Chekov, Ibsen and Flaubert’s doctors

An ideo-historical literature essay on how the medical revolution of the 19th century changed the role of doctors

Version 1
Abstract

**Background:** Today we are very likely to encounter exceedingly competent, courageous, charismatic and often times good-looking doctors as TV-show protagonists whilst flipping through the television channels. Just over a hundred years ago it would have been unimaginable for a doctor to lead a storyline, to be a well-liked hero, to even be described as competent.

**Aim:** The purpose of this paper is to study how the medical revolution of the 19th century changed the role of doctors in society and consequently the portrayal of them in literary works and theatrical performances throughout time.

**Method:** This essay is an ideo-historical literary analysis, with a hermeneutic approach of interpretation. The selection of landmark literary work and theatrical plays range from mid-17th century to contemporary times and are chosen on the basis of their popularity and influence.

**Results:** The portrayal of doctors transforms from being figures used as laughingstocks, painted with colors of incompetence and deceptiveness to become highly respectable heroes of society whose steps should be followed and words should be listened to.

**Conclusion:** An increased awareness of the different positions of doctors in society may bring the clinicians of today a better understanding about the conditions of their status. This insight might make it easier for them to navigating in a professional life with the new and ever-challenging well-read patient of today.
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1. Introduction

In this day and age, we are very likely to encounter exceedingly competent, courageous, charismatic and often times good-looking doctors as TV-show protagonists whilst flipping through the channels. New episodes of these critically-acclaimed medical shows with millions of viewers take up primetime and episodes from previous seasons, some older than a decade, run during the day. It is easy to assume that the profession of a doctor has always been prestigious – that has not always been the case.

Just over a hundred years ago it would have been unimaginable for a doctor to lead a storyline, to be a well-liked hero, to even be described as competent. Many comic figures have been made of doctors churning out empty knowledge, suggesting treatments nobody believed in. There was a time where doctors did more harm than good, other classes of society would be seen as better healers, and where people preferred alternative treatments such as botanical or homeopathic forms of healing from sickness [1], [2].

Before the 19th century the art of medicine was surrounded by a cloud of mysticism, quackery and charlatanism. Not many developments had happened in the medical sciences since the Middle Ages. Doctors continued conducting dangerous bloodlettings, symphysiotomies, trepanations. Surgeons would shorten their patients time to death, unsuccessful in prolonging life [2], [3].

All layers of society went through a transformation following the industrial, political and scientific revolutions of the 19th century. The organization and quality of healthcare was no exception, which would indefinitely alter the role of the medical profession and pave the way for how we view doctors today. With this essay, I hope to investigate and acquire an understanding of the history behind today’s societal and popular cultural perception of doctors and the role of the medical revolution of the 19th century in influencing the portrayal of doctors the last two hundred years.
2. Aim and Research Questions

2.1 Aim
The purpose of this paper is to study how the medical revolution of the 19th century changed the role of doctors in society and consequently the portrayal of them in literary works and theatrical performances throughout time.

2.2 Research Question
How are the different positions of doctors portrayed in the works of popular and influential authors from mid-17th century to early 21st century?
Why may the acquaintances with such portrayals be of importance for the clinical of today?

3. Material and Methods

3.1 Method
This essay is an ideo-historically approached literary text analysis on a hermeneutical ground. Works of literature and theatrics have been read and processed with a hermeneutic method of interpretation in which all separate chapters, passages and scenes need to be in reference with one another, the cultural, historical and literary context from which it was sprung out of. This is the reason why the medical and social advancements of the 19th century with an impact on the profession of doctors is used as the starting point of this essay.

From there on, the portrayal of doctors will be investigated by comparing a collection of literary and theatrical works from before and after the 19th century. The selection of literary and theatrical works range from mid-17th century to contemporary time and are chosen on the basis of their popularity and influence.

3.2 Included works
The section which explores the medical history of the 19th century is mostly based on Nils Uddenberg’s book Lidande och läkedom II: Medicinens historia från 1800 till 1950 from 2015 [2]. A selection of supplementary articles on the history of medicine, overview articles and research on different websites have been included based on their relevance but also to further confirm the findings of Uddenberg.
Oftentimes, the popular culture, literature we read, plays we spend time watching are reflections of existing societal ideologies and discussions. To illustrate how the perception of doctors transforms with the medical and societal changes of the 19th century, focus will first be directed to the works of Molière, Herman Melville and Gustave Flaubert. Molière and Melville’s portrayal of doctors predate the medical advances of the 19th century and gives an idea of the state of the canvas which the pencil strokes and new colors of 19th century will paint on. Furthermore, the debut novel of Flaubert, *Madame Bovary*, will illustrate the transformation of medical representation as the medical revolution is happening [4].

