Reading for Pleasure

All grist to the mill

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On my shelves is *The Fine Art of Reading* by David Cecil. The essay is perceptive in its analysis of art being for delight, and of critical appreciation needing common sense and uncommon sensibility, along with other qualities of comparatively less importance. This is depressing, because I am not sure how to assess whether I possess either common sense or uncommon sensibility. So I was pleased to find a little further on that, "the only test of a book's merit is the impression it makes on the reader." That, at least, gives me some freedom and no necessity to apologise for choices in reading. Moreover, Cecil is tolerant, so he will not accept any ranking of writers, or unfeeling criticisms of style, language, form, or of the climate of opinion in which a piece was written.

All should then be grist to the reader's mill. It is to mine, though it will quickly be apparent that I steer an erratic course in reading. This, of course, is its pleasure. I dip into things as the fancy takes me. It was, I believe, the dean of an Oxbridge college who said, "My undergraduates do not read books; they use them." So dictionaries, *Roget's Thesaurus*, the *Oxford Companion to English Literature*, and the *Encyclopaedia Britannica* are often in hand. They constantly illuminate and add to my pleasure. I recently read about Aristotle and Plato in the *Encyclopaedia*—very second-hand, no doubt, but good enough to be going on with until I can get to the real thing. I get much pleasure from contemplating what is to come in reading, for the mine is inexhaustible. A fancy will take me, the new book will be bought and carried home with excitement.

I do not much like borrowing from libraries, for books become precious possessions, their spines recalling contents in which pleasure or instruction has been had. But not long ago I borrowed Osler's *The Evolution of Modern Medicine*, published in 1921. This roams mainly round the ancient classical world in the author's discursive scholarly way. He shows pride in the achievements of medicine, without the slightest glimpse of the explosion of knowledge to come so soon. In a short time his has become an antique world, and ours will too. It prompts the question, What are the assumptions to which we cling tenaciously and which will soon be discarded as of no relevance? Reading history of any kind is sobering and should bring tolerance of the foibles of the past and our own. It was this book which led me to Aristotle and Plato, and then on again to *The Evolution of Clinical Methods in Medicine* by Kenneth D Keele (1963). How slowly medicine progresses: it took aeons for clinical history, pulse, and temperature to oust astrology and uroscopy. And a similar story is taken up also by Stanley J Reiser in *Medicine and the Reign of Technology* (1978).

From phase to phase

I must confess to the strange aberration of liking anatomy. About a year ago I bought the latest Gray's (35th edition). This really is an astonishing work, now the product of many hands. I remember my introduction to it at Cambridge, and, though daunting, it was like first looking into Chapman's *Homer*. Some of the old favourite illustrations are still there after all these years, but there is now fantastic beauty in the three-dimensional representations of histology and cytology, and in the electron microscopy photographs. I have read chunks of neurology, myology, and arthrology and have boned up on the anatomy of the head, neck, and limbs. While watching television cricket, athletics, swimming, and football I see the muscle groups in action, try to visualise what is happening in the joints, and pale in contemplation of the myriad nerve impulses streaming up and down the central and peripheral nervous systems. How does it all happen, and come together in superb rhythmic performance? Anatomy is wondrous and its language has become lucid, economical, and terse. I am sad that it has lost its savour for so many doctors and students. Being in an anatomical phase, I have pulled out once again Grant's *Method of Anatomy* with its marvellously simple yet accurate line drawings, and, of course, his *Atlas of Anatomy*.

I am also in a surgical phase and keep dipping into the latest edition of *Bailey and Love*. For medicine, I am forever dipping into the 1977 edition of the *Merck Manual*. Almost never do these books let me down in what I want to know there and then. It might be argued that this kind of reading is not pleasure but work. I would maintain, however, that work is pleasurable, even if hard, and that it is labour which is irksome toil.

Joseph Kessel died recently. His obituary made me pull down his remarkable *Belle de Jour*, the story of a surgeon's wife, who loves her husband yet finds herself irresistibly drawn to the pleasures of prostitution, but not for the money. This leads her to deceptions and intrigues and on to tragedy. It is a memorable portrait of Séverine. For contrast, I went on to Xaviera Hollander's *The Happy Hooker*, a light-hearted rollicking romp through the pleasures of sex for money. Sexual themes come in great variety and on many planes of taste, but these two certainly entertained me. And after Andrew Smith's article in this series, I have ordered *Jake's Thing*. I intend to return again to *Madame Bovary* and *La Dame aux Camélias* for comparison with Séverine, so well remembered.

Well-produced editions

I had to revise a lecture on the Brontës so read Mrs Gaskell's *Life of Charlotte Brontë*, which is the source book on that family and their scarcely credible lives. Mine is the Folio Society edition, which reminds me of the importance of having well-produced books, preferably in fine editions, to heighten pleasure. From that society I have recently received Dante's *The Divine Comedy*, which I have not previously read. I learn from reviews that it is excellently translated and its sweep of imagination is

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brehtaking, while the editorial notes at the back are an education in classical allegory, mythology, and Italian thought at the turn of the thirteenth century.

And, for England in the sixteenth century, I have been amused by Burton's *The Anatomy of Melancholy*. I bought it for some understanding of the medical beliefs of the time, and have not been disappointed. It was first published in 1621—and does not even mention William Harvey. The time lag in realising the potential and importance of new ideas is shown again—yet every age, perhaps especially our own, believes itself to be one of enlightenment. The lag shows itself, too, in Jeanne Peterson's *The Medical Profession in Mid-Victorian London*, which is a scholarly, well-written work dealing with a critical stage in the development of medicine. The effects of that era are still discernible. That may be seen in Mackenzie's *Power and Responsibility in Health Care*, with its subtitle of "The National Health Service as a political institution." The two books, so different in style, show something of the gambit and present end-game in medicine, and both are salutary for the too impatient.

