainment.

by Justin Camilleri

Over the years countless stories told by celluloid images, projected onto the big screen and television, has led audiences to build perceptions on different fields e.g.: music, sport, commerce, politics and science.

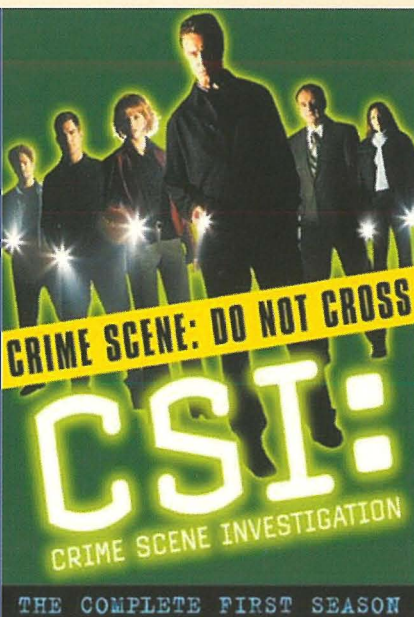
The Medical Profession is no exception, from the 1930s till now doctors have been portrayed in films and TV series, very often influencing the public's perception, inspiring a lot of young students to become doctors and most importantly having a tremendous effect on doctor – patient relationships.

From the humble Dr Watson (*Sherlock Holmes*) to *Star Trek's* Dr 'Bones' McCoy, from William Hurt in *The Doctor* to TV's hit series' *ER*, *C.S.I* and *House*, doctors can be found in any film and television programme.

Maybe its time that these films and television programmes are added to the medical school curriculum, providing a comprehensive sociological reflection on the way medics are portrayed in the Media and their place in society?

Doctors and medical students may be pleased to know that according to Glenn Flores' research paper *Doctors in the Movies*, where he reviewed 131 doctor films excluding television, from nine countries, spanning eight decades, the medical specialisation favoured by doctors is surgery (33%), psychiatry, (26%) family or general practice (18%) whilst paediatrics accounts for only 2%.

Despite Glenn Flores' extensive research on the medical specialisation favoured by television producers for doctor's onscreen, one should hope that doctors and medical students are intelligent enough to decipher the fact that producers give prominence to surgery only because it is more dramatic and glamorous onscreen e.g. *ER* and *Nip/Tuck*. The fact is, any person going into health care whether they want to become a surgeon, a general practitioner, a specialist, nurse or midwife, they all



hold equal importance in the real medical profession and rightly so.

Over the years cinematic portrayals of doctors have been mixed; a positive and negative presentation of medics onscreen has appeared in every decade. For every fictitious Mad doctor (*The Cabinet of Dr Caligari*) or scientist (*Dr Frankenstein*) the 1930's gave us very positive insights in the medical profession, with the classic memorable *Arrowsmith* (1932) and *The Citadel* (1938).

Arrowsmith is based on the Pulitzer Prize winning novel written by American author Sinclair Lewis. Nominated for four Academy Awards and directed by the influential John Ford (*The Searchers*), the film is set during the 1920s depression era. It chronicles the life of Dr. Martin Arrowsmith (*Ronald Colman*) as he makes his way through medical school, marries and considers the lure of high-paying industrial research taking a post within a research institute. The young medical researcher's job takes him to a Caribbean island, where he must prevent a plague while prioritising who has the right to take the vaccine. This film was considered

avant garde for the time in which it was released, as it explores a doctor's internal conflicts between choosing to help patients or career status rewards.

Despite *Arrowsmith* being a story on a lone doctor's pursuit against a death plague, it is a social commentary on the state and prospects of medicine in the United States in the 1920s depression era.

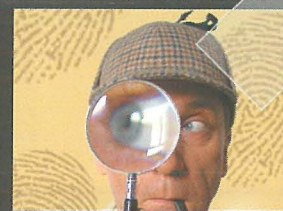
Based on the Novel by Scottish author Archibald Joseph Cronin and directed by King Vidor *The Citadel* takes place in England where a young, idealistic Dr. Manson (*Robert Donat*) becomes disillusioned after practicing in a Welsh mining town. Manson is then influenced by a friend to make a lucrative practice from rich hypochondriacs, where he finally realises what the truth of being a doctor really is.

Show me the Money!!!