The 19th century is also the time of change for the world of literature. A new literary era in the form of realism ascended and Flaubert is one of the leaders of this 19th century movement. Two other pioneers of realism are Anton Chekov and Henrik Ibsen, whose works and portrayals of doctors are included in this study to exemplify the impact of the medical revolution on the perception and role of doctors. Lastly, the contemporary and popular TV-series, *Grey’s Anatomy* will be used to demonstrate the dominating portrayal of doctors in recent years [5].

### 3.3 Ethical considerations
As this study is a literary review it is important that all literary works are represented. It is essential to neutrally and objectively analyze the reading material. Articles used in the research need to be qualitative and reliable. The most crucial feature of an essay of this sort is to include a broad-based selection of literary works to avoid drawing conclusions without generalizing.

### 4. The Medical Revolution

#### 4.1 Advances in medicine
The medical discoveries of the 1800’s have had an unprecedented impact on the practice of medicine till this day. It was the century which legitimized the profession of doctors and turned medicine into a science composed of histology, physiology, anatomy, biochemistry, pathology, bacteriology and so on [2]. Doctors and researches of the 1800’s conducted studies which laid down the groundwork of our understanding of the human body’s normal and abnormal structure and functions. Knowledge about the constitution of living organisms, the
different types of tissues from which our organs are composed of, lead to a greater understanding of human health and illness [2], [6].

In the 19th century studies of anatomy, histology and biochemistry were interconnected by researchers for the first time and whom from there on could map out different physiological processes of the organs. Greater knowledge about human physiology were paramount in developing theories of the pathogenesis and symptoms of different medical conditions. Which in turn gave rise to new therapeutic strategies ranging from surgical and pharmacological to physiotherapeutic treatment methods [2], [7].

For more than two thousand years, it was believed that diseases were caused by an imbalance of bodily fluids and they would be treated accordingly. This theory of pathology got challenged and gradually replaced following the medical advances of the 19th century. In the new post-industrial hospitals of the 19th century, autopsies would be performed on a regular basis which increased opportunities for clinical research. Researchers started to look for macroscopic and microscopic changes and connected these findings with the clinical presentation of different medical conditions. Moreover, this type of investigation gave rise to a tissue-oriented and then a cell-dysfunction-oriented disease theory emerging mid-19th century; the latter was certainly useful to the doctrine, treatment and prevention of tumors [2].

A variety of instruments such as the stethoscope or spirometer, examination methods such as ECG or X-ray-imaging as well as laboratory methods like chemical analysis of the blood and urine, were developed in the 19th century and made it possible to study the human body whilst it was alive. The clinical picture of an illness broadened; instead of only composing of a patient-derived symptom descriptions, doctors could include clinical data such as heartrate, respiratory rate, body temperature, blood pressure, chemical composition of fluids and so on. With these new methods came the possibility of earlier diagnostics, greater insight into the course of the illness and assessment of the effectiveness of chosen treatments. These types of clinical observations and experimental studies offered the medical community detailed characteristics of different diseases that are still used today [2].

Epidemics such as the plague had previously been viewed as expressions of God’s wrath with humankind. It was also believed that they could be caused by either unfavorable environmental or astrological conditions. The formation of bacteriology in the second half of
the 19th century, particularly in 1880s would come to save millions and millions of human lives. In a short amount of time, one after the other disease-causing microorganism was identified. Suddenly numerous diseases could be linked to specific microorganisms: whooping cough, cholera, measles, yellow fever, rabies, smallpox, tuberculosis, gonorrhea, leprosy, typhus, plague, syphilis and African trypanosomiasis to name a few. The discovery of these pathogens along with the development of vaccines and chemotherapeutics made it possible to prevent, cure and even eradicate some of the most hitherto dreaded diseases [2].

Another field of medicine that could benefit from the discovery of microorganisms was surgery. The formerly ill-reputed surgeons became the category of medics that transformed its social and medical status the most profoundly. Surgeons went from operating on un-anesthetized wounded soldiers in war zones, conducting operations with very high mortality rates to become the central figure around which modern hospitals would grow. The discovery of anesthetics in the form of nitric oxide, ether and chloroform narcosis in the 1840s, along with the development of antiseptics dramatically increased the survival of patients undergoing surgery. These triumphs also made surgeons dare to venture into doing innovate surgeries, starting to put their scalpels into the body’s cavities and soft tissues. They started to work aseptically by using antibacterial substances to clean their hands and equipment, eventually they even started to wear rubber gloves, cover their mouths and hair [2].

4.2 Social reforms
The 19th century was a time of change and social transformation. Naturally, the field of medicine was no exception to this. In the wake of the enlightenment, industrial revolution and political changes the rise welfare states with constitutionalized human rights came to. A dramatic reorganization of the health care system began with an increasing public employment of doctors. Inherently, the public would place higher demands on the healthcare standard and the professionalism of doctors [2].

