

Bernard Shaw and the Doctors: The Art and Science of Medicine in *The Doctor's Dilemma*

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*What did Bernard Shaw really think about doctors? Although any reader with a sketchy understanding of Shaw's work is inclined to think that he condemned the entire profession, a careful reading of his most well-known play featuring medical practitioners reveals a mixed attitude. In *The Doctor's Dilemma*, one finds a position that may be representative of Shaw's attitude. In this play, he places the entire Edwardian medical establishment—consultants and general practitioners—on stage, and he focuses the attention of this diverse group on the problem of a patient. In doing so, Shaw is able to separate the play's characters into representatives of (1) the new scientific medicine and (2) the venerable art of medicine. He satirizes the arrogance of the former, and he presents the humane attitude of the latter in a favorable light.*

I. INTRODUCTION

In the epidemic year of 1881 Bernard Shaw contracted smallpox. Although he had been vaccinated against the disease and "assured" of immunity, Shaw lay for three weeks in desperate straits. He emerged from his confinement and convalescence with a full beard, a firm anti-vaccinationist viewpoint, and a skepticism of medical orthodoxy that was to endure through the course of his long life [1]. One has only to read the vitriolic Preface to *The Doctor's Dilemma* and the collection of medical polemics called *Doctors' Delusions* to understand the range and force of his anti-medical views.

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At the turn of the century the singular Shaw was not alone in his opposition to the medical profession and its confident claims of scientific efficacy in the treatment of illness. In the latter decades of the nineteenth-century there emerged in Britain an anti-medical movement, which took issue with such standard medical practices as compulsory vaccination for smallpox, vivisection in the interest of medical knowledge, and examination for contagious diseases [2]. Taking up this anti-medical cause as he had taken up the controversial plays of Henrik Ibsen and the critical view of Fabian Socialism, Shaw became one of the movement's most articulate and provocative voices.

Like literary social critics before him (e.g., Charles Dickens, Charles Reade), Shaw created a number of doctors in his fiction whose pretentious airs, arrogant claims, and dubious cures link their author firmly to Moliere [3]. Yet Shaw was not opposed to all doctors on principle: he counted doctors among his good friends; like Moliere, he did not hesitate to call in a physician when he was seriously ill; and he even derived the central idea of *The Doctor's Dilemma* from a chance remark made by his esteemed medical acquaintance, Sir Almroth Wright [4]. If on the one hand Shaw terms medical service in Britain a "murderous absurdity" and doctors as men with "no honor and no conscience," on the other hand he urges his readers not to regard him "as one who doesn't believe in doctors" [5, 6].

Shaw's mixed feelings toward the medical profession are evident in *The Doctor's Dilemma* (1906) and challenge the reader to go beyond the surface satire to apprehend what specific values are attacked and what affirmed. Certainly, the arguments in the Preface provide a useful context in which to read the play. And certainly, the emphasis of the play falls on a few distinctly unsavory aspects of medical practice. Yet the medical criticism is particularly clear if we view the drama as a conflict between responsible, compassionate medicine and the new, authoritative "scientific" medicine, arrogant in its claims and uninformed by humane feeling.

II. THE EDWARDIAN MEDICAL ESTABLISHMENT

To begin, Shaw puts the entire Edwardian medical establishment of Britain on stage in the first act: his medical practitioners represent the full professional order, from the lowly, servile student (Redpenny) to the venerable knighted physician (Sir Patrick Cullen). In between falls the old tripartite medical establishment of ordinary physician (Ridgeon), surgeon (Walpole), and apothecary (Schutzmacher) — newly reorganized into consultants and general practitioners to reflect a change of function

that had taken place in the middle and latter decades of the nineteenth century [7].

Of the six medical practitioners in Shaw's play, the four higher grade consultants are central and the two lower grade general practitioners peripheral. The fashionable London consultants, Colenso Ridgeon, Sir Patrick Cullen, Cutler Walpole, and Sir Ralph Bloomfield Bonington, are occupied with Dubedat, the problem-patient of the play. The socially removed Schutzmacher and Blenkinsop are occupied with a different class of patients and play a smaller role in the drama.