Both *Arrowsmith* and *The Citadel* portrayals of doctor's onscreen are a fine example of humanity and compassion that bring out the best in doctors. One may beg to differ, according to Glenn Flores' research paper *Doctors in the Movies*: "Materialism and a love of money have pervaded cinematic portrayals of doctors dating back to the 1920s and continue to be prominent in recent movies."¹

This maybe shocking to many, but Flores substantiates his claim of cinematic doctor's materialistic approaches, by citing various film anecdotes, that funnily enough all give common reference to Harley Street in London, which is synonymous with private medical care in the United Kingdom. For example in *Doctor at Sea* (1956), Dr Simon Sparrow played by Dirk Bogarde states: "A Roll Royce is the ambition of almost every newly qualified doctor and preferably a Harley Street Address to go with it."¹ In *Carry on Again Doctor* (1969), Dr Jim Nookey (Kenneth Williams) confides to a colleague: "Specialise, that's what I'd like to do! The whole Harley Street bit with bags of lovely filthy rich women patients."¹

Where are thou?" and Television – Part I



Another example is in *Doctor at Large* (1957), where the doctor in charge of a Harley Street practice gives advice to a fellow colleague: "You know, it's a chastening thought, but good clothes are more important to a GP than a good stethoscope."¹

Flores in his debate goes to the point to even mention cinematic American slang anecdotes taken from *Not as a Stranger* (1955), where 1950's American Medical Students discuss their career options:

"Personally, I'm for surgery. I just got a look at Dr Dietrich's car. You know what he drives? A Bentley. \$17,000 bucks."

"That guy doesn't take out a splinter for less than £1,000."

"I'll still take ear, nose, and throat. The common cold is still the doctor's best friend."

"Call it a virus. You make more dough that way."

"Look, if you kiddies are all through, your old man here will really wise you up. It's not what you practice, its where."

"What do you mean?"

"I've done a little research on this problem. The average doctor's income is 11 Gs. In the Southwest, west and more...."

"Pebble Beach, Colorado Springs, Beverly Hills, that's where the rich are cracking up fast."¹

The Swinging Sixties

The 60's were catalyst to bringing doctors to the masses through the medium of television. Viewers were introduced to the charming, benevolent, morale *Dr Kildare* (1961) played by Richard Chamberlain. This was the pioneering medical television drama that started it all! Kildare told the story of a young intern, Dr. James Kildare (Chamberlain), working in a fictional large metropolitan hospital (Blair General), who dealt with patient's problems, and wins the respect of his mentor, Dr. Leonard Gillespie (Raymond Massey).

The series became part of popular culture including Malta and was largely responsible for making Chamberlain, who beat out 35 other actors for the role, a teen poster boy idol of the 1960s.

In fact, it is said that so many students wanted to become doctors in order to emulate Chamberlain. While young male doctors wanted to mimic Chamberlain and female medics were being wooed by his charms, out of nowhere came in British slapstick comedy, that proved it was ok to laugh a little at the seriousness of doctor's prescriptions.

One of the faces of British slapstick comedy namely, Peter Sellers humorously gave us the realities of medical multiculturalism, in *The Millionaires* and exposed how doctors can also have tantrums in *What's new Pussycat?*

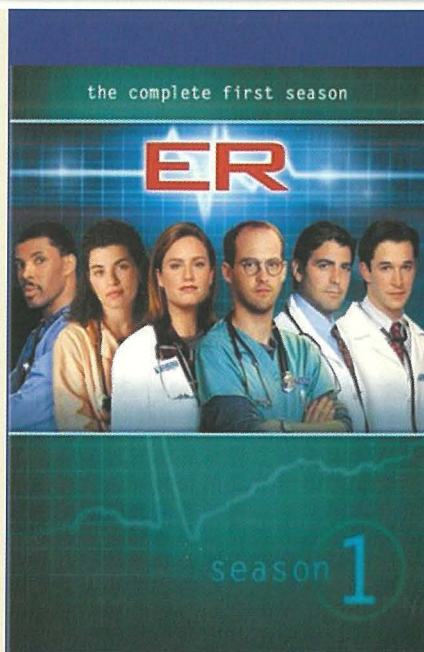
The Millionaires introduced us to the first cinematic Asian medic, in the form of Indian doctor Dr. Ahmed el Kabir played by Sellers. Co – Starring Sophia Loren the plot centres on the world's richest woman who falls in love with a humble, Indian physician. Despite her advances he ignores her flirtations, leading to hilarious consequences for both.