With acquiring a place in the public machine, new theoretical knowledge and therapeutic methods doctors felt a greater societal responsibility than ever before. Raising social awareness and working for the welfare of all, was now part of a physician’s duties. A variety of “Health Committees” composed of physicians working alongside politicians were made to ensure quality healthcare. This increased political power would lead to the formation of public health projects where physicians, city planners and government officials would work hand in
hand to eradicate epidemics and unsanitary living conditions, to implement food hygiene, mandatory vaccinations and surgeries under aseptic conditions [2], [8].

Before the 19th century doctors would be self-employed. Physicians competed against each other for patients and they would offer the best care to the highest paying customer. Naturally, this would make access to healthcare unequal. The hospitals were establishments which provided food and shelter to the poor, homeless or disabled who could not be treated at home like the rich. This would change with the medical progress of the 19th century when healthcare became more specialized and in demand of medical experts, advanced technical equipment, anesthetics, surgical rooms, aseptic tools and surgical staff. Hospitals became highly specialized facilities and doctors were no longer the only occupational category responsible of the patient care [2], [8].

5. Portrayal of Doctors

5.1 Mid-17th century to Mid-18th century
In this section the portrayal of doctors before the full impact of the medical success of the 19th century, is going to be treated through the works of Molière, Herman Melville and Gustave Flaubert.

5.1.1 Molière
Doctors have been subject to ridicule in many comedies and plays as imbecilic figures of incompetence, deception and hypocrisy for many centuries. From the time of the philosopher Aristoteles, two archetypes of doctors have been represented in comedies; the eirôn, a deceiving character who pretends that he is more incompetent that he is; its direct opposite the alazôn on the other hand is a character who pretends to be more competent than he is [1], [9]. Many doctors are portrayed as typical alazôn, making a spectacle of their empty knowledge in the popular plays of the French comedy writer, Molière (1622-1673).

Molière uses comedy to touch on serious matters, such as the common man’s frustrations with doctors speaking with incomprehensible sentences, throwing around medical terms. One of the playwright’s doctors casually incorporates difficult and medical terms in Latin and Greek words: “First, to cure this obdurate plethora and this luxuriant cacochymy throughout the body… he should be liberally phlebotomized…” whilst speaking with laymen [9]. With his
characters, Molière explains that doctors only talk in riddles to mask their ignorance, knowledge gaps and incompetence.
The playwright depicts several doctors attempting to impress and take advantage of the masses unimpeachable trust in them. In *Dr. Cupid*, Dr. Filerin explains that the source of this trust stems from humankind’s biggest weaknesses; “love of life” or “fear of death”. Dr. Filerin suggests that doctors should “profit by their stupidity as softly as we can” and continues his speech with urging his colleagues to “attribute to ourselves the happy outcome of the illness and to cast on nature the blunders of our art.” [10]. Furthermore, Molière also mocks and criticizes doctors’ ineptitude in questioning the methods and rules of ancient scholars such as Hippocrates and Claudius Galen, in the way they continue letting patients endure dangerous, painful and ineffective treatment methods [9].

5.1.2 Herman Melville
The American writer Herman Melville (1819-1891) influenced by Molièrianism, criticize the ineptitude and immorality of doctors in his portrayal of Dr. Cuticle in the novel *White-Jacket*. Dr. Cuticle is a knife-enthusiast, blind, indifferent and unfazed by the suffering he is causing his patients. He performs unnecessary operations on un-anesthetized patients without difficulty, even inviting a surgical audience to witness his artistry. Students in Dr. Cuticle’s audience whisper about how he can amputate a leg “in under one minute and ten seconds from the moment the knife touches it” amongst themselves [11]. Dr. Cuticle is so detached from the idea that his patients are human beings with emotions, and so engrossed in lecturing students on his techniques that he fails to notice that the patient on his operation table has died.

5.1.3 Gustave Flaubert
The influential author Gustave Flaubert’s (1821-1880) first novel, *Madame Bovary*, is a French classic read by students in literature lectures yearly till this day [4]. The novel starts with the childhood of Charles Bovary, a bullied and insecure boy with difficulties keeping up with schoolwork for which he compensated by being a diligent and attentive student. He worked hard and put a lot of effort in his assignments “conscientiously, looking up every word in the dictionary” (p 9). Even though academic studies were not his strong suit, he decides to enroll in medical school to make his mother happy. Unfortunately, he fails examinations as result of being lazy and absent from some of his classes. Bovary “crammed
for his examination, ceaselessly learning all the old questions by heart” (p 19) to pass and ultimately obtain a medical degree.

Obedient in his nature, he lets his mother continue to make life decisions for him, which eventually leads him into a marriage with an older widow who dies of a stroke some years later. His first wife would come to take the torch from his mother in controlling his life; dictating the way he talked, his choice of clothes, demanding to always knowing his whereabouts and invading his privacy.

