

## Three Generations in the House of God

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An amusing throwback. A disturbing relic of a time when Doctor was God and patient was at his mercy. A tragic account of the breaking of an idealistic young doctor. Whatever your impression, *The House of God* has been read by generations of medical students and still circulates through our bookshelves, our book clubs, and even our lectures. My first exposure to *The House of God* was in a first-year lecture on professionalism, in which we were taught about inappropriate language used to describe patients; such words as “gomer” and “goombah”.

The book continued to pop up over the next year, always accompanied by an expression of strong feelings, and by the time I had taken on the task of organizing the student book club at the beginning of my second year, I knew it would be our first choice. Since I was curious about how my thoughts on the book would differ from those of medical students from other generations, I decided to interview two physicians - one, a female psychiatrist who graduated 18 years ago, the other a male cardiac surgeon who graduated from medical school 38 years ago - to gain a sense of what they had thought while reading it for the first time. Here, I will present my reflections on *The House of God*, followed by the memories of practicing physicians who read the book before me.

As I begin reading *The House of God*, I am immediately shocked by the rawness of emotion, the pain, anger, and betrayal expressed by Roy Basch as he reflects on his year as an intern. Ensnared in the safety of a rented villa a world away from the halls of the hospital, Roy still can't seem to get away from the horrors he experienced, since “what had happened at the House of God was fierce, and [he] had been hurt, bad” (Shem 5).

The sympathy I immediately feel for Roy as he describes his initiation into the world of modern medicine becomes my pervading response through most of the novel, as Roy recounts how his humanity is replaced with cruelty by the forces of The House. At first, I am troubled by the callousness of the interns as they “BUFF” (get just well enough to discharge) and “TURF” (get rid of) the “gomers” from hospital bed to deathbed. I feel that their behaviour is unethical, and that their “Laws” are cruel.

As I am shocked by the rawness of the pain, I am shocked by the rawness of the sex, and the portrayal of women in *The House of God*. Roy welcomes us into his world with a medical-ese description of his girlfriend Berry, lying naked in the sun, her breasts suspended by taut Cooper's ligaments, her symphysis pubis shaping her Mound of Venus (3). As I continue to read, this first passage will turn out to seem almost naïve, as Roy and his friends use sex - rough, fast, and base - to reaffirm their connection to life and the living. “There, after all the sorting had been done, lay the closest representation, in living terms, of death. (...) And there, also, lay the closest representation, in living terms, of sex. I could not fail to notice. I did not pretend to understand. Amidst the dying, these nurses were flaunting life” (299). In stark contrast to the hyper-sexualized nurses stands the resident Jo, an aggressive, asexual, academic type. “A short, trim woman with clipped black hair, a jutting jaw, and dark circles under her eyes, she wore a white skirt and a white jacket, and in a special holster fastened to her belt was a two-inch-thick black ring notebook filled with her own transcription of the three-thousand page Principles of Internal Medicine.” In essence, these are the two archetypal representations of women in *The House of God*: the mother as embodied by the nurses, who nurture the interns with their bodies, and the Amazon, as embodied by Jo, who fights to stake a claim in this male dominated world with her gender-neutral name, cropped hair, strong jaw, and holster. The only multi-dimensional woman in the novel is Berry, who exists outside the world of medicine. A strong yet feminine woman, she pursues professional studies, maintains a romantic relationship, supports Roy psychologically throughout his internship and in the end contributes to his “rescue.”

Indeed, of all the characters in *The House of God* I relate most to Berry. A student of psychology, she repeatedly attempts to bring Roy back from the alternate universe of The House. When Berry points out Roy's insensitivity towards his patients' suffering, “[t]hey make me sad, but the way you treat them, making fun of them, like they were animals, is sick. You guys are sick” (266). I wonder, is this what will happen to me? I reflect on my limited clinical experiences; as a junior medical student at Dalhousie University, my exposure

to the clinical environment began early in training, with a half-day a week “elective” in the specialty of my choice. I am comforted by the fact that thirty-four years later, it seems as though the hospital is a different place. There are no interns, there are only residents. And those residents that I meet seem to be smarter, more experienced, older versions of the medical students in my classes, with their humanity intact. They treat patients with respect and kindness, and even in the moments when they express negative emotions, these are more often about being busy or tired or frustrated with an attending or administrators or bureaucracy, and rarely about the patients themselves.

To gain some alternative perspectives on the issues that came up for me as I read *The House of God*, I met with Drs. Lara Hazelton and John Sullivan in December 2011. I asked them not to re-read the book, since I wanted to tap into the memories of a student, not the fresh interpretations of an experienced physician. I wanted to know what had lead each of them to read the book in the first place? At what point in their training had they encountered *The House of God*? What had been their first impressions and what were their most vivid memories? Could they compare the role of women and sexuality as presented in the novel to their experiences? And finally, did they believe the book held any relevance for medical students today?

