



---

## “Take Care of the Bowels and the Brains Will Take Care of Themselves”: Scotland’s Doctor-Writers

Tom Hubbard

---



**Electronic version**

URL: <http://journals.openedition.org/etudeseccossaises/195>  
DOI: 10.4000/etudeseccossaises.195  
ISSN: 1969-6337

**Publisher**

UGA Éditions/Université Grenoble Alpes

**Printed version**

Date of publication: 30 April 2009  
Number of pages: 135-141  
ISBN: 978-2-84310-138-0  
ISSN: 1240-1439

**Electronic reference**

Tom Hubbard, « “Take Care of the Bowels and the Brains Will Take Care of Themselves”: Scotland’s Doctor-Writers », *Études écossoises* [Online], 12 | 2009, Online since 30 April 2010, connection on 08 September 2020. URL : <http://journals.openedition.org/etudeseccossaises/195> ; DOI : <https://doi.org/10.4000/etudeseccossaises.195>

---

**Tom Hubbard**

*National University of Ireland, Maynooth*

## “Take Care of the Bowels and the Brains Will Take Care of Themselves”: Scotland’s Doctor-Writers

Decades ago I was drinking with Jock, a well-known surgeon in our town. He was a source of colourful tales, which he relayed with a blunt directness. I was told that he’d been a good friend of my grandfather, the local Labour MP, and that they’d argue about politics on the train down to London.

Whenever Jock opened up a patient and found a tumour that was beyond even his skill, he became visibly and audibly distressed: “Sew ’im up, sew ’im up!”

There you have it: a profession whose members, at their best, combine compassion with an earthy humour, and community esteem with sometimes undisguisable vulnerability. They encounter their fellow-beings at times when the latter are at their most dependent. When doctors take up a second career in literature, we’d expect their output to possess qualities absent from the work of their non-medical colleagues.

In 2005, as part of a project run by the Scottish PEN Centre, I interviewed the Glasgow-based writer and general practitioner (b. 1961) who publishes under the name of Suhayl Saadi – a procedure which reflects not only his professional ethics as a doctor but also the double identity of the doctor who is also a writer.<sup>1</sup> I asked him if there were ways in which his two roles could be considered as not all that distinct from each other. Saadi’s fiction – the short story collection *The Burning Mirror* (2001) and

---

1. Unpublished interview, Scottish PEN Centre, June 2005.

*Psychoraag* (2004) – deals with Glaswegians of Asian origin. The boundaries between their varying identities amount to a space of both tension and permeability, often highly charged with the erotic. I suggested that, as a doctor, Suhayl would be able to offer, say, a scientifically precise perspective on sex. He accepted that there was both tension and permeability between his doctoring and writing, citing the variety – often in terms of class – of his patients, the extreme situations which have led them to his surgery, and his involvement with birth, death, and points between.

Suhayl explained that a patient comes with a disordered narrative; the doctor must discover a shape to this narrative and return it to the patient with a resolution, together with a prescription. (“Prescription”: in English, but not in French, the clinical narrative is thus proclaimed as demanding a “script”, and of course the doctor is engaged in the act of writing as he enters notes in the patient’s file. The Edinburgh-born anaesthetist-poet Gael Turnbull (1928-2004) wrote the blurb for one of his books on a doctor’s prescription-pad.)

Suhayl went on to stress that it would be unethical to take a patient’s life-story and serve it up raw in a story. There is a necessary alchemy, and here he cited the medieval alchemist-physician Michael Scot (c. 1175-c. 1235), Scotland’s first literary medic. Scot’s *Liber physiognomiae* (first (?) published in 1477) is an account of the human body and its functions, set out systematically in the Aristotelian manner. It reads almost like an epic journey through ourselves, as it were, and though its highly moralistic reading of physiognomy would not be acceptable today, Scot’s analyses of the body in motion – as regards facial expressions and hand gestures – anticipate Freud’s famous method of “reading” a deliberately wordless patient. The lips may be closed but the fingers are dancing; Michael Scot preceded Freud in his discovery of what we now call *body language*.<sup>2</sup>