When Dr. Bovary is called to assist a patient with a broken leg, his incompetence becomes apparent to the reader. Firstly, in the way he zealously “tried to call to mind all the fractures he knew” (p 23) on his way there and secondly by how pleased he is when he realizes that the fracture is easy to fix. With this visit Dr. Bovary meets his future second wife, Emma, the daughter of the patient with the broken leg.

Dr. Bovary is described as a meek and unimaginative character through the eyes of Emma. His marriage to Emma is the first important decision he makes for himself, and its gravely based on his attraction to her beauty. Nonetheless, Dr. Bovary finds happiness in his second marriage. He becomes a doting husband, quite satisfied with his life, finding pleasure in ordinary things like “a meal together, a walk in the evening [...] a gesture of her hands over her hair, the sight of her straw hat” (p 59). Emma on the other hand, a hopeless romantic with a baggage packed with dreamy, idyllic expectations of life and love, goes into the marriage thinking its automatically going to satisfy her inner needs and remove the emptiness that she feels. She has a constant need for change, the new and unattainable, detesting village routines from which she escapes by reading sentimental novels and poems. She blames drifting away from Dr. Bovary on his dullness; his talk being as “commonplace as a street pavement”; his lack of “curiosity” (p 73). What she required was someone to stimulate her, introduce her to “new activities and passions”, not someone who “taught nothing, knew nothing, wished nothing” (p 74). Even motherhood disappoints her as she is not given a son that she can live vicariously through, because “a man, at least, is free; he may travel over passions and over countries, overcome obstacles, taste of the most far-away pleasures” (p 160).

Dr. Bovary’s lifestyle comprised of “one habit among other habits” (p 78) is the thief of excitement in Emma’s life. Her restlessness, the chock of not having her expectations met, her detachment from reality and ever living longing, drives her into depression numerous times.
Giving up his practice, selling their house at a disadvantageous price, Dr. Bovary hopes to improve his wife’s health by moving. This will not be the first time he is economically reckless or perhaps ignorant, for the sake of love for his wife; the doctor deserts his practice sitting by his ill wife’s bedside for a month and half, completely unaware of the fact that they were in financial debt due to Emma’s economic affairs spiraling out of control.

Flaubert makes Dr. Bovary stupidly blind to Emma’s economic and romantic affairs. Emma gets away with slipping out early in the mornings, meeting her lover in their garden and the doctor’s consulting room while he is in deep sleep. Unsuspecting as he is, Emma makes a fool out of him, making him believe the lies she tells to cover up her tracks. Dr. Bovary fails to connect her worsened symptoms with the departure of her lovers from their lives, instead he sees them as “the first signs of cancer” (p 392).

Moreover, Dr. Bovary’s gullible nature effects his professional work and is taken advantage of by the pharmacist Homais, who persuades him into performing an experimental surgery against his better judgement. Despite him having a higher education and more experience he chooses to put a patient through unnecessary pain. The patient acquires a case of gangrene in his leg which eventually is amputated at thigh level. Dr. Bovary is mocked for trying to straighten club-feet. The incompetence of Dr. Bovary may also be seen in how he fails to save his wife when she poisons herself with arsenic. Yet again, the doctor lets Homais take control over the situation, which he believes will be solved with an antidote. Following Emma’s death, we learn that her death could have been prevented if only he had “introduced [his] finger into her throat” (p 608).

5.2 Late 19th century
The picture painted in the previous section comprised of ineffective physicians, distrust in medicine, frustrations with physicians and fear of disease would continue to dominate until the medical success of the 19th century made people could trust in the healthcare institution. Naturally the doctor’s role in society and its public perception would go through a dramatic transformation during this period, whether the doctor was fictional or real.
5.2.1 Anton Chekov
The main theme of Anton Chekov’s (1860-1904) play Uncle Vanya (1898) is the difficulties of a life governed by habits – something that certainly is familiar to Emma in Madame Bovary [12].

The drama is set on the countryside, at the house of Professor Serebrakoff, to which he and his new and young wife Helena just returned. Serebrakoff’s growing problems with his bad liver, gout, headaches and rheumatism, is the reason behind his return and summoning of dr. Astroff to the house. With that, the monotonous routines of everyday life at the house is disrupted; a sequence of events are set in motion, including the formation of a love square.

In the opening act, Dr. Astroff, a man of merely thirty years is going through a life crises. He is anguished by his loss of youth and desires. A tough life of self-sacrifice and endless work has taken a toll on him. Explaining that a decade of working “from dawn to dusk” has made him unable to rest, always afraid that he is going to be summoned to yet another patient in the middle of the night (p 6). Threabare by his profession, he has lost his drive and hopes; he has become numb to living. “life holds nothing for me […] I am old, I am tired, I am trivial” (p 42). He finds life dreary, constantly looking for a deviation from the monotony of routine life, much like Emma in the previous section. With time, he had developed a habit out of drowning his sorrows with alcohol. Nonetheless, Chekov portrays dr. Astroff as a competent, accomplished doctor whom the community appreciates and celebrates with accolades such as “a diploma and a bronze medal” (p 19), [13].

