

THE LEFT ATRIUM

Media

The doctor in *this* House: lessons from TV's Gregory House, M.D.

Nobody likes Greg House, the title character of Fox's extraordinarily successful television show *House, M.D.* Played by British actor Hugh Laurie, the Vicodin-popping House insults his colleagues, demeans the medical fellows who work for him, disregards hospital policy, ignores patient wishes and dismisses as irrelevant both basic rules of medical ethics and the law.

And yet, House is respected by colleagues, admired by underlings and trusted by the patients who appear on his service. Every Tuesday night, millions of TV viewers watch as House struggles with a case whose symptomatology appears to defy rational explanation and the best tests modern medicine can provide.

"Is there a doctor in this *House*?" huffs one medical reviewer.¹ Why love the character whose medicine we would in reality reject? Television is the fMRI of culture studies, the diagnostic by which we see beneath the platitudinous assumptions of social and professional promise to the pulsing realities beneath. Therein lies the show's appeal.

Greg House's single most attractive characteristic is that while eager to be right he is usually wrong, at least until the final minutes of an episode. The secret of House's success lies in his repeated acceptance of diagnostic failures and his unrelenting search for a better understanding of the disease itself. Like Sherlock Holmes, House (whose house number is 221B, a bow to the master's Baker Street residence) focuses not on personalities but on the core problem. Like Holmes, House's stock in trade is not simply superior



Global Television

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knowledge and logic, but an acuity that perceives symptoms others ignore. This is the doctor as detective and the disease as a criminal, ultimately unmasked and humbled.

Implicitly, the show insists on medical knowledge as partial and uncertain, the ability to categorize problematic conditions correctly as a struggle worthy of rigorous effort. Richard Chamberlain's Doctor Kildare, which ran from 1961 to 1966, would not have lasted an episode on House's team. *Dr. Kildare* never worried about being wrong. He knew the answer, and like House's fellows, typically blamed a pa-

tient's lifestyle and life choices.

House, on the other hand, does not judge. But then, Gregory House is neither a paragon nor an exemplar. Nor does he care about the patient. His sole focus is the unnamed disease that attacks the man, woman, adolescent or child whose condition catches his attention. The goal is not to address the patient but to find out what is wrong and hopefully fix it. And even if he can't, at least the patient will know the nature of his or her demise. House is aghast, in one episode, when a patient says she does not care what the disease attacking her might be; that she is

about to die is knowledge enough. Not knowing, not caring to know, *are* deaths to House, his secret fear.

Marcus Welby, MD, the kindly family practitioner who treated prime-time patients from September 1969 through a final episode in July 1976, rarely faced medical uncertainty. His medicine promised care and kindness within a science that always knew the problem and *how to fix it*. So, too, did the doctors of *St. Elsewhere* (1982–1988) and *Chicago Hope* (1994–2000) for whom medicine's real challenges, as it is on Michael Crichton's *ER*, were economic and hospital bureaucracies within which the fictional doctors practised.

House is the diagnostician for today, a time when emerging infectious diseases are again ascendant and it has become clear to all that our knowledge is often inadequate to easily identifying their nature or reversing their effects. Medicine is again a partial science and *House M.D.* presents it at the frontier where diagnosis is a rigorous art, a balance between ignorance and knowledge.

Working under House in his first 3 seasons were attending physicians in neurology (Dr. Eric Foreman), intensive care medicine (Dr. Robert Chase) and immunology (Dr. Allison Cameron). They tolerated his sarcastic bullying because, all said, he would make them better doctors. He did this by insisting they think beyond their sense of the patient-as-person, and beyond the standardized tests and easy answers, to the nature of the disease itself.

This is another reason for the show's success: Gregory House knows he can't do it alone. Holmes needed his Watson; House needs his underlings and their easy answers if he is to find the hard truths. When they are unavailable he'll take anyone available — in the first issue of the fourth season it is a janitor — as a backboard for his thinking. Those who think House's method is Socratic, misunderstand his method. He does not teach what he knows but uses others to push past the easy and convenient answers to the real truths that lie beyond. House is the doctor of uncertainty, his diagnostics an old medicine rethought and repackaged for a new age of advancing disease.

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FURTHER READING

1. Holtz A. *The medical science of House*. New York: Penguin (Berkeley Publishing Group); 2006.
2. Challen P. *The House that Hugh Laurie built*. Toronto: ECW Press; 2007.

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Poem

The Script

I watch you watch me,
As I open the door slowly,
Carefully,
As if drawing open the curtain
On the first act
Of this new chapter of your life.
Your eyes drift from my face
To the bright red file I hold
Clutched tightly in my hand.
Almost bursting at the seams,
The script, as it were...
A running commentary on your life.

It is a script you help write
But never actually read.
All you see is the cardboard cover...
The contents are for my eyes only.
Yet I read the words out to you
At each and every visit.

But today is different
Something unexpected in the plot...
A twist, a turn,
Which occurred silently
Deep within you.
You provided the material
But it was an inspiration no one
wanted...
Sometimes the script
Takes on a life of its own.

I, myself, do not want to play this part...
This is a monologue I don't want to
read

But it is part of the performance.
After all, there have been happy
monologues
Soliloquies of joy
Wherein you sat and beamed
Proud of your accomplishments
And the script was punctuated
By the footnotes of your life:
Babies, milestones, triumph over pain,
Personal goals realized.

I close the door behind me
The office clock beats loudly in the
silence
Like a drum roll preceding my
opening words
Should I set the stage
Or jump to the climax?
You shift uncomfortably in your chair
This is not the performance you
bargained for...

But the script is by no means finalized
There is always room for revisions
Your epilogue is yet to be written.
We shall complete it together
And hope for better inspirations
And more positive turns of plot.
As we navigate the story of your life.

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