Knock: a study in medical cynicism

I Bamforth

French literature has shown an enduring fascination with the social figure of the doctor. In Jules Romains’ amusing play Knock (1922), and in its later film version (1951), the doctor as deceiver returns to centre stage with a flourish. Molière’s seventeenth-century figures were mostly quacks and mountebanks; Knock is something new: he is a health messiah. By enforcing a mental and social hygiene based on fear, Knock brings a small rural population under his sway. Insouciance is banished by artful consciousness-raising. A society mobilises under the banner of medicine. But who is Dr Knock?

In August 1923, Jules Romains (Louis Henri-Jean Farigoule), PEN activist, friend of Stefan Zweig, and one of France’s most famous and popular writers between the wars, wrote a play in three acts called Knock. It was to prove his most enduring literary creation. In the 1920s Romains was, along with Luigi Pirandello and Bernard Shaw, one of the most staged dramatists in the world, which goes to show that no literary reputation is ever entirely vouchedsafe. Perhaps the only other work Romains is remembered for today is the 27 staged dramatists in the world, which goes to show that no enduring literary creation. In the 1920s Romains was, along

THE FARCE AND THE FARCEUR

The film opens in the early years of the 20th century with scenes of the outskirts to the French capital. From then on Jouvet

Richard Cobb assures us, in his essay Maigret’s Paris, that it contains some finely evocative scenes of the outskirts to the French capital.

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After several rehearsals, Romains insisted that Jouvet play the character close to his own persona, without caricature— "Vous avez une occasion magnifique d’être vous-même”—but with a gloss of courtesy, sarcasm, and self assurance. Jouvet worried that it was going to be too “black” to attract the public. He was wrong. On the first night at the Comédie des Champs-Élysées the play was such a success that André Gide went backstage to congratulate Jouvet on his performance. From then on Jouvet was Knock. He played the role throughout his acting life, and after the war went onstage as Knock at the Athénée no fewer than eight hundred times. Two film versions were made; one in 1933, and a better known version, directed by Guy Lefranc, in 1951. Such was Jouvet’s status that he was allowed to supervise casting. In the event, his brilliant performance proved to be the ultimate film record of a remarkable acting career; he died on stage rehearsing Graham Greene’s The Power and the Glory in 1951 just months after the film’s release.4
Knock arranges for the other members of the cabal, the teacher and the pharmacist, to visit him. His language is fulsomely ingratiating: he engages the former with the modern horror of microbes. As physician-magus, he consigns the latter to the role of *marchand-épicier*, one of those money-hungry apothecaries and suppliers of unicorn’s horn who inspired Molière to create Purgon and Fleurant. He engages the town crier to tell the country folk that consultations are to be given free of charge at the surgery on Monday mornings. When he asks the town crier what the townspeople used to call his predecessor, he discovers it was never “Monsieur le docteur”, but often a sobriquet—Ravachol. Romaines is enjoying a little joke with his audience.

Knock quickly adds, it’s just a big black spider sucking on her neuralgiform crisis of the substantia nigra”. Or perhaps, as the intracerebral circulation or perhaps even a “sustained evening”—may now be the result of a “pipestem deformity” of used to tell her “to read three pages of the civil code every insomnia, which Dr Parpalaid had never taken seriously—he himself with the incomes of his clients. Patients are ruthlessly standing and carefully organised. He assiduously acquaints the creator” and saviour. His plan for conquest is clearly of long eugenics, suggests there can be no straightforward leap from Spencer’s competitive model, which provided a foundation for eugens, suggests there can be no straightforward leap from scientific to political ecology. Indeed, this kind of anarchism—of the non-bombing, moralistic kind extolled by Tolstoy—looks mostly like a philosophy for smallholders. All this could be hat to Knock. His ideal of social organisation is a form of hygiene organised around himself as “continual creator” and saviour. His plan for conquest is clearly of long standing and carefully organised. He assiduously acquaints himself with the incomes of his clients. Patients are ruthlessly stripped of their defences, beginning with the flimsy mantle of insouciance which has protected them from worrying about their health. The Lady in Violet, a certain “dame Pons, née demoiselle Lempoumas”, gets the shock treatment: her insomnia, which Dr Parpalaid had never taken seriously—he used to tell her “to read three pages of the civil code every evening”—may now be the result of a “pipestem deformity” of the intracerebral circulation or perhaps even a “sustained neuralgiform crisis of the substantia nigra”. Or perhaps, as Knock quickly adds, it’s just a big black spider sucking on her brain.