As the play develops, it is unveiled that Serebrakoff’s daughter from his first marriage, Sonya is in love with the doctor. Through her admiring eyes we get to see dr. Astroff in a different light: “He is clever. He can do everything. He can cure the sick, and plant woods.” (p 46) is how she describes him. We are introduced to dr. Astroff modernistic opinions and lifestyle choice, which differ from those of his society and are more aligned with those of our time. He is a vegetarian even though it is frowned upon. Tortured by environmental degradation during a time when nobody else would give it a second thought, he grieves the Russian forests getting poorer: “Millions of trees have perished. The homes of the wild animals and birds have been desolated; the rivers are shrinking, and many beautiful landscapes are gone forever” (p 20).
Dr. Astroff is also an activist. Though he is ridiculed by the rest of the community, he continues raising his concerns for the human caused destruction. By planting trees, he is not only taking a stand against the community, he is also taking responsibility for the lives of future generations. He finds satisfaction in doing what he sees as a duty: “…if I had some shall share in improving the climate, and if mankind is happy a thousand years from now I will have been a little bit responsible for their happiness.” (p 21).

Sonya’s uncle, Vanya, who also lives at the estate which he had cared for the past twenty-five years, will with the return of Helena profess his love for her. Vanya’s feelings are unrequited by Helena who blatantly rejects him. Instead she decides to patch up her relationship with Sonya by vowing to talk with the doctor on her behalf. When Helena shares this news, he replies that he wants her and not Sonya. He kisses Helena and she responds, thus understanding her own emerging love for him. Sadly, Dr. Astroff was drawn to Helena purely because of her youthful attractiveness, life full of potential – all things that he had lost. The sorrows of his life leaving him incapable of deeper emotions, explaining: “…at times I suffer unendurably and I see no light ahead. I have no hope; I do not like people. It is long since I have loved any one.” (p 41).

Next the Professor announces his plans of selling the estate so that he can buy a cottage in Finland. Vanya who in chock because of Serebrakoff’s lack of gratitude for his hard work at the estate feels that he has wasted his life. Which is why he takes revenge by attempting to shoot the professor, but fails to hit him. The married couple pack up their belongings and urgently leave. The play ends with everything turning back to its normal state or how it was before the arrival of the Serebrakoffs. Vanya and Sonya get back into their old habits and life of routine.

5.2.2 Henrik Ibsen
Henrik Ibsen (1828-1906) is another author who has changed the world of literature. Ibsen’s drama An Enemy of the People (1882) is about dr. Thomas Stockmann who on his quest of revealing the truth and saving his town from disease ends up becoming an unpopular whistleblower instead of a hero [14].

The story begins at a dinner party where the doctor is refusing to answer questions regarding a soon to be published article because of some hitherto unconfirmed details. The town mayor
and older brother of the doctor, Peter Stockmann, who is in attendance is personally angered by all the secrecy. Shortly after it is revealed that the article describes dr. Stockmann’s suspicions that the water running through town popular baths is polluted. He had been investigating the matter ever since the development of a few “very strange cases of illness” (p 33). Soon enough, the doctor’s suspicions prove to be accurate as samples indicate “presence of decomposing organic matter” (p 33). As unpretentious as he is, the doctor refuses to credit himself for his discovery, describing it as “a lucky find” (p 36).

Ibsen gives us a taste of Dr. Stockmann’s strong sense of self, integrity and principals early in the play [15]. Truthfulness and honesty are so ethically important to dr. Stockmann that he finds it is immoral to voice speculations before evidence of proof: “Do you suppose I was going to run about the town gossiping about it, before I had absolute proof?” (p 34) he responds when asked about why the investigation was kept secret.

Thinking that his discovery will save people from disease and bring improvement to the welfare of his community, the doctor is eager to share the news and glad to be of help. The doctor’s findings are initially celebrated. Hovstad, the editor of a newspaper wants to print the article and claiming it is his duty to enlighten the masses. When in fact he wants to use it to open fire on the city’s leadership composed of “self-opinionated old fossils” (p 46). Mr. Aslaksen, a man with influence on both the “Householders’ Association” and “Temperance Society”, show his support by proposing to organize a “little demonstration” (p 49) for the cause.