Dr. Lara Hazelton read *The House of God* in her third year of medical school in 1993, after many other students she knew had read and recommended it. She was in clerkship and, was becoming acculturated but “wasn’t as burned out” as she would later be in her first year of psychiatry residency. She remembers that on one hand, she saw the book as distasteful and didn’t like what it represented. At the same time, she identified with the cynical pose and tone of the novel, relating this process of becoming more cynical and losing one’s naïveté to the acculturation of a medical student to the clinical world.

Like the interns at *The House of God*, Dr. Hazelton recalls that clerks in 1993 had much less support than they do now. “There was so much pressure to handle stuff on your own without staff and resident...We were so scared, overworked, overtired, and unhappy that we started to adopt some of the [same] patient hating and resentment.” She recalls that her impression of the attitudes of residents in surgery and internal medicine,

seemingly the most difficult programs, were most aligned with those of Roy Basch and his friends.

When I asked Dr. Hazelton about her opinion on *The House of God*’s portrayal of women in medicine, she recounted thinking that the role of the female internal medicine resident Jo was dated. In 1994, the year she finished medical school, one third of the graduating students would be female. Having come to medicine from engineering, where there were even fewer women, Dr. Hazelton didn’t recall feeling awkward about the ratio of females in her class. What she did remember was feeling that unlike her female classmates, the male students didn’t make career choices based on family considerations. “There was a sense that the women who chose internal medicine or surgery were more intense.” Regarding the representation of sexuality in *The House of God*, Dr. Hazelton didn’t remember the hospital as a hot-bed of seduction, “I didn’t have the sense that people were having indiscriminate sex,” she told me.

Finally, when I asked Dr. Hazelton whether she thought *The House of God* was relevant for my generation of medical students, she had mixed feelings. She observed that there are still pockets of medicine where the patient-hating culture hasn’t changed, noting the emergency room as an example, “[t]urfing is still going on; in fact, it may be even worse since there are fewer resources.” She spoke of physicians going to great lengths to protect these scarce resources by “gatekeeping” against more demanding or difficult patients. On the other hand, she noted that many of the stresses that most affected the interns in those days have been addressed. Clerk and resident hours have been reduced, and post-call days have been implemented. There is more direct support from staff, and student associations actively lobby for improved work conditions.

Dr. Hazelton’s perspective on the cynical tone of the novel has also changed since those early years. She has worked as a psychiatrist for 13 years, and has been writing medical humour since 1997. Today, she writes a fictitious medical advice column called Dr. Lifestyle for *The Medical Post*, in which she makes a concerted effort to never make fun of patients. Instead, she makes fun of herself or the fictitious doctor asking for advice. She notes that although humour can be a good coping mechanism, *The House of God* shows a bad example of the use of humour, “where all the negative events and emotions experienced by the medical staff are projected onto the patient.”

*The House of God* was published in 1978, when Dr. John Sullivan was a first year resident. Unlike the younger Dr. Hazelton, who was a member of the first class to match directly to residency programs, Dr. Sullivan completed an internship year after graduating from medical school, and had already spent a year in family practice in Cape Breton when he decided to pursue a surgery residency. "In those days you went from internship directly into practice," Dr. Sullivan told me, "so internship had a finality to it, a coming to an end of things. I read it in residency, which was the beginning of a fun time for me."

When I asked Dr. Sullivan about his first impressions of the novel, his face changed to a half-smile as he remembered those days. "Residency was not stressful or particularly demanding, and I was sad to see it go," he said. "I loved it when it got dark out. The hospital was going to wake up and we were going to have fun." The characters – Roy Basch the sensitive intern, Fat Man the ambitious resident – Dr. Sullivan remembers as accurate descriptions of the people he worked with. He also remembers feeling sympathy towards his mentors, the house staff, whose lives he recounts the book describing as more difficult and lonely than the students'. Dr. Sullivan explained how in those days, the services were run by interns and residents, who consequently had a greater sense of power than they do today. "The docs and nurses ran the show," he told me, "and we were the bosses. We had more control than residents do now."

In those days too, few women were enrolled in medical school. Only nine of 81 graduates in his class were female, and even they "had to give up all semblance of femininity." Most of the women in the hospital were nurses, and it was a sexually charged environment. Whereas today, many of the trainees Dr. Sullivan works with are female and most are married, "in those days, the hospital was the largest concentration of single eligible females in the province," Dr. Sullivan recalls, "and I was living the glamorous life of a surgeon." Since residents and interns practically lived in the hospital, they had few opportunities to maintain an outside life and so social events (both formal and informal) were organized around the hospital.

