

## AS OTHERS SEE US\*

J. A. CURRIE, M.S. (LOND.), F.R.C.S. (ENG.)

*President, Cape Western Branch, Medical Association of South Africa, 1957*

In our leisure hours most of us read novels and some of us read plays; and it may be entertaining for a while to see ourselves as others see us, and recall some of the things said about doctors by novelists and playwrights.

Doctors, like priests and naval officers, belong to a specialized and dedicated profession. Willy-nilly, we are cast in a mould, and inevitably view the layman's opinions with a critical and sometimes prejudiced eye. The sailor, seeing a sea-picture, may have his seamanly sense offended by some technical error. We, too, tend to demand a high standard of medical knowledge from those who write about doctors. In this we sometimes err, for the artist presents a picture of the profession which most patients would readily recognize.

Laymen are frequently infuriated by what they call the 'orthodoxy' of the profession. It is possible that many of us lack self-criticism and are too prone to accept current teaching as permanent truth. Some of our critics seize on this conservatism and exaggerate it.

I suppose that most of us have seen the film of the 'The Robe'. When I was at No. 5 General Hospital in Cairo, all the medical officers read the book. Its message is religious; the narrative is fluent and compelling; and it seems to be the fruit of a good deal of historical research. I should like to quote one incident, towards the end of the book, when the Christian slave Demetrius is brought desperately wounded to the house of his master. His life is despaired of. A physician, Sarpedon, is called in, applies hot fomentations and gives a bad prognosis. Finally, St. Peter, who is in Rome at the time, sees the patient, is closeted with him in prayer, and leaves him on the road to recovery. Sarpedon's fury knows no bounds, and he threatens to expose to the authorities this trifling with Christian seditionists. His real fury is due to his replacement and to the irregular nature of the cure. He is sharply rebuked by Tribune Marcellus. 'You and your Hippocratic oath! You are supposed to be interested in healing! Has it come to pass that your profession is so jealous and wretched of heart that it is enraged when a man's life is restored by some other means than your futile remedies?' Is this really a Roman tribune speaking, or is it the twentieth-century author? I suspect that it is both.

If we now take a forward leap of several centuries and visit the sick-bed of Richard Coeur-de-Lion, dangerously ill, we find a Crusaders' camp whose regular doctors are Jews practising the medicine of the time. The king's faithful right-hand man decides to call in a Moorish physician, el Hakim Adonbec. Misgivings are allayed by trying the new treatment on the dog, in the person of a humble squire, who justifies the experiment by his recovery. The Moor feels the king's pulse. The king, who knows a thing or two, feels the Moor's and announces his satisfaction with the words, 'His blood beats calm as an infant's. So throbs not theirs who poison princes'. El Hakim gives the king an elixir made by dipping a silken bag into a silver goblet containing fluid. This pharmacological tea-drinking throws the patient into a sleep of several hours, from which he is awakened cured, by having an aromatic sponge thrust under his nose.

In this story, which is from 'The Talisman', by Sir Walter Scott, we are shown a healer whose ethical standards are austere and rigid. He will not discuss the case in the sick-chamber. He refuses to protect himself by consultation with Christian bishop or Jewish doctor, although the penalty of failure is a violent death. And finally he disdains the king's offer to empty his coffers with the words, 'The medicine would lose its effect, did I exchange it for gold or diamonds'—a reason for *pro deo* treatment not commonly accepted today.

William Shakespeare took his plots from many sources, and I cannot recall any specific preoccupation with doctors, but he has given us some wonderful clinical descriptions. His lines about Juliet's trance are irresistible, although I must confess that it was Friar Laurence and not a doctor who administered the drug.

'Take thou this vial, being then in bed  
And this distilled liquor drink thou off;  
When presently through all thy veins shall run  
A cold and drowsy humour, for no pulse  
Shall keep his native progress but surcease;  
No warmth, no breath, shall testify thou liv'st,  
The roses in thy lips and cheeks shall fade  
To paly ashes; thy eyes' windows fall  
Like death when he shuts up the day of life;  
Each part deprived of supple government  
Shall, stiff and stark and cold, appear like death;  
And in this borrowed likeness of shrunk death  
Thou shalt continue two-and-forty hours  
And then awake as from a pleasant sleep.'