Alas, the doctor’s quest is stopped by the mayor before it could begin. Mayor Stockmann is unconvinced of the doctor’s findings and is also worried about the financial effect they would have on the community. He argues that reconstruction of the drainage system along with shutting down the tourist attracting baths for two years would have a significant effect on the town’s economy. Increased tourism had many profits: “Houses and landed property are rising in value […] The burden on the poor rates have been lightened” (p 10) the mayor explains. We learn that the baths have even been called the “pulsating heart” of the town (p 31).

Dr. Stockmann’s intentions are pure. He is a man of noble character, who has not embarked on this crusade for the sake of popularity, money or power. Continuously rejecting praise, offers of help to get a testimonial, banquet or higher salary. When realizing Hovstad’s selfish
intentions the doctor clarifies that he is uninterested in overthrowing the leadership to which “they owe a great debt of gratitude” (p 47). The two brothers get into a quarrel, both thinking that they are in the right; the mayor by protecting the financial interests of the town and the doctor by fighting for the truth and health of the people. Mayor Stockmann ends up banning the doctor from spreading word about the pollution; reminding him that he has “no right to any individual opinion” (p 68) as an employee, especially when it is not in agreement with his superior’s opinions.

The doctor tells the mayor that concealing the truth would be “a fraud, a lie, a downright crime towards the public, towards the whole community!” (p 62). To protect his own reputation the mayor resorts to coerce the doctor by threatening him with termination. Moreover, the mayor stops the printing of the article by influencing Hovstad and his printer Aslaksen. They promptly change sides when they are told that the renovation would take money from their own pockets as they would be subsidized by municipal funds. The former allies of dr. Stockmann even agree to print an article put the rumors of the baths to rest.

Abandoned by everyone but his family, the doctor finds himself at war with the leadership, bourgeois and media. Unafraid of standing on his own, the doctor decides to reveal the truth at a mass meeting. At said meeting, his opponents try to prevent him from commenting the baths. The mayor, Hovstad and Aslaksen turn the citizens of the town against the doctor; they discredit his character and findings; question his and his family’s intentions. The three of them manage to change the public opinion of Dr. Stockmann public in one sitting, evident by the cheering and applause of the townspeople as they badmouth the doctor.

The disappointed doctor admonishes them for their spinelessness. He redirects his speech by condemning the authorities, pointing out how they are “paving the way for their own extinction” (p 127). Moreover, he states that an even greater threat to the truth, morality and freedom, is the compact majority. The doctor declares how he “would rather ruin it [his town] than see it flourishing upon a lie” (p 139), which further turns the masses against him. The meeting is adjourned with Hovstad declaring dr. Stockmann as “an enemy of the people” (p 139).

With that the whole town turned its back on the doctor; the windows of his home get smashed with stones, his landlord discontinues their leasing contract; both him and his daughter are dismissed from their jobs; his sons are sent home from school. Eventually the mayor, Morten
Kill, Hovstad and Aslaksen, all come to visit the doctor. Each offering their own truce deal on the condition that the doctor retracts his statements. Yet again, dr. Stockmann refuses to give in to pressure. Unlike everyone else he does not let money, greed, or power hunger make him give up his believes, even though his family’s heritage is on the line. He rejects all offers, decides against fleeing town and instead prepares to courageously stand on his own and continue his fight.

5.3 Mid-20th century to early 21th century
Joseph Turow, has in his book *Playing Doctor: Television, Storytelling, and Medical Power*, made a timeline of how the portrayal of physicians in television series have transformed from the 1900s until today. We go from the wise, morally strict, all-knowing, exemplary, devoted and passionate doctors of the 1960s and 1970s, to the doctor with personal inner turmoil and anxiety of the 1980s. In such shows the storylines often revolved around the patients. The spotlight in medical shows shifted to the doctors in the 1990s and it has been there ever since. With this changed focus we have had an emergence of a different types of doctors, many in need of self-care. More and more focus has been put on into the fictional doctor’s personal life, Dr. Turow means that this a strategy to make the show more realistic and relatable to the public [16].

5.3.1 Grey’s Anatomy
Moving forward a couple of years in time, one of the trendiest medical shows of the 21th century with an audience of 19.9 million per episode, is Shonda Rhimes’, *Grey’s Anatomy* [5]. It seems that the rule is still to portray doctors with professional excellency, incredible skillfulness and competence, but in combination with a chaotic personal life, a struggle with relationships and some psychological issues. The lead character dr. Meredith Grey, a brilliant and competent doctor, begins her story as a person who avoids creating real and meaningful bonds with people. A baggage composed of a rough childhood with incapable and uncaring parents has left her with intimacy and trust issues, to the extent that even she labels herself “dark and twisty”.

These flaws and personal issues of her are explored throughout the seasons which are filled with professional advancement mixed with traumatic experiences and personal tragedy. Her psychological deficits, such as being reckless with her own life and unaccepting of love, are shown time after time. Viewers get to observe her coming out of situations of great hardship.
with unrelenting strength, every time a little bit more broken but just like bone, her broken pieces only grow back stronger [17], [18].