A second feature that distinguishes the consultants from the general practitioners is the fact of specialization, an emphasis that might be said to distinguish the typical medical practitioner of the twentieth century from that of the nineteenth. In the evolution of British medicine during the nineteenth century, there occurred a gradual shift that Rosemary Stevens characterizes as a departmentalization of interests and refinement of function:

The emphasis in medical care began to shift from the general physician with a special interest—as in pathology, neurology, or cardiology—or a general surgeon interested in urological or ophthalmic surgery, to the full-time specialist exclusively engaged in a well-defined discipline. . . . Whereas the theme of medical history in the nineteenth century was the integration of diverse skills into one medical profession, the theme of twentieth-century medical practice is a fragmentation within the profession [8].

Responding to both this change and the popular acceptance of the doctor as a fictional protagonist, the medical man of Victorian fiction passes into the twentieth century having evolved from a generalist practitioner to a specialized one. As a survey of post-Victorian fictional doctors shows, the typical advanced young doctor of the twentieth century is the professional on the cutting edge of scientific medicine: the medical specialist.

Walpole, Sir Ralph, and Ridgeon collectively represent this new medicine of the new century; each doctor feels supported by the august authority of current scientific theory (e.g., bacteriology, vaccination, antiseptics) and each is willing to exploit the public's faith in the wisdom and skill of up-to-date doctors. Sir Patrick, by contrast, is a generalist-consultant who represents the old, superseded medicine of the mid-nineteenth century—the "intuitive" medicine that Sir Ralph politely dismisses in his survey of the last hundred years:

I mean no disrespect to your generation, Sir Patrick: some of you old stagers did marvels through sheer professional intuition and clinical experience; but when I think of the average men of your day, ignorantly bleeding and cupping and purging, and scattering germs over their patients from their clothes and instruments, and contrast all that with the scientific certainty and simplicity of my treatment of the

little prince the other day, I can't help being proud of my own generation: the men who were trained on the germ theory, the veterans of the great struggle over Evolution in the seventies. We may have our faults; but at least we are men of science [pp. 108, 109].

Yet these men of science, Walpole and Sir Ralph, are cut from comic motley: the former is a kind of happy butcher and the latter a merry chemist. Both emerge as caricatures of the narrowly specialized "mechanists and chemists" that Shaw condemns in *Doctors' Delusions*. Their monomaniacal obsession with *one* source of disease and *one* means of treatment is viewed by Shaw as a form of modern quackery:

Just as the barrister who can handle a particular type of case will take briefs for all sorts of cases and distort them to fit his specialty, so the specialists in a particular treatment or a particular cure, will try that treatment or that operation on all sorts of complaints [9].

Unproven claims, worthless treatments, and the exploitation of lay ignorance link Walpole and Sir Ralph to the general practitioner Schutzmacher whose advertisement of a "guaranteed cure" has provided him with a living standard well above that of the typically impoverished general practitioner that Shaw describes in his Preface. Here, in the "guarantees" of the three doctors, one sees the imposture and opportunism of the cure-monger.

Colenso Ridgeon, the central medical figure in the play, is seen to represent the responsible scientific medicine of his day. His discovery of the "opsonin index" is a legitimate scientific advance based upon painstaking research, with good results to its credit. Yet Ridgeon betrays a moral weakness as he allows his scientific objectivity and Hippocratic mission as a doctor to become clouded by egoism. Throughout the play he labors under the delusion that his expertise and control in the manipulation of vaccines, laboratory tests, and human infirmity can extend to the control of human affections. Shaw's central criticism of Ridgeon is not directed at the effectiveness of his medicine but at his arrogance and willingness to allow personal interest to interfere with his ethical responsibility.

III. THE ART OF MEDICINE

It is neither Ridgeon nor Sir Ralph, the "men of science," but Sir Patrick, the "old stager," who enlists the sympathy of the reader, by affirming Shaw's opinion that "doctoring is an art, not a science" [10]. In *The Doctor's Dilemma* the cultural faith in the wisdom of "scientific" doctors is questioned, as it is in other fictions where Faustian egoism impairs the doctor's Hippocratic responsibility. The reader perceives the "old"

Sir Patrick to be the doctor of good sense, humane feeling, and effective therapy. Here, one recognizes the wise doctor that Shaw distinguishes in the Preface as a man who "qualified before 1860."

Sir Patrick emerges in the play as the voice of reaction. In his view the advances in medicine of the past fifty years have been steps backward rather than forward. To the up-to-date Ridgeon he says,

Lord! yes. Modern Science is a wonderful thing. Look at your great discovery! Look at all the discoveries! Where are they leading to? Why right back to my poor dear old father's ideas and discoveries. He's been dead now over forty years. Oh, it's very interesting (p. 96).

