Wit

[Excerpt from the play]

Margaret Edson

This scene occurs toward the end of the play when Vivian Bearing, a noted scholar of the poetry of John Donne, is dying of ovarian cancer. Her former professor Evelyn Ashford has come to visit her.

(Professor E.M. ASHFORD, *now eighty, enters.*)
E.M.: Vivian? Vivian? It's Evelyn. Vivian?
VIVIAN: (*Waking, slurred*) Oh, God. (*Surprised*) Professor Ashford. Oh, God.
E.M.: I'm in town visiting my great grandson, who is celebrating his fifth birthday. I went to see you at your office, and they directed me here… (She lays her jacket, scarf, and parcel on the bed) I have been walking all over town. I had forgotten how early it gets chilly here.
VIVIAN: (*Weakly*) I feel so bad.
E.M.: I know you do. I can see. (VIVIAN *cries.*) Oh, dear, there, there. There, there. (VIVIAN *cries more, letting the tears flow.*) Vivian, Vivian.
(E.M. *looks toward the hall, then furtively slips off her shoes and swings up on the bed. She puts her arm around* VIVIAN.) There, there. There, there, Vivian. (*Silence*)
It's a windy day. (*Silence*)
Don't worry, dear. (*Silence*)
Let's see. Shall I recite to you? Would you like that? I'll recite something by Donne.
VIVIAN: (*Moaning*) Noooooooo.
E.M.: Very well. (*Silence*) Hmmm. (*Silence*) Little Jeffrey is very sweet. Gets into everything.

(*Silence.* E.M. *takes a children's book out of the paper bag and begins reading. Vivian nestles in, drifting in and out of sleep*)
Let's see. *The Runaway Bunny.* By Margaret Wise Brown. Pictures by Clement Hurd. Copyright 1942. First Harper Trophy Edition, 1972.
Now then.
Once there was a little bunny who wanted to run away.
So he said to his mother, "I am running away."
"If you run away," said his mother, "I will run after you. For you are my little bunny."
"If you run after me," said the little bunny, "I will become a fish in a trout stream and I will swim away from you."
"If you become a fish in a trout stream," said his mother, "I will become a fisherman and I will fish for you.
(*Thinking out loud*) Look at that. A little allegory of the soul. No matter where it hides, God will find it. See, Vivian?

VIVIAN: (*Moaning*) Uhhhhhh.

E.M.: "If you become a fisherman," said the little bunny, "I will be a bird and fly away from you."
"If you become a bird and fly away from me," said his mother, "I will be a tree that you come home to."
(*To herself*) Very clever.
"Shucks," said the little bunny. "I might just as well stay where I am and be your little bunny."
And so he did.
"Have a carrot," said the mother bunny.
(*To herself*) Wonderful.
(VIVIAN *is now fast asleep. E.M. slowly gets down and gathers her things. She leans over and kisses her.*)
It's time to go. And flights of angels sing thee to thy rest. (*She leaves.*)

 See facing page for commentary.

Commentary on *Wit*

A reading of Margaret Edson's iconic play *Wit* with a group of third-year medical students recently led to an intriguing discussion of medical professionalism.

Wit is about a fiercely intellectual John Donne scholar named Vivian Bearing, who, dying of ovarian cancer, endures mistreatment at the hands of an equally intellectual and research-oriented medical establishment. The play is frequently used with health professional audiences to provoke reflection about ways of cultivating empathic responses toward patients.[1] Medical students, including some in my group, are sometimes moved to tears by a scene toward the end of the play in which Bearing's mentor, Professor Evelyn Ashford, climbs into Vivian's hospital bed and reads her a children's story, *The Runaway Bunny*.

However, in the case of my students, embarrassment followed tears when I asked, admittedly provocatively, whether physicians should ever "climb into bed" with patients. After having been reassured that I was using the phrase entirely metaphorically, the students recovered from their shock, but quickly erected emotional walls. Thinking of themselves as future doctors, they backed away from their initial feelings, criticizing them as unprofessional.