Brian Quick, conducted an investigational study on students in which he researched if the portrayal of doctors in *Grey’s Anatomy* could affect their public opinion of real doctors. He illustrates the general theme of professional excellency and personal flaws by randomly analyzing episodes from the second and third season, in which he finds examples of a doctor succeeding with the difficult task of removing a bullet from a fellow surgeon’s hand without causing any damage, of how another doctor risks her career to safe a patient’s life for whom she has romantic feelings. Quick found that his students perceived doctors as “courageous, brave, heroic, clever or brilliant” despite the showcasing of their messy relationships and faultiness privately. He credits this phenomenon to the portrayal of capable doctors, the credibility and relatability of the show [19], [20].

### 5.3.2 Fictional doctors effect on the perception of doctors
How much can the depictions of the profession of doctors in popular media influence the perception of doctors and the expectations on healthcare today? In 2001, Rebecka Chory, conducted a study on how contemporary depictions of 229 fictional from TV-shows from 1992-1999 could affect the public opinion of doctors. Chory, found a small positive association between exposure to fictional doctors and a perception of doctors being “uncaring, cold, unfriendly, nervous, tense and anxious”. She ascribed her results to the uncovering of these characters’ private lives and human faults. Furthermore, Chory voices concern that real-life patients might be disappointed in contact with real-life doctors as they “expect a miracle cure, or a good-looking doctor, or someone who even when you’re at death’s door is going to come up with a cure” [19], [21].

Another study that would indicate that the depiction of doctors on television shows can affect people’s opinions and even life choices, shows of a positive relationship between idealizing the profession on shows such as *ER* and the enrollment of students to medical school [22].

Additionally, in the previously mentioned research about the portrayal of doctors in *Grey’s Anatomy* and its effect on the perception of students conducted by Brian Quick, he would suggest that a show with “heavy viewers” of 32 episodes a season, a total of 331 (and still counting) could influence its audience because of its longevity. The results of Quick’s study
would show a strong correlation between patient contentment and doctor courageousness. He explains that the show creates a depiction of doctors that would “perform courageous acts in order to save or significantly improve the quality of life for a patient” therefore influencing the perception of doctors amongst his students. Which in turn influences the expectations they would have. Relying on a meta-analysis on patient satisfaction and other numerous variables, he substantiates the similarity between perceived physician courageousness and competence [19], [20], [23].

6. Discussion

In conducting this investigation of the many faces of doctors in the eyes of the public and in the written word throughout time, the most significant period which would transform the role of doctors in society, fictional or real, appears to be the turn of the 19th century. Considering how the 19th century was a time of scientific revolution and all-encompassing change, maybe one should not be surprised by the dramatic change in the portrayal of doctors.

By the end of the 19th century the cloud of quackery and distrust had moved away from the art of medicine; the sun of medical advances and science had come out and illuminated real and fictional doctors as heroes, medical healers and social leaders for the first time. Gone were the times of Molière where doctors would be ridiculed for their incompetence and feared, for their deceptiveness, carelessness and dangerous treatments which caused suffering in vain. One could use the doctor depictions of Molière and Melville as an indication of the distrust people had in medicine and doctors before the medical revolution of the 19th century.

The portrayal of incompetent doctors would continue to dominate the first half of the 19th century. While doctors are portrayed to be questioning of the old teachings of ancient Greece, they have now become too knife-friendly and dangerous like dr. Cuticle in White-Jacket, or unable to keep up with the medical advances like dr. Bovary in Madame Bovary. We get acquainted with doctors who are indifferent to human suffering, perhaps because they are overly engrossed with keeping up with the yet unproven medical advances. Take dr. Bovary as an example, who causes a patient to lose his leg because of his inability to live up to the expectations of early 19th century medicine. He had no business performing an experimental
operation using unproven and to him unfamiliar surgical techniques. Again, these portrayals of doctors could suggest the existence of a society with doubts and distrust in medicine.

With the power and influence of doctors - economic, political or social – reaching its height at the turn of the 19th century, the public’s perception of doctors would change, which in turn transcends into the world of literature and theatre. The tone with which doctors are spoken of in the plays of the founding fathers of realism, Chekov and Ibsen, is completely different from that of Molière’s. Instead of a depiction of incompetent and dangerous doctors, we meet Dr. Astroff, an idealist, an activist, someone who has sacrificed his life, youth and beauty for the sake of his patients and profession. He is a man of professional competence, but he is not just his profession. Dr. Astroff also sets an example for his community, lecturing people on the importance vegetarianism and of preserving nature. The altered duties of a doctor are presented in the way dr. Astroff takes responsibility not only for his patients, the people of his community, but also for future generations – people he has never met and will never meet.