Having lived long enough to be skeptical of "cures" such as Koch's tuberculin vaccine (which caused Jane Marsh's arm to "rot off"), Sir Patrick is unimpressed by Ridgeon's discovery of a "cure" for tuberculosis ("I have known thirty men that found out how to cure consumption."); and he is sufficiently irritated by Ridgeon's heroic posturing to refer to his friend mockingly as "Mr. Savior of Lives." A man of practical temperament, Sir Patrick has discontinued the use of "new" discoveries and returned to the tested processes of reflection, common sense, and non-heroic means of medical treatment.

Sir Patrick's understanding of both the human frame and human nature constitutes an internal laboratory in which deductions proceed not from textbook theories but a half-century of careful observations and patiently acquired premises. For example, in the play's first act he quickly perceives that Ridgeon's depression is due not to an organic disorder—the other consultants' diagnosis—but a common middle-age crisis of spirit with attendant somatic discomfort:

RIDGEON: Have you ever met anything like it before in your practice?

SIR PATRICK: Oh, yes: often. It's very common between the ages of seventeen and twenty-two. It sometimes comes on again at forty or thereabouts. You're a bachelor, you see. It's not serious—if you're careful.

RIDGEON: About my food?

SIR PATRICK: No: about your behavior. There's nothing wrong with your spine; and there's nothing wrong with your heart; but there's something wrong with your common sense. You're not going to die; but you may be going to make a fool of yourself. So be careful (p. 101).

The clear-sighted Sir Patrick is able to take the measure of Ridgeon, just as he is able to see to the bottom of the unscrupulous Dubedat and pronounce him a "damned young blackguard." Pragmatic rather than theoretical, Sir Patrick is philosophically closer to Blenkinsop, the dowdy but decent general practitioner, than to his fellow consultants. Although he, like Blenkinsop, has not kept up with scientific developments—Cullen by choice, Blenkinsop by circumstance—both men possess the immense re-

source of considerable bedside experience; both rely upon a clinical rather than theoretical textbook, so to speak, that suggests the homely virtue of the sentimentally drawn horse-and-buggy country practitioner of nineteenth-century fiction.

In the deathbed scene, Sir Patrick's bedside manner emerges in striking contrast to the manner of the other doctors. Of the four consultants who attend the dying Dubedat and his sorrowful wife, only Sir Patrick offers comfort and practical advice. While Ridgeon, Walpole, and Sir Ralph quarrel among themselves and speculate on the illness, Sir Patrick is focused on the needs of the patient, as his comments suggest: "Come! You've talked enough. Try to rest awhile"; and "Let me put him back on the pillow, maam. He will be better so." It is little wonder that Sir Patrick is the one doctor whom the dying patient seems to want near him.

IV. CONCLUSION

Like certain writers of a previous generation, such as Charles Dickens and Charles Kingsley, Bernard Shaw registered in speech, pamphlet, and fiction a powerful protest against the social ills of his time — poverty, disease, and injustice. While Kingsley drove a water cart through the slums of Bermondsey, Shaw campaigned for sanitation as a St. Pancras vestryman. Although the objects of their less direct social criticism varied from abysmal sanitation in Kingsley's *Two Years Ago* (1857) to an irresponsible medical profession in *The Doctor's Dilemma*, the origin of the impulse was the same humanitarian concern.

This concern is powerfully present in Shaw's play. Most of the doctors he puts on stage, an assortment of the incompetent and the arrogant, see themselves as representatives of the "new" scientific medicine. It is only in Sir Patrick, however, that we find the *art* of medicine: an approach informed by common sense, humane feeling, and wide human awareness, in addition to medical skill and knowledge. In the established contrast here, between the austere mechanical science of medicine and the warm humanitarian tradition, Shaw's position becomes clear.

ENDNOTES

1. Boxill, R. *Shaw and the Doctors*. New York: Basic Books, 1969; and J. Irvine, *Bernard Shaw: His Life, Work, and Friends*. New York: William Morrow, 1956.
2. The anti-medical feeling that arose in Britain at the end of the nineteenth century originated in a resentment of government intrusion into areas of public health. Opposition to health reforms organized itself on political, medical, and religious grounds. See Ann