Margaret Edson’s Pulitzer Prize-winning play, *Wit* [1], engages audiences in Dr. Vivian Bearing’s experience and transition from prominent professor of seventeenth-century poetry to victim of terminal metastatic ovarian cancer, prize patient in experimental chemotherapeutic treatment, and, finally, to her death. By combining her knowledge of the procedures and personnel of the modern research hospital with the techniques of metaphysical poetry, Edson reveals, with candor and humor, unexpected parallels between the literary scholar and the medical professionals who treat her. *Wit* shows that, despite surface disparities, both disciplines use language to inhibit rather than promote communication, both avoid meaningful personal interaction, and both reduce the subject of research to object. Thus *Wit* challenges teachers of literature and medical professionals alike to assess their efficacy in conveying to students and patients the “simple human truths” that dignify life and death.

Dr. Vivian Bearing, a distinguished professor of seventeenth-century English poetry, specifically John Donne’s “Holy Sonnets,” learns from Dr. Harvey Kelekian, an equally distinguished oncologist, that she is suffering from stage-4 metastatic ovarian cancer. Edson draws on her own experience as an aide on an oncology/HIV-AIDS ward to lead her audience through Vivian’s [2] downward spiral from diagnosis, through an experimental treatment for primary-site ovarian cancer—a protocol overseen by Dr. Jason Posner, Kelekian’s oncology fellow and Vivian’s former student—and, finally, to death. The unlikely combination of the realities of life and death in a modern research hospital and the paraphernalia of metaphysical poetry—religious and philosophic subject matter, paradox, witty wordplay, and far-fetched metaphors—reveals similarities between them, and the play becomes, as a result, a compelling and instructive experience for teachers of literature and medical professionals alike.

In true English-professor mode Vivian introduces the audience to the lexicon of metaphysical poetry in the play’s first scene, remarking on the “*ironic significance*” of the inevitable hospital greeting, “Hi, how are you feeling today?” Wordplay helps Vivian deflect not only the “degrading” indignity of undergoing a pelvic exam at the hands of a former student [3], but also the desolation she feels when she is placed in isolation:
I am not in isolation because I have cancer, because I have a tumor the size of a grapefruit. No. I am in isolation because I am being treated for cancer. My treatment imperils my health. Herein lies the paradox. John Donne would revel in it. I would revel in it, if he wrote a poem about it [4].

Edson’s apt implementation of metaphysical devices provides both humor and clarity as Vivian works out the onerous philosophical puzzle, not of a poem, but of her own life and death.

As the title of the play suggests, though, it is metaphysical wit that gives the play, like Donne’s poetry, its “salient characteristic.” Prone on a cold metal stretcher for a CT scan, Vivian explains the significance of Donne’s “Itchy outbreaks of far-fetched wit”: “wit provides an invaluable exercise for sharpening the mental faculties, for stimulating the flash of comprehension that can only follow hours of exacting and seemingly pointless scrutiny” [5]. The monotony of weeks of inpatient chemotherapy gives Vivian more than enough hours for scrutiny, but “the flash[es] of comprehension” become increasingly revelatory as she encounters—and encounters herself in—the medical professionals who control her diminished existence.

Words, the stock-in-trade of the literary scholar, have for a lifetime been Vivian’s tools for interpreting experience, for expanding the boundaries of awareness and comprehension—and for achieving prominence and power. She had become “a scholar of distinction” [6], eventually making “an immeasurable contribution to the discipline of English literature” [7]. When reduced to anonymous patient, she uses recitals of her accomplishments as antidotes to the depersonalization and dehumanization she endures at the hands of her caregivers. Vivian informs the audience, as a technician grudgingly searches for a wheelchair for her, that her dissertation was revised for publication in “a very prestigious venue” and that her book “remains an immense success.” In it, she remarks, she “discuss[es] every word in exquisite detail” [8]. And in her current state as cancer victim, “acquisition of vocabulary” has become her “only defense”: “I want to know what the doctors mean when they...anatomize me. And I will grant that in this particular field of endeavor they possess a more potent arsenal of terminology than I” [9].

Kelekian fires quite a volley of high-caliber medical jargon at Vivian during their first consultation—“invasive epithelial carcinoma,” “target specificity,” “antineoplastic”—as Vivian struggles to marshal analogic and analytical defenses from her own discipline: “By cancer nature’s changing course untrimmed” [10]; “Anti: against. Neo: new. Plastic, to mold. Shaping. Antineoplastic. Against new shaping” [11]. It becomes evident, however, as Vivian summons reminders of her former professional prowess, that she, like her doctor, has used language, as Madeline Keaveney points out, not to inform but to obfuscate [12]. If her students were here, she thinks as she marks the tedious hours in
isolation, “if I were lecturing: How I would perplex them! I could work my students into a frenzy. Every ambiguity, every shifting awareness. I could draw so much from the poems.... I could be so powerful” [13]. Vivian’s interactions with students, like Kelekian’s with patients, have been what Daniel P. Sulmasy calls “pretexts in which to display personal prowess and control” [14] through the deployment of discipline-specific language.