That term eloquently sums up the doctor-writer continuum, but it is as if a third profession is involved, at least insofar as its skills are transferable: that of the detective. (The forensic scientist, of course, stands at the nexus of clinical and police work.) Scotland’s late-nineteenth century purveyor of “medical” fiction is not the Stevenson of *The Strange Case of Dr Jekyll and Mr Hyde* (1886), whose protagonist comes across more clearly as experimental scientist than as practising physician: Jekyll’s “doctoring” is conveyed only in the most general terms, and the novella is concerned rather with a seething post-Darwinian complex of scientific, religious and moral matters – though admittedly we might well envisage Jekyll-Hyde as his own patient, attempting (and failing) to manage his varying physiognomies. No, for the doctor-as-detective rather than the

---

2. See my monograph *Michael Scot: Myth and Polymath*, Kirkcaldy, Akros, 2006, passim.

doctor-as-criminal we must go to Stevenson's contemporary and fellow-Edinburgher Arthur Conan Doyle (1859-1930). It's arguable that there is something of a Jekyll-and-Hyde duality in the pairing of the genially obtuse Dr Watson and the autistically brilliant Sherlock Holmes, of the *homme moyen sensuel* (Dr Watson) and the tenebrously devious sleuth. At this point we should refer not directly to the creator of Sherlock Holmes but to the man who was both the model for Holmes and (in a sense) the creator of Dr Conan Doyle – the author's Edinburgh University teacher, Dr Joseph Bell (1837-1911).

Bell was more than happy to express his pride in his former student by providing an essay on him, later reprinted as an introduction to Doyle's *A Study in Scarlet* – the very first Sherlock Holmes tale, which had initially appeared in 1887. Bell writes as follows on what makes Doyle's work so special:

[...] it may be a crowd of men dressed alike, and each having his complement of eyes, nose, hair and limbs; in every essential they resemble each other, only in trifles do they differ; and yet, by knowing these trifles well, you make your diagnosis or recognition with ease. So it is with disease of mind or body or morals. Racial peculiarities, hereditary tricks of manner, accent, occupation or the want of it, education, environment of all kinds, by their little trivial impressions gradually mould or carve the individual, and leave finger marks or chisel scores which the expert can recognize. [...] A fair-sized and valuable book has lately been written on the one symptom, the pulse; to any one but a trained physician it seems as much an absurdity as is Sherlock Holmes's immortal treatise on the one hundred and fourteen varieties of tobacco ash. [...] The importance of the infinitely little is incalculable.<sup>3</sup>

Bell states that Doyle has been trained “to notice and appreciate minute detail” (Bell, p. 10). The skills acquired in the anatomy lecture-hall by Doyle the medic have been transferred to Doyle as a writer of fiction and in turn to his most celebrated character.

The greatest doctor-writer of them all is Anton Chekhov. He advocated training the imagination's eye to detect the easily-overlooked detail which was capable of illuminating the grander scene:

In descriptions of nature one should seize upon minutiae, grouping them so that when, having read the passage, you close your eyes, a picture is formed. For example, you will evoke a moonlit night by writing that on the mill dam the glass fragments of a broken bottle flashed like a bright little star, and that the black shadow of a dog or a wolf rolled along like a ball, and so on.

---

3. Joseph Bell, “Mr. Sherlock Holmes”, in A. Conan Doyle, *A Study in Scarlet*, London, Ward Lock, n. d., p. 9-10.

Nature becomes animated if you do not shrink from making physical phenomena resemble human actions.<sup>4</sup>

Dr Chekhov's prescription is based on readings not only of people's immediate physical and mental condition, but also on their environment, the social, economic and historical milieu in which they have their being (and their possible becoming, of which they'll invariably fall short). "Prescription", though, is not quite the right word in the case of Chekhov-the-writer: undoubtedly *engagé* as a result of his intimate experience of the condition-of-Russia, he famously declared that the writer's job was to pose the right questions, not to propose answers.