Despite the fact that nowadays *The Millionaires* may be criticised for not being "politically correct", the message behind Sellers comical one-liner: "Goodness Gracious Me" is relevant till this day that despite the post WWII setup of a multicultural Britain, there is still a lot to be done.

Sellers followed his Indian medic persona with another comical take on the medical profession in *What's New Pussycat?* This time, an engaged womaniser (Peter O'Toole) seeks aid of a psychiatrist who has extra – marital problems of his own.

Satire was the order of the day, with the "Carry On!" series injecting sardonic farce, parody and humour in the medical profession. Even by today's standards the Carry On! scripts found in *Carry On Doctor*, *Carry On Again Doctor* and *Carry On Matron* are still considered a healthy dose of laughing medicine for audiences. Without a doubt they ingeniously managed to bring to the fore countless real-life hospital problems in the British National Health Service, that were never discussed or regarded simply as taboo.

Many thought that the hospital



comical setting was over once the "Carry On!" team dissolved in 1978, little did anyone know that it would be mimicked yet again in 1983's *Monty Python's The Meaning of Life* and revived on the UK Channel 4's sketch comedy show *Green Wing*.

The sixties will be infinitely remembered as the era in which one doctor went boldly where no man has gone before....

Fans of the medical genre were left in awe, as we were introduced to a new breed of doctor namely, Dr. Leonard "Bones" McCoy, the Chief Medical Officer aboard the U.S.S star ship, *The Enterprise*, in the hit science fiction TV series, *Star Trek*.

Star Trek's Dr "Bones" McCoy would present a captivating vision of what medicine might one day achieve. Four decades later patients in hospitals now rest on tables similar to the *Enterprise's* sickbay bed, while an automated computer scanner delivers diagnostic images of the bodies' interior.

Back in the 1960's, imaging techniques could only outline basic internal anatomy example: detecting a broken bone, nowadays technology has advanced so much that it can also detect tissues with an abnormal concentration of blood vessels or a faster metabolic system.⁴

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TheSynapse

TheSynapse

NSAIDs and cardiovascular events – frequently asked questions

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The study showed that high doses of non-selective NSAIDs, such as ibuprofen, were associated with a similar increase in the risk of vascular events to COX-2 inhibitors. This meta-analysis included data from 138 trials among 145,373 patients, providing a much more reliable estimate of the cardiovascular risk of these drugs, as individual trials were too small to study this question.

The production of this paper by such a well recognised group will carry much influence within the clinical community. Therefore, this paper is likely to influence healthcare recommendation and prescribing patterns.

What does the data mean for healthcare professionals?

Combined with the vast amount of previously published material linking NSAIDs with increased cardiovascular risk, the Kearney paper reinforces the need for a rational approach to the recommending and prescribing of analgesics. These data show that those with CHF, a history of hypertension, those being treated for hypertension and the elderly are at particular risk of NSAID-related CVD events. This information is likely lead to recommendations on which analgesics should be recommended for certain patient types. Indeed, as summarised in the table below, experts are already starting to release such recommendations into the medical press. ☐

References

1. FDA issues public health advisory on Vioxx as its manufacturer voluntarily withdraws the product. FDA News. Released September 30 2004. Accessed on: June 02 06.

2. Juni P, Nartey L, Reichenbach S, Sterchi R, Dieppe PA, Egger M. Risk of cardiovascular events and rofecoxib: cumulative meta-analysis. *Lancet* 2004;364(9450):2021-9.

3. Solomon SD, McMurray JJ, Pfeffer MA, Wittes J, Fowler R, Finn P, et al. Cardiovascular risk associated with celecoxib in a clinical trial for colorectal adenoma prevention. *N Engl J Med* 2005;352(11):1071-80.

4. Hippisley-Cox J, Coupland C. Risk of myocardial infarction in patients taking cyclo-oxygenase-2 inhibitors or conventional non-steroidal anti-inflammatory drugs: population based nested case-control analysis. *BMJ* 2005;330(7504):1366.