Bedside reading

For bedside reading I have recently had Ed McBain's *Goldilocks*, but, though enjoyable, I did not like it as much as his 87th Precinct stories. There seems to be a propensity now for longer novels, and I have enjoyed Colleen McCullough's *The Thorn Birds*—especially because much of it is set in Australia. In the large category is also M M Kaye's *The Far Pavilions*, set in India in the nineteenth century amid the Afghan wars. Each book has the perennial, yet unalloyed, plot of lovers kept apart by circumstance. In one, this is the celibacy imposed on a Roman Catholic priest and, in the other, the customs inseparable from being an Indian princess. In one book the love is requited, and in the other not. Both are excellent tales written well and with due tension so that, despite their length,

you want to find out what happens next and have a sense of loss when it is finished.

The craft of writing is fascinating and this has taken me to Arthur Koestler's *The Act of Creation*, a tour de force showing that the tensions in different planes of thought are creative. He shows this to be almost universal, and has a wealth of illustration from humour, writing, science, and the arts. On the lesser side of the craft, I have had amusement, pleasure, and instruction from Philip Howard's *Weasel Words*. This is a series of articles on present vogue words, which substitute jargon for thought about meaning. I have tried to avoid them all here—though the thought throws me into a "geriatric" "dilemma" about "confrontation" at this "moment in time" with "lovely" people who do not accept that my present "module" and "matrix" are suitable, and that my treatment of it is "simplicistic."

I see that now I am simultaneously reading Austin and Short's *Evolution of Reproduction*, *The Code of the Woosters*, Koestler's *The Case of the Midwife Toad*, and Trimmer's *Basic Sexual Medicine*. And others wait hard behind. But that is the pleasure of reading. You can talk to whom you like, when you like, and on whatever subject you choose, and you can always shut him up when you have had enough. At the beginning of his article on "Books and Men" in *Aequanimitas and other addresses* Osler quotes Richard de Bury on books—"These are the masters that instruct us without rod and ferrule, without words of anger, without payment of money or clothing. Should ye approach them, they are not asleep; if ye seek to question them, they do not hide themselves; should ye err they do not chide; and should ye show ignorance, they know not how to laugh. O Books! ye alone are free and liberal. Ye give to all that seek, and set free all that serve you zealously." There is no more to be said. You need no licence to be foot-loose and fancy-free in reading, though perhaps one should be circumspect about writing on one's addiction. But be comforted. Few practise what others preach, or even follow their own best advice to themselves.

STRANGE ENCOUNTERS

Post mortem—photographers

Twice, unauthorised photographers have been spotted in the PM room. The first was a free-lance self-styled "journalist" who had bribed two medical students to smuggle him in. He fainted before he could take the stills he wanted for an assignment on vivisection and the NHS. The second was an experienced professional cameraman. He was introduced to the PM room by a junior member of the medical staff of the hospital and, disguised as a registrar, he made several familiarisation visits before the day on which he brought his camera, a small technological marvel with a motorised zoom lens.

Working at the periphery of the group of onlookers, with the available light, the cameraman exposed several hundred feet of film during a PM, the unobtrusive sound of the camera covered by the various powered accoutrements of the PM room and the constantly running water. If he had not attracted attention to himself when the PM was over by lighting a cigarette, where no one smoked, he might have got away with it. Such was his skill that he had, without opportunity for a trial take, produced an effective and comprehensive record of the proceedings.

The cameraman's bosses claimed that the action of the staff of the department in taking the camera from him was improper and technically an assault, that the instrument had been damaged beyond repair, and that the film had been purloined. They demanded compensation. In reply it was pointed out, among other things, that the camera had been returned to them soon after the incident through an independent intermediary, who certified it to be in perfect order. They conceded this point but repeated their demand for return of the film and for compensation for its detention.

Neither claim was pressed when we replied that there would in no circumstances be any out-of-court settlement. Instead, the company changed its approach. They induced a non-medical member of the hospital's board to intercede with the pathology department

for the film to be returned to them, in the national interest, so that they could prepare an edited version for inclusion in one of a series of "ethical documentaries" that would be sold abroad to boost our export trade. The time had come, we decided, when it was best that the film, having no value as a record of a PM, be destroyed: this was done (not without consideration of expert advice on our right to do so).

Post mortem—British

In general, British producers are more reasonable, and pleasanter to deal with, than their foreign competitors, who tend to arrogance, and who seem to overestimate the corruptibility of those who work in British hospitals. Frustrated in his attempt to take over a PM room, the foreigner is liable to say that if that is how we feel about it he can always get the facilities in his own country. Why, then, does he put himself to the trouble and expense of bringing his team to Britain at all? There are even shinier, and even tattier, PM rooms in other countries, perhaps not excluding his own.

Yet it seems that a genuine British PM room is the preferred location for filming a mortuary episode in an otherwise mainly cubicular spy spoof ("Which side will recover the nuclear-powered radio-operated auto-coding integral chip-recorder before it self-destructs at the pre-set interval after the death of the double double agent into whose brain it was grafted?") or a flic flick ("Will the bent orthoped get away as the rival mobs shoot it out over the incompletely dissected body of the crooked lawyer who secretly converted their loot into solid platinum artificial femurs, on which, surgically implanted, he planned to decamp with the oestrous Meg Alomast to a private Caribbean island? The orthoped had kept the platinum prostheses, having implanted leaden ones instead; the lawyer died of plumbism").—WILL MACREDIE.