The hero we meet in Ibsen’s dr. Stockmann, it not that different from the ones we see in today’s Grey’s Anatomy. Dr. Stockmann is described a hero, brave and unafraid to stand up to authority figures and the community as a whole, if they prove to be unethical. He refuses to back down from doing what he believes is the right thing. A man of principal and integrity who undertakes the responsibility to reveal the truth and save the people of his town no matter what obstacles stand in his way. The depictions of doctors continued to be painted with the same of colors of professional competence, characters of morality, passion and devotion for their patients in the 20th century to finally become multifaceted individuals with problems of their own today. In Grey’s Anatomy, doctors are portrayed as courageous heroes with successful professional lives. They exude intelligence, impeccable surgical skillfulness and success. They are fearless and bold in the operation room and sacrificial of their personal lives for the sake of their patients just like dr. Astroff. But today, viewers also get to see these doctor’s weaknesses, faults and imperfect personal lives.

The aim of this study was to investigate the origin of how doctors are portrayed today by way of researching the medical revolution of the 19th century and how it influenced the portrayal of doctors in stories throughout time. All these depictions of doctors throughout time give an idea of the origin of today’s perception and portrayal of doctors; highly reputed and respected social citizens; people whose words are of substance, knowledge and opinion is of
importance. But why is it important for clinicians of today to know how their profession have been perceived and portrayed throughout time?

By understanding the portrayal of doctors, how it got its current shape and form, clinicians of today might acquire a greater insight into the conditions of their naturally given high status and with that realize not to take it for granted. Getting acquainted with fictional characters in literature can stimulate literary imagination. In reading literature and meeting colleagues of the past, the clinician can comprehend that what is counted as the truth of today may very well change the coming decades. This may bring humility to their work and make them better equipped to handle change.

The high status and role of doctors in society is not unconditional. It is not something that can be counted as constant. We are living in a time where the public praising of the medical success of the 19th century is starting to die down and frustrations with the healthcare system are getting stronger; if not for the long waiting lines then maybe for doctors not prescribing antibiotics or not having found a cure for cancer. Maybe clinicians with such insight can tackle these issues and challenges of tomorrow with greater elegance and caution.

Humility in doctors is more important now than ever. This essay has only followed the changed role of doctors in society, but the role of patients has also transformed dramatically in recent years. We live in a time where the authority of doctors and medicine in general, is challenged and sometimes even threatened on a daily basis. The information societies in which we live, with its increased access to information has taken part in the rise of the empowered and competent patient. The authority of doctors in the past stemmed from the fact that they possessed knowledge and information that the patient needed, and could not attain himself. With increased reliance on technical equipment and increased access to information the well-read patient has made the doctor-patient-relationship more balanced and equal. The role of the doctors has already gone from being a superior decision caller, to become a consult in the decision-making process where the patient is now dominant. Thus, making the doctor and patient a team, in which both are actively working to fight the illness. To keep up with this development it has become imperative that doctors are acquainted with the newest scientific findings and treatment methods, thus making the most competent doctors of humankind even more well-informed [24]. These new patients need a new type of doctor. By getting acquainted with older colleagues the doctors of today, may learn from past mistakes.
They can also be better equipped to deal with these patients in a way that can prevent distrust in medicine from rising.

It is also important for doctors of today to be aware of their current portrayals. As suggested by the studies of Chory and Quick, these popular images of doctors may influence the public’s perceptions of the role of doctors. The patients that the clinicians of today meet on a daily, all come in with certain expectations, some possibly influenced by popular cultural ideas. If the doctor is aware of the expectations, he is more likely to know how to offer his expertise and help, and prevent misunderstandings and disappointments from rising. This insight may improve how pleased his patients are with their interactions, but it may also make it easier for the doctor to navigate in a world with so many ideals to live up to and so many challenges to overcome. Maybe doctors themselves and society as a whole, can take down doctors from being on a pedestal from the past and instead be more accepting of the shortcomings of medicine and its implementers. Because doctors, are in fact only human.

7. Conclusion
In this essay we have seen the progression of the portrayals of doctors in a selection of literary and theatrical works ranging from mid-17th century to contemporary time, illustrating an increasing prestige and social status. Doctors go from being comic figures that get ridiculed, to becoming heroes and leaders of society without flaws and then finally reaching a position where they become accomplished professionals that also have human faults. By meeting the colleagues of the past in the sphere of literature and theater, doctors of today may get a better understanding about the conditions of their given status and with this insight be better at navigating onwards in their professional lives during a time where they are being challenged and questioned by the empowered and well-read patient.

This study composed of a small selection of depictions of doctors. A larger study would include more literary works, plays, TV shows, artwork from different time periods and cultural backgrounds. More illustrations are required to create a more broad-based, multidimensional and richer picture of how the portrayal of doctors has changed throughout time.
8. References


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