—A horrifying picture of a death on the table narrowly averted. But what would an anaesthetist not give to be able to master so accurate a dosage?

We do, in the end, get our doctor. Romeo, believing Juliet to be dead, persuades a miserably poor apothecary to flout the Dangerous Drugs Act of that age and sell him a scheduled poison:

'Noting this penury, to myself I said  
An if a man did need a poison now,  
Whose sale is present death in Mantua  
Here is a caitiff wretch would sell it him.'

'My poverty, but not my will consents' says the Apothecary, and promptly sells him the poison. Romeo pays him with the half-contemptuous phrase 'I pay thy poverty and not thy will'—but here, I fear we are approaching perilously near to the subject of Medical Economics.

Shakespeare conducted no vendetta against doctors, but Molière did. He did not like them at all; and, if the samples of our profession found in his plays truly reflected the state of affairs at the time, I do not blame him. Grave portentousness, fake latinity, and a doctor's hat and gown, ensured the acceptance of a most undistinguished imposter in 'Médécine Malgré Lui', and, indeed it looks as if the author saw little difference between the real doctors and this doctor-for-a-day. The fun in 'Le Malade Imaginaire' is fast and furious, with a posse of doctors battering upon a hypochondriac so devoted to pills, potions, colonic irrigations, general cosettings and useless multiple treatments that he actually plans to marry his daughter to the newly-qualified son of his physician, so as to have a doctor in the family. The refreshing good sense of the brother, Béralde, probably reflects the views of Molière himself. When ill, he says, do nothing. Nature will probably cure you. Doctors can discuss the disease in Latin, name it in Greek, and debate its site and nature for hours, but they cannot cure it. Most patients, in fact, die of their remedies and not of their disease.

This revolt against a system has probably its parallel today. A correspondent in the B.M.J., not long ago, described a new but prevalent disease—'pseudo-scientific meticulosis'. He particularly objected to a certain type of graph, to which he referred as 'those damned dots'. He overstated his case but it must be admitted that we are sometimes so overwhelmed with laboratory data that only the most perceptive can see the wood for the trees.

I once contributed to the *Waste Paper Basket* of the Owl Club, and I called my paper 'Quack! Quack! or one Quack to another'. I made merry for my allotted time with all the queer pseudo-medical cults I could remember and rather rashly tried to draw conclusions. The successful charlatan, according to these conclusions, owed his success to four things; unbounded confidence, ignorance of medical truths, unfamiliarity with statistical methods, and the natural tendency to spontaneous recovery of almost all ordinary diseases. I think I was rash, for the first and last of these help the doctors as much as they help the quacks, and the statistical method has so many pitfalls that only the experts can really use it well.

Bernard Shaw seized on this fact as one of his arguments in that diatribe against doctors, the preface to 'The Doctor's Dilemma'. I like the play well enough. It has among the cast an expert on tuberculin, an old-fashioned physician, a surgeon who cuts out

\* Valedictory Presidential Address delivered at a meeting of the Cape Western Branch, 30 January 1958.

nuciform sacs, a fashionable humbug, and a G.P. turned specialist who despises G.Ps. These pieces are moved on the board with unerring Shavian stagecraft. But the Preface is the thing. In it we are told that doctors have no honour and no conscience, other than that possessed by the average Englishman—sentimentality and an intense dread of doing anything that everybody else does not do. We are told that doctors perform unnecessary operations and manufacture and prolong lucrative illnesses; that doctors are liars, are unscientific, and are cruel voluptuaries who torture animals for sheer curiosity. We are told that the surgeon keeps his self-respect only because he does a very bad thing supremely well. All this is written with a passion, a conviction and a casuistry that command respect because they are so difficult to answer effectively.

Shaw liked doctors. He felt proud to call them his friends. He appreciated their hardships and admired their generous qualities. He realized what a struggle most of them had to face. He knew they had to keep up appearances on incomes which were not only inadequate, but capriciously paid. In fact, he went so far as to call them 'hideously poor', which is certainly an exaggeration. This brilliant, malicious, kindly and inexplicable genius has taken us to task. For our own edification—but certainly not for public use—we should formulate a reply. It would be amusing to see the embryo doctor forced to write, as part of his training, a critical analysis of the Preface. What a mess he'd get into!