The House of God "was one of the first hospitals to offer free marital counseling, and when that failed, to encourage divorce. On average, during their stay, about eighty percent of the married medically qualified Sons and Daughters would make use of this suggestion, separate from their spouses and take up with some bombshell..." (15) This sentiment resonated with

Dr. Sullivan, since his reading of *The House of God* coincided with the end of his marriage. He explained, "I had been doing what I wanted to do when I wanted to do it – and I thrived on my busy life. My wife wanted a life outside of that." He continued, "this was par for the course for males in the book – and among my colleagues. The wives of the guys in the group I trained with were very unhappy."

Not only did Dr. Sullivan feel that *The House of God* painted an accurate description of the medical students and staff, but he also remembers relating to Roy Basch's feeling towards the patients. "We had two residents to 70 to 100 beds," he recounts, "and we had one in two call, with no post-call day off. We were up all night, and worked all day. We had to do all our own admissions for the next day (since there were no same day surgeries) at night after our cases were finished." He remembers feeling overwhelmed by the sheer number of patients, and describes how patients were depersonalized because making them into a case rather than a patient, "was the only way we could deal with the load." Dr. Sullivan is very careful to explain that now, more than thirty years in practice, he feels just the opposite, "I work hard to be very patient-centred in my focus, and I feel that it is very important to establish a personal relationship," he says, "it is a lesson you learn over the years."

As I made my way through *The House of God*, my initial harsh judgment of Roy and his peers was softened as he recounted experiences that made me cringe and cry and shake my head. I began to see the morbid humour that Roy sees, and I even began to think of the "Laws of the House of God" as reasonable given his situation. Just as he became inculcated into the world of "professional nonchalance" (327), I began to understand the need for the distance and protective layer of coldness he put on. Like Roy, "[n]o longer did I think it crazy or cruel to call these sad ones gomers. Yet part of me thought it was both crazy and cruel that I no longer thought so" (229). My ability to identify with Roy reached its apex when Potts, a fellow intern who had been tortured by guilt and tormented by his chief resident for failing to save a terminally ill patient, jumped from a hospital window. Potts' death was not acknowledged and the remaining interns continued on with their lives, trying to forget Potts and trying to avoid parking on the stain made by his remains. This event resulted in the first crack in Roy's House of God armour, and as the crack deepened and Roy's humanity began to reassert itself, my rationalization now turned to ambivalence. I didn't know how to feel about what had happened to Roy. Had my initial judgment been the product of inexperience

and naïveté? Should I be ashamed to have rationalized his cruelty as situationally appropriate? Just as feelings of ambivalence began to creep into my interpretation of the story, Roy began to allow himself to feel again, and to reflect on the ambiguities of his chosen profession, “It’s an incredible paradox that being a doctor is so degrading and yet is so valued by society. In any community, the most respected group are doctors” (346). In the end, when I closed the back cover of *The House of God*, the only thing that I was sure of was that what happened to Roy was a tragedy, and that he was lucky to have come out alive.

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### References

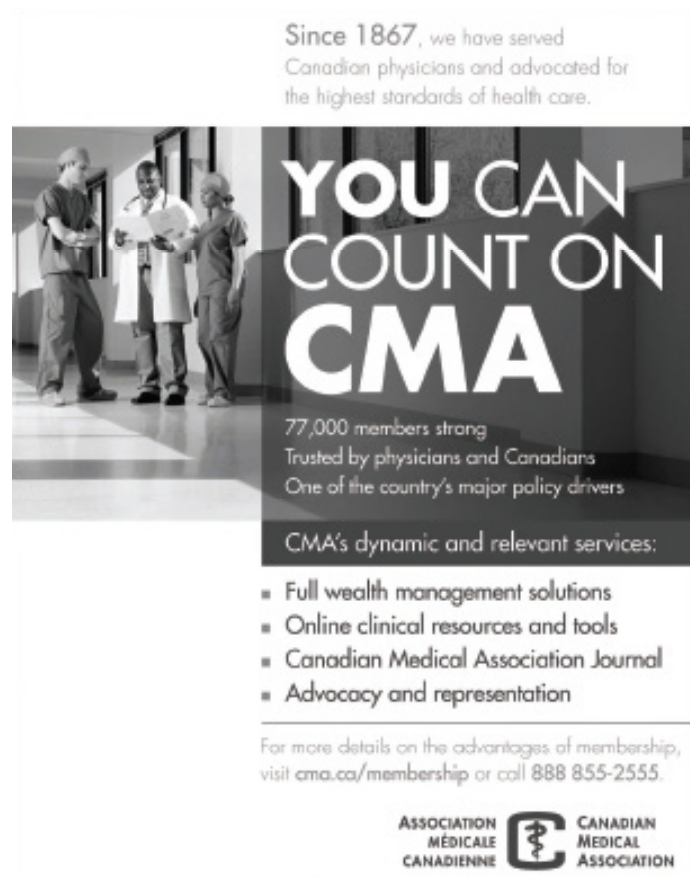
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