Just as they are counterparts in their use of language as inhibitor, not facilitator, of communication, medical and literary professionals are counterparts also, as Wit demonstrates, in their “contact inhibition.” Unlike the cancer cells Jason admires for their ability to “pile up, just keep replicating forever,” the doctors and their patient alike avoid the kind of “tissue culture” [15] that might promote the healthy growth of human interaction and healing. Though he observes the obligatory clinical niceties, Kelekian ignores any hint of commonality between himself and Vivian. He makes no response to her comment that she is a professor “like yourself” [16]; he cuts short a brief moment of conspiratorial collegiality—he and Vivian laugh as his oncology fellows fail to observe her bald head—with a brusque, “Excellent. Keep pushing the fluids” [17]; he dismisses the gravity of being placed in isolation by advising Vivian to “think of it as a vacation” [18].

Kelekian is, however, positively genial compared to Jason, who consistently chafes under “crazy clinical rule[s]” like greeting a patient when collecting data in an isolation unit: “(Remem)bering) Oh, Jeez. Clinical. Professor Bearing. How are you feeling today?” [4]. He informs Vivian that his contact with patients is an unwelcome distraction from his cancer research:

Jason: Wait till I get a lab of my own. If I can survive this...fellowship.
Vivian: The part with the human beings.
Jason: Everybody’s got to go through it. All the great researchers.... Like we have to hold hands to discuss creatinine clearance. Just cut the crap, I say [19].

Jason’s blunt admission of his distaste for human encounters will provide one of the flashes of comprehension so important in Vivian’s eventual enlightenment.

Vivian’s own contact inhibition has been a lifelong habit, as we see in the flashback to her student days with renowned Donne scholar Professor Evelyn Ashford. Seizing on Ashford’s explanation of proper punctuation of the last line of Donne’s “Death, Be Not Proud”—“And death shall be no more, comma, Death thou shalt die”—young Vivian exclaims that she will go back to the library, do more research, rewrite the paper. The wiser older scholar attempts to explain that “It is not wit, Miss Bearing. It is truth. The paper’s not the point.” She urges Vivian to engage with the poem as more than an intellectual puzzle: “Use your intelligence. Don’t go back to the library. Go out. Enjoy
yourself with your friends.” But Vivian can’t see the connection between “uncompromising scholarly standards” and “simple human truth” and so, walking past the other students chatting on the lawn, she goes back to the library [20]. As uneasy as Jason with “the fellowship,” she enters the hospital without family, without friends, visited only in a morphine dream by Professor Ashford, the isolation unit an apt metaphor for the 50 years of her life.

It is, however, in her reduction of subject of study to object—the human condition to an interesting locus of an intellectual conundrum—that Vivian most resembles her medical caretakers. Shortly after she’s admitted for her first cycle of chemotherapy and as she is being scrutinized by one technician after another, Vivian remarks, “Now I know how a poem feels” [21]. Her growing awareness that she has become no more than a series of signs, an object of “obsessively detailed examination” [17], commences with Grand Rounds. As Jason bares her abdomen to the team of oncology fellows and points to the primary cancerous site and areas of suspected metastases, Vivian muses that Grand Rounds in the hospital resembles graduate seminars at the university: “With one important difference: In Grand Rounds, they read me like a book. Once I did the teaching, now I am taught” [22].

Vivian’s reduction from active interpreter to passive object of scrutiny is vividly enacted in a flashback to her life as preeminent literary scholar, a scene that occurs precisely in the middle of the play. In it, Vivian, clad in hospital gowns and baseball cap, emphatically whacks her pointer against a screen as Donne’s “If Poisonous Mineralls” is projected onto it—and onto Vivian, as she and the poem become one text. Not only does this scene furnish a visual image of patient as text, it also reveals the extent to which Vivian’s obsession with poetry as intellectual puzzle has subsumed her interest in the “simple human truths” a carefully scrutinized text can reveal. Her lecture to her students emphasizes the way Donne’s “vigorous intellect” is able to turn “eternal damnation into an intellectual game” but ignores almost completely “the larger aspects of the human experience,” the tearful remorse his “sinnes black memorie” elicits in the speaker and his fervent trust in God’s unfailing mercy [23].

The full recognition of herself as “the white piece of paper that bears the little black marks” comes in “my play’s last scene” [24] as Vivian sits weakly in a wheelchair. The author of painstakingly researched and widely heralded literary criticism understands all too well that cancer has made her little more than the object of a study that will bring celebrity status to Kelekian and Jason when the results of the study are published. But, she reminds herself, the article “will not be about me, it will be about my ovaries.... What we have come to think of as me is... just the dust jacket” [25].