What is professional behavior?

As we talked, it became clear that some of these students had already incorporated the idea that professionalism means sharing knowledge and conveying information, then engaging in logical discussion with patients committed to rationally prioritizing their own health and conscientiously adhering to medical advice—all within a rather abstract context of "caring." As a result, several of these learners were far more comfortable with the ironic, intelligent, articulate Professor Bearing at the beginning of the play than with the frightened, moaning Vivian huddled in her hospital bed and dying an agonizing death at the end of the play. They identified with the independent, competent, in-control, tough professor, and in some respects found it easier to care about her. By contrast, they were anxious and helpless in the face of her dissolving, suffering self. Surprisingly, theirs is not an uncommon response in a medical education context. When Professor Bearing is capable, brilliant, an accomplished wielder of wit, it is easy for bright, competent, clever medical students to identify with her—just as her physician, Dr. Kelekian does. In delivering Vivian's diagnosis and treatment plan, Dr. Kelekian approaches Dr. Bearing as a colleague[2]—even though she grasps very little of what he explains. But when students see Vivian reduced to a moaning, writhing embodiment of pain, although they might pity her, they are sometimes so distressed and frightened by her suffering that they step back. Confronted with the suffering other, they see her as unknowable and perhaps even threatening. Rather than climb into bed with her, they become the runaway bunny. They are at a loss as to how to comfort her in what they consider to be an appropriately professional manner. This unease is why a purely intellectual, rational model of professionalism fails our learners.

What can help our learners—and practicing physicians as well—move closer to the suffering patient?

As the playwright suggests through various characters and interactions, empathy is the cognitive and emotional position that allows us to see the patient as she truly is at any given moment, uncluttered by our own fears and self-consciousness. Perceiving (and resonating with) the patient's perspective is what enables us to recognize what the patient needs and create space for her to evolve and change. Paradoxically, empathy enables hard truths (such as when the at-times cloyingly kind nurse Susie broaches the difficult subject of do-not-resuscitate orders, something the rigorous researcher–physicians have avoided) as well as the need for consolation (illustrated when Professor Ashford, also an uncompromisingly demanding academic, consoles Vivian with comforting physical presence and a children's story). One might even argue that it is only when, toward the end of the play, Dr. Kelekian cannot avoid Vivian's suffering, that, in a belated act of empathy, he orders morphine to ease her pain. Acknowledging, "She's earned a rest" as he leaves her room, he squeezes her shoulder, the single physical contact he has with his patient. *Wit* makes the case that empathy is the primary relational stance from which moral responsibility, witnessing, and a commitment to action that promotes the interest of the other all arise.

By the end of our conversation, students were a little less uncomfortable thinking about how they might respond to, or "climb into bed with," their patients. They were a bit less embarrassed—and a bit less frightened—by their own impulses toward caring. They were more ready to consider Professor Ashford as a role model who successfully balances the pursuit of knowledge embodied in Dr. Kelekian and the kind and caring heart that she shares with nurse Susie. Like Professor Ashford, the class began to appreciate the significance of context. Students saw that with Vivian the graduate student, Professor Ashford is exacting, eschewing the "melodrama" of Shakespeare for Donne's intellectual rigor, glorying in his linguistic complexity, but with Vivian the dying woman, she sets aside Donne in favor of a simple children's story that offers solace and reassurance. Contemplating Professor Ashford, students understood that suffering is at once complicated and simple; and that they must develop the capacity to respond empathically as well as rationally to suffering in all its guises. In short, these future physicians became more at ease with the idea that professionalism is as much a matter of the heart as the head.

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References

1 Amanatullah DF. The importance of a physician's *Wit*: A critical analysis of science in medicine. Einstein Quart. J. Biol. Med. 2002; 19:139–143.
2 Rimmon-Kenan S. Margaret Edson's Wit and the art of analogy. Style. 2006;40:346–356.

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