

is central to our identity: by telling stories we transform mere events into purposeful experience, we change ourselves from patients into persons.

Literature offers a wonderful opportunity to enhance our capacity for moral judgment. Fiction can supply the skills—the virtues—necessary for building relationships that will endure against a world too often careless of human life. As characters struggle to live with suffering, as they wrestle with the mystery of why did this happen to me, we see them recasting their identity. Illness, loss of a job, divorce, aging, the death of loved ones or disillusionment with friends show us that ethics should not focus on dilemmas or quandaries, but on character and virtue. The key question is not “What should I do?” but “Who should I become?” An-

swering questions about what one ought to do depends on the kind of person one ought to be. “Tough cases” may demand ingenuity in problem solving, but this alone doesn’t provide the basis for relationships that sustain us through hard times.

As health care becomes more specialized, we must remember not to substitute technical procedures for moral action. Narrative ethics builds on the insight that unless we can incorporate illness into the story of our life, we will not be able to understand what has gone wrong. Narrative ethics takes seriously the Socratic challenge to know ourselves. Under the pressure of pain it will be difficult to pursue this ideal, but perhaps at no other time is it more important.

Philoctetes: A Medical Narrative

by Eleanor Bronson Pyle

The Philoctetes of Sophocles can be read as a medical narrative in which form contributes to content. Philoctetes' noxious wound caused his countrymen to abandon him on a desert island where he survived by means of an enchanted bow. Later the Greeks needed his help in the Trojan War and faced the problem of persuading him to join them. This essay analyzes the various ways estrangement and dehumanization are conveyed in the play and how they are overcome through development of a trusting relationship between Philoctetes as patient and Neoptolemus as caregiver. By focusing the connection between the individual's wound and the war as a wound in society, we see why illness should be recognized as part of the fullness of life and as an opportunity for compassion and enlightened action.

I want to share some thoughts about *Philoctetes*, a play by Sophocles more than 2,400 years old. The late Justice Holmes wrote of an incident in this play that it was a “wonderful example” of “one of those rare occasions when the ancients seem just like us.” I believe this work contains many such examples, and since it can be read as a story about a difficult patient with a difficult, chronic illness, it may have special interest for health care professionals today.

Let’s begin with a story.

Once upon a time, Apollo gave Herakles an enchanted bow whose arrows could not miss their mark. Later when Herakles had been poisoned and wanted to die, he persuaded Philoctetes to light his funeral pyre and gave him the magic bow as a reward. Armed with the bow, Philoctetes was part of the Greek army that set out for Troy to avenge

Helen’s loss. On the way the Greeks stopped to worship at a shrine, and Philoctetes was bitten on the foot by a venomous snake. His wound became so noxious and his behavior so disruptive that his countrymen abandoned him on the island of Lemnos and went on to Troy without him.

For ten years Philoctetes eked out a miserable existence while his wound failed to heal. For ten years the Trojan War dragged on inconclusively. Finally the Greeks learned they would never be victorious without the aid of two men: Philoctetes with his magic bow and Neoptolemus, son of Achilles, in his father’s armor.

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It is here that Sophocles' story begins. Like many stories, it starts off with a problem: How can the Greeks hope to persuade Philoctetes to help them after they have treated him so badly?

I want to look at this story about long illness and banishment as a medical narrative in two parts: (1) an elaborate presentation of Philoctetes as patient in which the major theme is isolation and alienation; (2) an account of overcoming this alienation, of what is involved in the process of healing.

There seems to be an isolation inherent in illness, what John Donne called "the greatest misery of sickness." In certain instances it takes the form of an estrangement that lies at the core of the patient's experience of illness. So it is with Philoctetes. Like some of Oliver Sacks' patients, he is a traveller in a strange land, far from both home and health ("Clinical Tales" 16-23). Furthermore, the *way* his story is told—the narrative structure—has implications that encourage us to see him as even more estranged. Let me illustrate.

The play is set on Lemnos where Odysseus, leader of the Greek army, has brought Neoptolemus for the purpose of using him to trick Philoctetes into coming to Troy. There are three main characters in the play: Philoctetes, the patient, the man with a wound; Neoptolemus, the young caregiver, the one who will deal directly with the patient; and Odysseus, representative of the Greek state and its order. In each of the first three scenes one of these characters presents the patient from a particular point of view. First Odysseus describes him to Neoptolemus, then Neoptolemus explains things to

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the Chorus, and finally, Philoctetes tells his story in his own words. Notice the order, reversed from what most of us are used to in teaching hospitals where the initiating event in a case is the patient presenting himself for care. He tells his story first.