Knock’s use of “big words” to terrorise the Lady in Violet is one of the oldest medical tricks: think of Molière’s cod Latin-sputting Sganarelle in the most famous predecessor farce *le Médecin Malgré Lui* (1666), or the nuciform sac, a structure unknown to any anatomy textbook but wielded to good effect by the surgeon Mr Cutler Walpole in George Bernard Shaw’s play *The Doctor’s Dilemma* (1906). The description of Walpole’s stage directions even resembles Jouvet’s portrayal of Knock in the film: his face, according to Shaw in his stage directions, looks “machine-made and beeswaxed; but his scrutinising, daring eyes give it life and force. He never seems at a loss, never in doubt; one feels that if he made a mistake he would make it thoroughly and firmly...”. It may be scandalous to admit it, but disseminating has long been part of medicine’s therapeutic arsenal: Knock profilers big words, not for the sake of the cure, but for the rather more pertinent issue of reinforcing his authority.

The nuciform sac turns up in another guise in Axel Munthe’s hugely successful if self-regarding volume of reminiscences from the same decade, *The Story of San Michele* (1929), in which he tells how, when working in private prac-
So effective is Knock in medicalising the town that when Dr Parpalaid returns three months later to collect the outstanding payment for the sale of the practice, he finds the local Hôtel de la Clef full of patients. The chambermaid (now nurse assistant) fails to recognise Dr Parpalaid and innocently insults him by adding that she hadn’t known there was a doctor in town before Dr Knock. Mousquet is run off his feet with work, and loving it: “it’s not the old cabbage patch life of the old days”. Mr Bernard, the schoolteacher, has moved on to giving illustrated public lectures on the need for perpetual readiness against the menace of the microbe. Public health was a major concern in the France that had lost ten per cent of its male population to the first world war: even Louis-Ferdinand Céline—aka Dr Destouches, urban nihilist and Proust’s closest rival for the title of the greatest French novelist of the century—did his stint to improve the stock of future intelligentsia. His social campaigns against tuberculosis in the period in which Knock was written, when he would sing, to presumably startled schoolchildren, “va-t-en, va-t-en microbe!” to the tune of “Il pleut, il pleut, bergère.” (These campaigns against the unseen menace in the midst of the French population evidently had an effect, as can be surmised from the habits of an unquestionably intelligent middle-class family of the period: Simone Weil’s biographer reports that her entire family, in the 1910s, lived in fear of microbes, obsessively washing hands, opening doors with elbows and generally shunning physical contact.)

Knock astounds his predecessor with his figures for the last three months, and not just the consultation rates: he knows the incomes of every household in the canton. But it’s not their money he’s after, he assures Parpalaid: he has brought people with elbows and generally shunning physical contact.