Shaw felt that doctors were kindly men turned callous by professional custom. Kindness, gentleness, consideration and humanity have long been the traditional attributes of the physician, and lapses in respect of humanity are not readily forgiven by the public. Readers of the B.M.J. will remember Lettsom's bitter accusations against Mark Akenside, the physician-poet. A certain hardness must, of necessity, have been part of the surgeon's equipment in pre-anaesthetic days, but many genuine anecdotes of great surgeons record not only their skill and dexterity, but their humanity.

It is not so with Pierre La Mure's new description of a cataract operation performed on Johann Sebastian Bach. Poor old Bach, near the end of his life, is subjected to the most excruciating tortures. The whole horrid set-up of pre-anaesthetic surgery is seen at its worst. The four brutal half-drunken assistants who strap Bach to a table have already partaken of the potent liquor designed to diminish the patient's pain. The mincing entry of the pomaded doctor, his incessant chatter about his successes, and the operation itself, with its attendant muffled shrieks, groans and gurgles, seem a nightmare. The reluctance of the patients of those days to undergo operations is easily understood. Perhaps the author of 'Beyond Desire' is unfair to Doctor Taylor, who successfully removed Handel's cataract. In Bach's case the doctor did not merely fail. He ruined his patient by taking his life savings, and Bach's widow died in great poverty.

I see that I have climbed into the twentieth century and then gone back to Bach, and I feel that I now owe it to you to return with all speed to modern times and finish my address. But I cannot

resist a passing glance at three novelists, Jane Austen, Charlotte Brontë, and Charles Dickens. The nineteenth century saw great social and industrial changes and the awakening of medicine and surgery. It saw the birth of anaesthesia, the discovery of bacteria, and the beginnings of asepsis.

Jane Austen's doctors had none of these advantages. Her humble apothecaries, of little social consequence to the country gentry whom she described with her quiet satire, were, nevertheless, consulted and respected. They did their work according to their lights and their patients hung upon their rather ambiguous pronouncements. Charlotte Brontë is a little more critical, with a good eye for a humbug, but I remember that Jane Eyre, a neglected and ill-treated child, heard almost her first kind words from Mr. Lloyd, the apothecary. Besides being cruel and unsympathetic, Jane's aunt was a snob. The apothecary was good enough for Jane and the servants. When she or her children were ill, she sent for a physician.

Charles Dickens and his doctors could monopolize a whole presidential address. In his times conventional vice opposed conventional virtue, and the doctors were on the side of the angels. Even the workhouse doctors had more humanity than one would expect. I have a few favourites, notably Mr. Losborne, who risks his professional reputation to save Oliver Twist from the Bow Street runners, little Mr. Chillip whom Betsy Trotwood beats with her bonnet because David Copperfield is not born a girl, and the lively drunken Guy's student, Bob Sawyer. It seems that Dickens could not bear an incurably bad doctor, for Bob Sawyer ultimately gave up drink, and led a useful life. The acme of professional virtue is reached in Allan Woodcourt of 'Bleak House', who marries Esther Summerson, the heroine, and spends his life, beloved by all, in that state of benevolent activity and modest prosperity—not wealth—which Dickens felt to be the true status of the profession.

Medical authors provide my last two selections, both dealing with fairly modern industrial practice in Britain. 'The Citadel' we all know. Cronin is a great story-teller and I have sometimes felt that he sacrifices truth to art. I found that I liked the book so much better on a second reading that I had to revise most of my earlier impressions, feeling that the story was on the whole a moving defence of integrity. 'My Brother Jonathan', by Francis Brett Young, seems to me to capture the medical atmosphere much better. A contrast between Jonathan, a doctor by vocation, and the brilliant Harold, who chooses medicine for want of anything better to do, brings me to my final point.

Who should become doctors, and who make the happiest doctors? The novelists and the public plump every time for the man with a vocation. They are right. The devotees, who have never wanted to be anything but doctors, are obvious round pegs in round holes, but there is a second group, whom the discipline of our professional life has gradually moulded. These two groups, and not the Wealth-seekers, the status-seekers, or the indifferent, will enjoy the practice of the most fascinating profession in the world.