As both doctor and literary "realist" (to use that notoriously vexed term), Chekhov was not prepared to downplay the unpredictabilities of (often illicit) human sexuality. Conan Doyle is no Chekhov, but his early "Edinburgh" stories such as "John Barrington Cowles" (1886) and *The Parasite* (1894) are remarkable for the erotically-charged plights in which his medical student or eminent professor find themselves. The physician is forced to heal himself or perish in the attempt, and in that sense these stories possess an affinity with their more celebrated contemporary, *Dr Jekyll and Mr Hyde*. Sexuality is absent – at least overtly – from Stevenson's novella. In the ultra-sentimentalist "Kailyard" fiction of "Ian Maclaren" (Rev. Dr John Watson, 1850-1907), it's not even covert. "There are such things as drains", wrote Maclaren, "and sometimes they may have to be opened, but one would not for choice have one opened in his library."<sup>5</sup> As Chekhov would have known only too well from his work among Russia's peasants, the doctor is concerned with all manner of human stinks and secretions, and thus with sanitation and sex. The protagonist of Ian Maclaren's story-sequence *A Doctor of the Old School* (1895) is the already sanitised pillar of the community, riding iconically through all weathers to deal with remote but urgent cases, from which squeamish readers have nothing to fear. The embarrassing lachrymosities coexist naturally with the characters' (and their author's) unquestioning deference to their betters, such as landowner Lord Kilspindie. This is a society without contradictions, subjectively speaking. True, the "Old School" doctor, William MacLure, challenges the royal surgeon Sir George to his face, but this is forgivable, even lovable, short-fusedness in the course of medical emergency, rather than deliberate insubordination; he has also been a life-long spurner of religion, but he is, so to

---

4. Anton Chekhov, letter to Aleksandr Chekhov, May 10, 1886, in *Letters of Anton Chekhov*, selected and edited by Avrahm Yarmolinsky, New York, The Viking Press, 1973, p. 37.

5. Ian Maclaren, "Ugliness in Fiction", *Literature*, 1, 1897, p. 80-81.

speak, gathered at last. There's no threat to the consensus here. Jess, Dr MacLure's mare and means of professional transport, does not long outlive her master; when a townsman remarks that she was all the wife that the bachelor doctor had, this is meant to be taken at its completely innocent face-value.

Given the tenets of Scotland's current cultural correctness, David Rorie (1867-1946) could be too glibly dismissed as latter-day Kailyard. He practised medicine in both Aberdeenshire and Fife while contributing to the distinct literary cultures of both regions. His work is therefore inadmissible to a *Scot-lit* canonicity which persists in fetishising urban west-of-Scotland content, box-ticked variously as "working-class" or Glasgow City of Trend. In the words of William Donaldson, who has researched and made accessible a formidable corpus of North-East literature, "[David Rorie's] writing developed quite early that characteristic blend of humorous involvement with individual men and women along with a detached, sardonic view of medicine as part of a wider human comedy in which he himself had an active, and not always dignified, role."<sup>6</sup> Rorie's comic verse-tales, such as "The Lum Hat Wantin' the Croon" and "Tam and the Leeches" – where a patient hilariously misinterprets his prescription – have the seeming inevitability of folk ballad. Rorie never patronises the bizarrely resourceful communities in which he finds himself, and his command of Scots is totally authentic, quite distinct from the practice of the Kailyard writers who appear to report the weird lingo of aliens from (as it were) inner space.

Again, he's no Chekhov, but there's no little of the Russian's notable balance of humour and pathos, if tilted markedly toward the former rather than the latter. And as with Chekhov, this is medical practice within a social context, a distinct community, albeit having little in common with the degraded Russian peasantry. That said, a later North-East writer, Sheena Blackhall (b. 1947), has her doctor-heroine documenting the poorhouses of late-Victorian Aberdeenshire in terms that recall the stark reportage of Anton Pavlovich. Blackhall's novella *The Gods of Grayfriars Lane* (Maud, Aberdeenshire, Lochlands Publishing, 2008) richly deserves a readership more widely in Scotland and beyond.