You were contemplating a wild landscape, barely cultivated by human hand. Now I offer it to you impregnated by medicine, fired by the spirit of our subterranean art. When I stood here for the first time, the day after my arrival, I wasn’t too proud: I realised my presence didn’t count for much. This vast expanse of France had the temerity to humour me and my prophecies. But now, I’m much at ease here as an organist sitting down to play his instrument. In two hundred and fifty of these houses—not all of which are apparent because of the distance and the greenery—there are two hundred and fifty bedrooms where someone’s confessing the power of medicine, two hundred and fifty beds where a recumbent body attests that life has a purpose, and—thanks to me—a medical purpose. At night the view is even more beautiful, for then their lights shine out. And almost all these lights are mine. Non-patients sleep in the outer dark. They cease to exist. But patients leave on their night-lights or their lamps. For me, night banishes everything that remains outside medicine, wipes away its irritation and provocation. Instead of the district we know there is a kind of terra incognita, a collective progress which nobody has the power to resist, not even Dr Parpalaid. A self-contained society forms as the spectator watches; it shares the same hopes and fears, its solidarity is such, even after three months, as to repulse Dr Parpalaid when he comes to collect the remainder of the payment on his old practice. Whatever fails to fit this world-as-interpreted-by-medicine is suppressed or rejected: medicine for the inhabitants of Saint Maurice becomes the very content of their lives. They offer Knock a seller’s market. He leans on what he is expert at inducing—fear: a contrived dart of panic among the cast that can make laughter from the auditorium sound oddly complicit or uneasy. The inhabitants of St Maurice might be suffering from maladies imaginaires, but Knock is a master at the art of reinforcing that particular form of fright. His strategy is simple but effective: he defines the bad, and dictates the good. He invokes a cosmic principle, subjecting the horizontal society of supposedly autonomous subjects to the vertical idea—of divinity. Perhaps he is a latter-day Dr Mesmer, a magnetiser who’s put the instruments of reason to the ministry of what is essentially a prospect of salvation, plumbing that part of the mind that is indecucrable, a metaphoric but no less fatalistic fa
culte
e de la bouffe—the more certain they are of his authority to impose such strictures upon them. Their microcosm, even though it is rural, has no socially cohesive institution to counteract medicine’s explaining power (hence Knock’s interest in Act I in discovering whether the townspeople go regularly to Mass, white or black). Knock lacks any sense of scruple or limit, though he repeatedly claims he is the servant of a higher morality. He plays up to his patients’ amour propre, while drastically curtailing their freedom. Sacrifices there will have to be. Soon his patients are running after something they already have. Mark Twain noted, with his usual pawky humour, how little of substance is actually offered by health messiahs: “There are people who strictly deprive themselves of each and every eatable, drinkable and smokeable which has in any way acquired a shady reputation. They pay this price for health. And health is all they get out of it. How strange it is. It is like paying out your whole fortune for a cow that has gone dry.”

HYGIENE AND POLITICS

What gives pause in Romain’s brilliant farce is that, in the 1930s, that politicised and polarised decade, Knock was interpreted as a parable about demagogues able to capture the public imagination and mould entire populations to their will. Knock was a type of Great Dictator, the politician without principles: 1922, the year before the play was written, was also the year “Il Duce” came to power in Italy.

There are parallels. The more dangerously absolute Knock’s demands on the Saint-Mauricians—he even gets the lady in Black, who exudes “peasant avarice and constipation”, to renounce what is clearly her only real passion in life, Black, who exudes “peasant avarice and constipation”, to renounce what is clearly her only real passion in life, la bouffe—the more certain they are of his authority to impose such strictures upon them. Their microcosm, even though it is rural, has no socially cohesive institution to counteract medicine’s explaining power (hence Knock’s interest in Act I in discovering whether the townspeople go regularly to Mass, white or black). Knock lacks any sense of scruple or limit, though he repeatedly claims he is the servant of a higher morality. He plays up to his patients’ amour propre, while drastically curtailing their freedom. Sacrifices there will have to be. Soon his patients are running after something they already have. Mark Twain noted, with his usual pawky humour, how little of substance is actually offered by health messiahs: “There are people who strictly deprive themselves of each and every eatable, drinkable and smokeable which has in any way acquired a shady reputation. They pay this price for health. And health is all they get out of it. How strange it is. It is like paying out your whole fortune for a cow that has gone dry.”

Or it could be that Knock is in thrall to an impersonal will-to-diagnosis: in the last scene of the play he tells Dr Parpalaid that his “involuntary diagnosis-making” has become so highly developed he dare not look in the mirror. Not, at any rate, with his tongue in his cheek.

Romain was surely aware of Nietzsche’s visionary portrait of the “great deceivers”, written forty years before his play:
“The point of honesty in deception: In all great deceivers there takes place a remarkable process to which they owe their power. In the very act of deception with all its preparations, the dreadful voice and face and gestures, amid the whole effective scenario, the belief in themselves overcome them; and it is this belief which then speaks so miraculously, so persuasively, to their audience... For men believe in the truth of all that is seen to be firmly believed.”