Acknowledging her decline from author to text readies Vivian for the flash of recognition that follows the “fellowship” conversation with Jason. When she hesitantly asks him,
“And what do you say when a patient is...apprehensive...frightened?” Jason assumes she’s suffering from dementia and abruptly halts the conversation with a reminder to “Keep pushing the fluids.” Once proud of having taught Jason, Vivian now perceives with dismay what he learned from her: “So. The young doctor, like the senior scholar, prefers research to humanity.” Wishing “the young doctor would take more interest in personal contact,” Vivian begins to reconstruct the times she denied her students “the touch of human kindness she now seeks” [26]. She recalls her rigid refusal to grant an extension on a paper to a student whose grandmother had died, her scathing rebuke to the student who was unable to “characterize the animating force” of a Donne sonnet. “Did I say (tenderly) ‘You are nineteen years old. You are so young. You don’t know a sonnet from a steak sandwich.’ By no means” [27]. Earlier Vivian has noted that an eight-month course of cancer treatment is “highly educational”: she has learned, she says, to suffer [28]. Ironically, in the process of dying she learns what her name, Vivian, might have meant: alive.

The “touch of human kindness” and Vivian’s final flash of comprehension come thanks to Susie Monahan, Vivian’s primary care nurse. Bringing Vivian a popsicle at four in the morning to soothe her tormented GI tract, Susie explains “before Kelekian and Jason talk to you” about the option to be “DNR”—to put in place a “do not resuscitate” order [29]. When Vivian reveals that she knows the experimental treatment has had no effect on the cancer and that she has no wish to be revived once her heart stops, Susie promises to take care of Vivian to the very end. Susie, who never studied poetry and whose brain, Vivian thinks, is as dull as her own has become, teaches Vivian that “simplicity” and “kindness,” not “verbal swordplay” or “detailed scholarly analysis,” are called for when one confronts life and death, not as an intriguing abstraction in the text of a poem, but as “my life and my death” [30].

And it is Susie who rescues Vivian from final indignities at the hands of the “medical engineers” [31] to whom she is merely research. Jason, coming to check Vivian’s intake/output record, notices that her kidneys have failed and snatches up the phone to “CALL A CODE!” As a hall loudspeaker drones, “Code Blue, room 707,” Susie rushes into the room:

Susie: WHAT ARE YOU DOING?
Jason: A GODDAMN CODE. GET OVER HERE!
Susie: SHE’S DNR! (She grabs him.)
Jason: (He pushes her away.) She’s RESEARCH!

Susie desperately attempts to cancel the code, but the code team pours in, flings Vivian’s inert body up to insert a board underneath, attaches a respirator, prepares the defibrillator, and administers a jolting shock. Susie thrusts the chart with Kelekian’s DNR order in front of the code team head, who, intent upon resuscitating, shouts, “Hit her!”
and “Vivian’s body arches and bounces back down.” Jason, crouching on the floor where Susie has flung him, howls, “I MADE A MISTAKE!” and the code team at last pays attention to the order in Susie’s hand: “Code team head: (Reading) Do Not Resuscitate. Kelekian. Shit.” As Jason whimpers, “Oh, God. Oh, God,” Susie pushes the code team away from Vivian’s bed. They gather their equipment and leave the room, muttering, “It’s a doctor fuck-up. What is he, a resident?” [32].

During this scene of arrogant intervention and technical overkill, Vivian steps out of the bed, slips off the baseball cap, hospital gowns, and bracelet, and moves slowly and attentively toward a light. In this final resurrection tableau, “naked and beautiful,” she reaches for the light. Enlightened—free of disease, of modern medicine’s research protocols, and of her own isolating cerebration—she painlessly traverses the brief pause, the comma, between life and death. But because Vivian’s apotheosis is accompanied by Jason’s profane prayer, Wit leaves its audience with another puzzle: Will the young doctor have the wit to comprehend, as the senior scholar does, that “the paper is not the point,” that the proper object of all research is to discover and honor the human truths inherent in every text and every patient?

References

2. I am using Dr. Vivian Bearing’s given name throughout this paper. It is noteworthy that the play’s medical professionals routinely omit her title when addressing her, using “Ms. Bearing” or, at best, “Professor Bearing.” Vivian is frequently reminded of the extent to which her identity is of no interest to the hospital’s medical personnel. When one technician queries, “Doctor?” Vivian replies, “Yes, I have a PhD,” but is quickly reminded that the doctor of consequence is “Your doctor.” Edson, 16.
3. Edson, 32.
4. Edson, 47.
7. Edson, 17.
9. Edson, 43-44.
10. A deliberate pun involving the words of line 8 of Shakespeare’s Sonnet 18: “By chance or nature’s changing course untrimmed” (italics mine).
15. Edson, 56.
17. Edson, 40.
18. Edson, 46.
19. Edson, 57.
21. Edson, 16.
22. Edson, 37.
23. Edson, 48-49.
27. Edson, 59.
30. Edson, 69.
32. Edson, 84-85.

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ISSN 2376-6980