In one of his prose pieces, David Rorie offers us a piece of (spooof?) folk-wisdom: "Take care of the bowels and the brains will take care of themselves." (*David Rorie: Poems and Prose*, p. 77). For doctor-writers, the spiritual or the aesthetic always possesses a strong physicality, as if fingers and instruments are deployed to discover the most sensitive areas. Anne

---

6. Introduction to *David Rorie: Poems and Prose*, William Donaldson (ed.), Aberdeen, Aberdeen University Press, 1983, p. xi.

MacLeod (b. 1951) is now better known as the novelist of *The Dark Ship* (2002) and *The Blue Moon Book* (2004), but her two poetry collections, *Standing by Thistles* (1997) and *Just the Caravaggio* (1999), had already more than hinted at the influence of her specialist practice (dermatology) and of her more general knowledge of what goes on behind the body’s surface. Both the artist and the doctor in her respond to the manner in which a human agency represents the body in that artificial construct which we call a sculpture:

Statues are strange, the skin as smooth  
 the arms and legs and hair  
 as full and free as if each figure breathed  
 caught in the endless moment of our choosing  
 and yet the eyes are empty:  
   do not choose the eyes  
 the fate that tempts those eyes. Pass on to note  
 the curling hair, the twisting abdomen  
 the torso thinned implausibly, the bending knees  
 the veined arms straining still to grip the marble base  
   or choose the toe  
 pointing towards the stone, the frozen stone  
 the next step over frozen water [...].<sup>7</sup>

Finally, Gael Turnbull – cited earlier – qualifies as a “Wandering Scot” as much as a doctor-writer, having lived and practised for many years in North America and in England before returning to his native Scotland. He acquired a rich experience – including spells as a medic at Canadian logging camps – from which to feed his quirky and irreverent poetry. Poets whose entire professional world is concerned with writing, *e.g.* those who are literary academics, are apt to become caught up in the fuss and bother of the poetry world, its petty bureaucracies and cloying authoritarianisms. Turnbull was a quietly relaxed product (and instigator) of the “poetry scene” of the 1950s and 1960s, someone who always enjoyed professional and leisure-time hinterlands outwith “poetry”. He was arguably the more prolific, as poet and small publisher, for *not* being a full-time writer/*littérateur*.

And as always the shade of Chekhov is hovering nearby, in its fashion. Turnbull’s highly original prose work, *A Year and a Day* (1985), “to be taken in small doses as required”, is a journal of “interesting things” recorded during his year as a doctor in Worcestershire. There is the combination

---

7. Anne MacLeod, “In the Kibble Palace”, *Just the Caravaggio*, Salzburg, Poetry Salzburg, 1999, p. 34-35.

of dry detachment and compassionate identification from and with the community to which he belongs (albeit temporarily) as a flawed human being among other flawed human beings. The entry for September 19, 1980, exactly a month before his departure, is a short short-story, the case-note of a crazily tragic incident of a kind that would not have escaped the notice of the great Russian:

All in attendance: one Consultant, two G.P.'s, two ambulance men, a social worker, three neighbours, a daughter and son-in-law after three days of non-stop activity, constant drench of words, incessant flitting from room to room, sometimes at the front gate in only her baggy knickers, sometimes leaving all the gas jets on, still insisting there was nothing wrong with *her*. "It's my husband. He's the one you want. Nothing the matter with me." He who was half her size and had fled to the bottom of the garden, exhausted, nearly out of his mind himself, "Do something! I can't take any more!"<sup>8</sup>

All in all, you can neither take the doctor out of the writer nor the writer out of the doctor.

## Acknowledgments

I owe warm thanks to a truly active librarian, Lizzie MacGregor, of the Scottish Poetry Library, for not only responding to my requests for known material, but also pointing me in various directions of which I had not been aware.

I would also like to record my debt to Owen Dudley Edwards's masterly study of Conan Doyle, *The Quest for Sherlock Holmes* (Edinburgh, Mainstream, 1983) as well as to his Introduction to *The Edinburgh Stories of Arthur Conan Doyle* (Edinburgh, Polygon, 1981), where "John Barrington Cowles" and *The Parasite* are reprinted.

---

8. Gael Turnbull, *A Year and a Day*, Glasgow, Mariscat, 1985, p. 40.