5. Simmons DL, Botting RM, Hla T. Cyclooxygenase isozymes: the biology of prostaglandin synthesis and inhibition. *Pharmacol Rev* 2004;56(3):387-437.

6. Page J, Henry D. Consumption of NSAIDs and the development of congestive heart failure in elderly patients: an underrecognized public health problem. *Arch Intern Med* 2000;160(6):777-84.

7. Huerta C, Varas-Lorenzo C, Castellsague J, Garcia Rodriguez LA. Nonsteroidal anti-inflammatory drugs and risk of first hospital admission for heart failure in the general population. *Heart* 2006.

8. Merlo J, Broms K, Lindblad U, Bjorck-Linne A, Liedholm H, Ostergren PO, et al. Association of outpatient utilisation of non-steroidal anti-inflammatory drugs and hospitalised heart failure in the entire Swedish population. *Eur J Clin Pharmacol* 2001;57(1):71-5.

9. Heerdink ER, Leufkens HG, Herings RM, Ottervanger JP, Stricker BH, Bakker A. NSAIDs associated with increased risk of congestive heart failure in elderly patients

taking diuretics. *Arch Intern Med* 1998;158(10):1108-12.

10. Kearney PM, Baigent C, Godwin J, Halls H, Emberson JR, Patrono C. Do selective cyclo-oxygenase-2 inhibitors and traditional non-steroidal anti-inflammatory drugs increase the risk of atherothrombosis? Meta-analysis of randomised trials. *BMJ* 2006;332:1302-1308.

11. Gaziano JM, Gibson CM. Potential for drug-drug interactions in patients taking analgesics for mild-to-moderate pain and low-dose aspirin for cardioprotection. *Am J Cardiol* 2006;97(9A):23-9.

12. Whelton A. Clinical implications of nonopioid analgesia for relief of mild-to-moderate pain in patients with or at risk for cardiovascular disease. *Am J Cardiol* 2006;97(9A):3-9.

13. Pope JE, Anderson JJ, Felson DT. A meta-analysis of the effects of nonsteroidal anti-inflammatory drugs on blood pressure. *Arch Intern Med* 1993;153(4):477-84.

14. Johnson AG, Simons LA, Simons J, Friedlander Y, McCallum J. Non-steroidal anti-inflammatory drugs and hypertension in the elderly: a community-based cross-sectional study. *Br J Clin Pharmacol* 1993;35(5):455-9.

15. Kurth T, Glynn RJ, Walker AM, Chan KA, Buring JE, Hennekens CH, et al. Inhibition of clinical benefits of aspirin on first myocardial infarction by nonsteroidal anti-inflammatory drugs. *Circulation* 2003;108(10):1191-5.

16. MacDonald TM, Wei L. Effect of ibuprofen on cardioprotective effect of aspirin. *Lancet* 2003;361(9357):573-4.

17. Gaziano JM. Nonnarcotic Analgesics and Hypertension. *Am J Cardiol* 2006;97(9S1):10-1

18. Hillis WS. Areas of emerging interest in analgesia: cardiovascular complications. *Am J Ther* 2002;9(3):259-69.

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Today we have scanning technologies such as ultrasounds, CAT scans and PET scans that give out three dimensional images of bodily organs, to give a fully diagnostic picture. However according to Dr. Sanjiv Sam Gambhir we still don't have anything like the universal scanning device that allowed Dr “Bones” McCoy to diagnose practically anything in seconds.¹

The medicine presented in *Star Trek* was so much ahead of its time, that even though today's scanning technologies have improved so much and so drastically, they still have a long way to go to emulate anything that is hailed as science fiction. ☐

References

1. Doctors in the Movies c/o the BMJ Journal Archives of Diseases in Childhood. Available from: <http://adc.bmjournals.com/cgi/reprint/89/12/1084>

2. Arrowsmith (novel) by Sinclair Lewis. Available from: http://en.wikipedia.org/wiki/arrowsmith_%28book%29

3. The Citadel (film). Available from: http://en.wikipedia.org/wiki/the_citadel_%28film%29

4. Trek Tech: Medical Technology is boldly going where Star Trek has gone before. Available from: <http://www.sfgate.com/cgi-bin/article.cgi?file=/chronicle/archive/2004/03/15/BUGLV5J6GT1.DTL&type=business>

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