But here the first account of the patient, the first account the caregiver hears, is told by someone else and is deliberately shaped to the presenter's purposes. Odysseus describes Philoctetes to Neoptolemus as a bothersome complainer, a troublemaker who has to be tricked into a course of action that is for everyone's good, including his own. Not only does the caregiver miss hearing the patient's story in the patient's own words, but the

patient loses dignity by not speaking first. By implication his story is not the most important.

Neoptolemus "sees" the wound before he sees the patient who bears it.

Odysseus distances and dehumanizes the patient both by what he says and by what he leaves out. What he leaves out is any regard for Philoctetes as a suffering human being, any recognition of common humanity. Instead he talks about the setting as a place unfit for human habitation, "a desolate island in the midst of the sea where no man walks or lives." The words are true, for Philoctetes walks and lives like no man. His wound causes him to walk with a halting step or to go about on all fours. He hunts his food like an animal. And he describes his existence as a "living death."

Other details in this scene contribute to the themes of loneliness and dehumanization. It is a desolate coast of Lemnos with a rocky path leading to a cave where Philoctetes sleeps on a bed of leaves. When Neoptolemus first approaches the cave he sees a stained bandage hanging out to dry, a symbol of the wound and a reminder of its unpleasant suppurative nature and its failure to heal. Neoptolemus "sees" the wound (or evidence of it) before he sees the patient who bears it, as if the wound were more important and even had a separate existence.

What kind of person is this young caregiver-in-training? Odysseus has asked him to lie to the patient as part of the plan to bring him to Troy. In Odysseus' value system a little deceit is a minor thing; surely in this case the end justifies the means. It may even be a necessary part of the caregiver's education. In his book *Becoming a Doctor*, Melvin Konner tells how medical students observe the attitudes and imitate the moral stance of physician-teachers, whose behavior often carries an implicit message: "If you want to survive in this world, you'd better be like me."

Neoptolemus would prefer not to deceive Philoctetes but he is young and agrees to do so, believing he can lie just once and then "live forever after a paragon of virtue." But, more important, Neoptolemus reveals an important sensitivity as he describes Philoctetes to the Chorus. He sees something about the wounded man that Odysseus did not, something that adds a new dimension to our view. He understands that Philoctetes is alone and

feels sorry for him. "Poor creature," he comments, with "no one to help him cure his trouble." He uses "trouble" to include not only the physical wound but also the suffering imposed by isolation. The Chorus responds by backing up this view using words such as "pitiful," "lost and alone," and "none to answer his cries."

Finally it is time for the patient to come and tell what is, after all, his story. Just before he appears, we hear sounds offstage—a dragging step and a cry of pain. (Again, the wound precedes the patient.) In his first words Philoctetes lets us know that he shares the dehumanized view Odysseus gave of him; alienated from society, he feels "more like a savage creature than a man."

*"Whichever way I looked
there was nothing beside me
but my misery."*

As Philoctetes tells his story he emphasizes loneliness and resentment: "much wronged," "helpless they left me," "cast me ashore, giving me nothing." He is obsessed with this grievance against the Greeks; indeed, he *cannot* forget it because of relentless pain. Pain and grievance intensify each other and together constitute his suffering. And because Philoctetes sees his suffering as the result of human design, it has hardened his spirit.

In order to get beyond this, something has to change. Up to this point, we have been setting the scene, the problem of Philoctetes as patient, distanced and dehumanized. To bridge this distance will require changes in both patient and caregiver. These changes supply the material of the second half of the play. They are worked out in front of us as patient and caregiver educate each other.

First the patient tells the caregiver what to do, how to reach out to him in a way that will be effective. He asks for two things. In the middle of his story, perhaps sensing a lack of engagement on his listener's part, he pauses and says to Neoptolemus: "Think what I felt, lad." He asks the caregiver to enter imaginatively into his emotions, to share and thus to lessen his loneliness. And, like a good teacher, he provides the means to do this. He paints a picture of his isolation, and by describing so many details of what he saw and felt he makes his experience shareable. He recreates the absences, the empty harbor, the uninhabited land. "Imagine how I felt when I saw that every ship was gone of those I sailed with, not a man on the island. Whichever

way I looked there was nothing, nothing beside me but misery, and that in abundance." He tells of dragging himself along the ground to pick up an animal shot for food or rubbing stones together to keep warm.

When Neoptolemus shows no sign of becoming involved, Philoctetes makes his second request: "Son, I beseech you, do not leave me here alone and helpless in this sorry state in which you see me now—do something." In addition to sharing his suffering imaginatively, Philoctetes asks Neoptolemus to assess his overall situation dispassionately and propose a course of action (Charon 64).

