Performing the Function of a Clinician as a Writer: Gustave Flaubert and Madame Bovary

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Saint-Béuve, an eminent nineteenth-century literary critic, referred to Flaubert’s writing as a literature of the scalpel, dissecting not only the text but the characters within themselves, getting beneath their skin, describing their feelings and their social encounters with medical metaphors: ‘Son and brother of distinguished surgeons, M. Flaubert handles the pen like others the scalpel. Anatomists and physiologists I meet you at every turn.’

In his novel Madame Bovary, descriptions of death and love are crafted like a pathologist would give a description of a diseased organ. Not only does he dissect the characters, but also the text, sweating hours over a single word, sentence or comma. Two strong influences on this style were his childhood experiences and the later onset of his epilepsy.

Flaubert (1821-1880) was born in Rouen on the first floor of the corner apartment in the special wing of the Hôtel Dieu, the municipal hospital. His father, Achille-Cleophas was the director and chief surgeon of the institute, one of the new practitioners to emerge from the changes in the political organisation of medicine in post-revolutionary France. He was a distinguished pupil and came to the attention of Dupuytren who recommended him for the post at the Hôtel Dieu. For the first 25 years of his life Gustave lived with blood, suffering and death. The billiard room on the first floor (now a medical museum) opened out onto a ward. He also had a ringside seat for dissections. Effecting on his childhood experiences, he writes: ‘The dissecting room of the hospital gave out onto our garden. How many times my sister and I used to climb the trellis, cling to the vines, and peer curiously at the cadavers on their slabs.’

The main narrative plot of Madame Bovary depicts Emma Bovary, an overtly sentimental young woman whose unrealistic fantasies on life and love cause her to be dissatisfied with her dull, doctor husband. She has two hopeless love affairs and finally dies from a self-administered dose of arsenic. The novel, which is set in a rural doctor’s practice with her dull, doctor husband. She has two hopeless love unrealistic fantasies on life and love cause her to be dissatisfied with herself and the village. Both Charles Bovary and Hippolyte are persuaded to take part in this experiment through the force of public pressure. Charles sends to Rouen for a copy of Duval’s famous text Traité pratique du pied bot for guidance on the operation. This was Flaubert’s source for much of the technical information to describe the operation and came from his father’s library. Flaubert’s father had once, unsuccessfully, attempted to cure a girl of club-foot by encazing her deformity in a contraption of metal and wood. The book, now situated in the Flaubert Museum Hôtel Dieu, Rouen, has been underlined on page seven. ‘We have cut the Achilles tendon in order to cure the club-foot.’ The book presented a complicated array of diagnoses which confused Bovary and played some part in the operation’s dreadful outcome: ‘While he struggled with the equinus, varus and... valgus... katasterephopody...’

Bovary cuts the tendon; the boy feels no pain. Homais prepares an article outlining the operation for the local paper. Five days later the boy is in agony. Days later the foot becomes gangrenous and Canivet, a provincial surgeon, has to be sent for to amputate Hippolyte’s lower leg. Sarcastically, he lectures Homais and Charles: ‘That’s what you get from listening to the fads from Paris... we are not so clever out here, not we... We are no specialists we are practitioners, we would not dream of operating on someone who is in perfect health!’

The secondary medical education of the time left doctors like Charles Bovary not able to cope with the new idea of a classificatory and a rationalistic approach to medicine and surgery, prescribed by the medical elite. For an_Officer de Sante it was a question of knowing what to do after observing, and experience was integrated at the level of memory and repetition.

Flaubert’s literary style has been attributed to his epilepsy. In 1908 the neurologist, Pearce Bailey, presented a study of Flaubert’s epilepsy which linked his convulsions and the resulting aura to his writings. Flaubert wrote in 1853 that when he described the poisoning of Emma Bovary: ‘I had so distinctly the taste of arsenic in my mouth, was so thoroughly poisoned myself, that I vomited my whole dinner.’ Throughout the writing of Madame Bovary the author continually put himself in Emma’s place: ‘Madame Bovary, c’est moi!’ However, it is not clear that Flaubert was truly epileptic, but it is established he suffered from a nervous condition that was diagnosed as ‘hystero-epilepsy’ at the time.

His father was autocratic and domineering, not only in
his approach to medicine, but also in family matters. Despite Flaubert's lack of interest in a legal career his father insisted he attend law school rather than medical school in Paris. His disgust and boredom with the subject, combined with frustration and despair, promoted the seizure that secured his return home to his writing. The diagnosis of epilepsy allowed him to take refuge in his disease and provided the seclusion necessary for writing. Significantly, after his father's death, he had no more attacks until he was 50, when his home was occupied by the Prussians.

His descriptions of Emma's feelings in the novel are based on the then clinically accepted diagnosis of 'Hysteria', and reflects his own depression and feelings of 'ennui'. His definition of hysteria was taken from the Dictionnaire des Sciences Médicales and reflects his own depression and feelings of 'ennui'.

In his expansive psychoanalytical biography of Flaubert, the philosopher Jean Paul Sartre suggests that the tension between Gustave and his father stemmed from his refusal to allow him to follow in his footsteps to a medical career. Flaubert's breakdown could be attributed to his medical disinheritance and he gains a literary revenge on his father by portraying him in a less than favourable way as Lariviére. In his correspondence he likens himself to Lariviére and claims to 'feel at home only in analysis - in anatomy, if I may call it such'. Thus, the son succeeds to his father's position by performing, as a writer, the functions of a clinician.

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9. Flaubert, op. cit. ref. 2, 125.
11. Flaubert, op. cit. ref. 2, 125.
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14. Steegmuller, op. cit. ref. 3, 162.
15. Williams, op. cit. ref. 5, 111.
22. Sartre, op. cit. ref. 4.
When writing is introduced and begins to be used for the same purposes as the oral narrative song, when it is employed for telling stories and is widespread enough to find an audience capable of reading, this audience seeks its entertainment and instruction in books rather than in the living songs of men, and the older art gradually disappears. The adoption and use of writing systems depend primarily on their ability to preserve language and information through time and across space. But the use of a writing system for this purpose is shaped in part by the nature of the system and by the cultural practices in the society that has adopted it. These uses therefore tend to be local and specific and characteristic of a particular literate society. Clinicians often start functions such as ordering a laboratory test, requesting a consult, or filling in a problem and then find that they don’t need to complete that function for various reasons. In these scenarios, the clinicians select at the bottom of the started form. As a final outreach activity before the study sessions, HFE showed a potential mockup of an undo dialog to two clinical informaticists consulting on the Quick Study. They quickly pointed out that there are potential patient-safety risks to using this format in an EHR, where the question of what data must be written to the patient record may confuse clinicians. They also requested the addition of mockups using the word for the button returning the clinician to their partly-completed function. The function of the writer is not just to state a theme but to vivify it. The good writer doesn't write a story to illustrate a theme as does the writer of parables and fables. He writes a story to bring alive some segments (aspects) of human existence when he does so coherently, theme arises naturally out of what he has written. The plot of a story is a series (sequence) of interlinked events or incidents of which the story is composed and in which the characters are involved. The writer arranges the events ordering them as he sees fit. The events in a plot need not always involve physical movement; the movement may be psychological, revealing the changes in the psychological state of a character. Thus it may include what a character says or thinks as well as what he does.