In 1923, Knock’s claims to effectiveness were mostly laughable. The farce was still a game. Medicine lacked sufficient prestige for its authority to be recognised as a law of nature, as Simone Weil, pointed out in her essay The Power of Words. She comments specifically on the power of institutions to “secrete” abstractions: “This particular kind of secretion is wonderfully comments specifically on the power of institutions to “secrete” abstractions: “This particular kind of secretion is wonderfully a denial of fresh anxieties that humankind would feed upon. Jules Romains acknowledged, though we didn’t yet know it, the mad-cap mechanisms that were going to rule the world, suggestion and self-suggestion. In Knock, like a prophet at the gates, Jules Romains suddenly shone a light on power, the upsurge of myths. Jules Romains, philosopher, moralist and dramatist, provided an admirable advance warning of the modern and all-encompassing mechanism of cohesion and conviction...”

Romains’s play is still read and studied by French schoolchildren, which is not bad for a writing. But it also reveals the dire effect on the original experimental society: France is now one of the most highly medicalised countries in the world. The postwar period saw the medicalisation of France in the grand style, a process dramatically accelerated by the events of summer 1968. “Knockism” has entered the French language, and is used occasionally in medical anthropology as a descriptive term for popular credulity and gullibility. Yet the play is more than a study of dupery: the Italian philologist Guido Ceronetti noted that all the old satires on medicine and doctors (and there is no shortage in French literature) look backwards, over their shoulder; Knock, on the other hand, steps confidently into the future. It is a play that capitalises on Marx’s idea of tragedy reinstated as farce—except that the farce comes first and the tragedy later. The villain of the piece allows himself a smile just once in the play, while reading the town crier’s mind. He has made a discovery, and it isn’t medical, but mythic. In the “Big Lie,” according to Hitler, there is always a certain force of credibility. Knock has found a way to deflect hubris. By deflecting it from himself, he obliges Nemesis to visit those who take him at his word. Nemesis is user-friendly and not at all dramatic, ladies and gentlemen, for these are modern times—Nemesis is the realisation that desire is both prerational and manufactured to the highest quality standards. Nemesis is the act performed. Just look around. Despite all our best efforts illness refuses to disappear. It takes on new forms; it turns up where nobody left it; it gets invented by the political and social relations of civilisation itself, which includes the medical profession. Then the misfortunes to which doctors owe their livelihood—illness is, at least, a natural evil—become morally ambiguous. People start to visit the doctor not so much because they are ill, but because they can’t be healthy. Soon doctors start to resemble lawyers, who also owe their livelihood to an evil, but not a natural one. And before we know it, we are opening the door on the world of Knock’s higher cynicism: with his right hand he accepts the fee for stilling the devil he set loose with his left... But that left hand has created a community of interests. Knock treats the people of Saint Maurice coldly, like an anthropologist. He simplifies what he says, then he repeats himself. Isn’t it that people ask to be deceived? All right, he will deceive them. Order requires domination, and domination requires a lie or two. So he gives their lives a medical meaning. That is: he extends the bounds of the biological, of whose oracles he is the interpreter, so as to make illness not just a bodily phenomenon but an organising principle for the effective administration of society itself. His argument is life, for that is what a doctor defends. His tools are ideals, seduction, fright, and, if necessary, the threat of violence. His power is his command of language: in that respect nothing has changed since Molière’s day: Knock is every bit as much a storyteller, raconteur, bluffer, salesman and “habile homme” as Sganarelle, who was a subversive valet and sham doctor. But who’s talking sham? Knock gives everyone the fever. He inoculates his patients with the one idea: self-preservation, at all costs. And even more disturbingly, as Nietzsche’s insight suggests, he is not a cynic at all: he might be the sinner in person, someone who lies not, as it were in the detail but in his very mode of existing.
We have to go back to the beginnings of Enlightenment and the twilight of the traditional world from which doctors derive their magical aura as healers to find out why. The first realisation that the equation “knowledge is power”—Knock’s equation—could turn in on itself, through the force of imagination, is to be found in the work of one of the Wittiest and most perspicacious philosophers of the Enlightenment, Georg Christoph Lichtenberg (1742–1799). Around the time of the French Revolution, that historical rupture that changed the role and status of the medical profession for better and worse, he wrote a short but pregnant aphorism. “Health”, he told his scrapbook, “is contagious”.17

REFERENCES AND NOTES
1 Romains J. Knock ou le triomphe de la médecine. Paris: Gallimard, 1924.