Now Neoptolemus' education really begins, by a direct, personal encounter with illness and suffering: as he watches, Philoctetes experiences a violent attack of pain. At first Neoptolemus doesn't comprehend what is going on. Five times he asks: "What is it?" Then, "Why do you call so loud on the gods?" And finally he comes to the critical question: "What can I do?"

Philoctetes' broken replies suggest that the first thing the caregiver must do is stay with him and witness empathetically a pain that transcends words. "You see how it is. No, do not run away." And he hands Neoptolemus the magic bow. Remember that Philoctetes received the bow from Herakles as a reward for compassion; perhaps he now recognizes compassion in Neoptolemus. This is important because it is the first indication that Philoctetes may be capable of change, of learning to trust.

Neoptolemus does endure the horror of the wound and nurses the patient through delirium. But this isn't enough to change Philoctetes' suspicious nature; when he recovers from his attack, he cannot believe his new friend is still with him. Observe what he says. He blesses Neoptolemus for enduring "the cries, the foulness which I have afflicted you with." By viewing himself as one who inflicts pain on the caregiver, he continues to dehumanize himself.

In the remainder of the play a number of old themes recur and are finally resolved. This does not happen neatly but with a certain amount of toing and froing, one step forward and two back, suggesting how difficult it is for human beings to change entrenched behavior.

One reason change can occur is because Neoptolemus has shared Philoctetes' illness on a personal level and thereby gained new knowledge, knowledge about the sources and experience of suffering. He gives evidence of this when he returns the bow. He has come to understand, in Edmund

Wilson's words, that the Greeks cannot have "the irresistible weapon without its loathsome owner." And he also realizes, to paraphrase Richard Cabot, that a lie to a patient cannot be isolated like a case of smallpox. It has the power to spread and beget mistrust. He confesses his part in the deceitful plan of Odysseus. But Philoctetes is not yet ready to give up his old ways and reverts to his role as victim. "Misery is my life," he says. "The gods have no good gifts for me."

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The apparent stalemate is resolved through a long exchange between Philoctetes and the Chorus. When he asks: "How shall I live?" they point out that he has only to choose to escape from suffering. "Freedom is in your hands." But, like many patients with long experience of illness, Philoctetes cannot imagine life without his injury.

Now it is the caregiver's turn to show the patient the way, to tell him what he needs to know—and can now hear—in order to change. Neoptolemus acknowledges Philoctetes' right to make his own decision: he can continue his helpless, hopeless life if he wishes. But the caregiver asks the patient to look at two important facts. First, there is the reality of the wound; he must accept that. Fairness is irrelevant. Second, he reminds the patient that he takes pleasure in suffering, that he clings to it as to a prized possession. He urges Philoctetes to give it up and go to Troy of his own accord. Not only will he gain personal honor as a hero in conquering Troy, but he will also find there the son of Asclepius destined to heal him. Throughout the play the individual's wound has been mirrored by the wound in society; it is necessary for Philoctetes to be cured for the Greek state to know peace.

We have looked at this story as a tale of alienation: alienation of one individual from another, of the individual from society, of illness from health. The play illustrates the terrible burden that isolation adds to illness. Philoctetes' isolation caused his world to shrink in a series of ever-smaller concentric circles. He is on an island, itself a symbol of disconnectedness, as Leon Edel reminds us. He lives there alone. His wound limits his mobility so that he can know only a small part of the island. Most restrictive of all, Philoctetes cannot escape himself. Obsessed with suffering and grievance, he is caught

in what Oliver Sacks has called the self-absorption of patienthood (*A Leg to Stand On* 156).

But the play is also about ending alienation, about union and healing, and the realization of a true human relationship between patient and caregiver. It suggests that the patient has something valuable to give society which it ignores at its peril. There is a sickness that sickness causes in society when it is hidden away. What Philoctetes contributes is not only his bow but also intimate knowledge of illness as part of the fullness of life, and the opportunity it gives for understanding between people and for enlightened action.

The issues involved in caring humanely for patients may seem to have taken on an especially sharp edge in our technological age, but they are as old as stories of illness themselves. For to be restored to health in the fullest sense, the sick person requires not only skillful care as it is usually defined, but also what Oliver Sacks has called "the establishment of proper relations with the world, with other human beings or, at the very least, with one other human being" (*Awakenings* 325-326). Sacks praises the value of a single good relation, calling it "a life-line, a pole star and compass in the ocean of trouble." Kinship is healing. In more ways than we may know, we are physicians to each other.

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