

COBB IRVIN SHREWSBURY

"SPEAKING OF
OPERATIONS--"

Irvin Cobb
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«Speaking of Operations--»:

Irvin S. Cobb

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Respectfully dedicated to two classes:

Those who have already been operated on

Those who have not yet been operated on

Now that the last belated bill for services professionally rendered has been properly paid and properly receipted; now that the memory of the event, like the mark of the stitches, has faded out from a vivid red to a becoming pink shade; now that I pass a display of adhesive tape in a drug-store window without flinching—I sit me down to write a little piece about a certain matter—a small thing, but mine own—to wit, That Operation.

For years I have noticed that persons who underwent pruning or remodeling at the hands of a duly qualified surgeon, and survived, like to talk about it afterward. In the event of their not surviving I have no doubt they still liked to talk about it, but in a different locality. Of all the readily available topics for use, whether among friends or among strangers, an operation seems to be the handiest and most dependable. It beats the Tariff, or Roosevelt, or Bryan, or when this war is going to end, if ever, if you are a man talking to other men; and it is more exciting even than the question of how Mrs. Vernon Castle will wear her hair this season, if you are a woman talking to other women.

For mixed companies a whale is one of the best and the easiest

things to talk about that I know of. In regard to whales and their peculiarities you can make almost any assertion without fear of successful contradiction. Nobody ever knows any more about them than you do. You are not hampered by facts. If someone mentions the blubber of the whale and you chime in and say it may be noticed for miles on a still day when the large but emotional creature has been moved to tears by some great sorrow coming into its life, everybody is bound to accept the statement. For after all how few among us really know whether a distressed whale sobs aloud or does so under its breath? Who, with any certainty, can tell whether a mother whale hatches her own egg her own self or leaves it on the sheltered bosom of a fjord to be incubated by the gentle warmth of the midnight sun? The possibilities of the proposition for purposes of informal debate, pro and con, are apparent at a glance.

The weather, of course, helps out amazingly when you are meeting people for the first time, because there is nearly always more or less weather going on somewhere and practically everybody has ideas about it. The human breakfast is also a wonderfully good topic to start up during one of those lulls. Try it yourself the next time the conversation seems to drag. Just speak up in an offhand kind of way and say that you never care much about breakfast—a slice of toast and a cup of weak tea start you off properly for doing a hard day's work. You will be surprised to note how things liven up and how eagerly all present join in. The lady on your left feels that you should know she always takes two

lumps of sugar and nearly half cream, because she simply cannot abide hot milk, no matter what the doctors say. The gentleman on your right will be moved to confess he likes his eggs boiled for exactly three minutes, no more and no less. Buckwheat cakes and sausage find a champion and oatmeal rarely lacks a warm defender.

But after all, when all is said and done, the king of all topics is operations. Sooner or later, wherever two or more are gathered together it is reasonably certain that somebody will bring up an operation.

Until I passed through the experience of being operated on myself, I never really realized what a precious conversational boon the subject is, and how great a part it plays in our intercourse with our fellow beings on this planet. To the teller it is enormously interesting, for he is not only the hero of the tale but the rest of the cast and the stage setting as well—the whole show, as they say; and if the listener has had a similar experience—and who is there among us in these days that has not taken a nap 'neath the shade of the old ether cone?—it acquires a doubled value.

"Speaking of operations—" you say, just like that, even though nobody present has spoken of them; and then you are off, with your new acquaintance sitting on the edge of his chair, or hers as the case may be and so frequently is, with hands clutched in polite but painful restraint, gills working up and down with impatience, eyes brightened with desire, tongue hung in the middle, waiting for you to pause to catch your breath, so that

he or she may break in with a few personal recollections along the same line. From a mere conversation it resolves itself into a symptom symposium, and a perfectly splendid time is had by all.

If an operation is such a good thing to talk about, why isn't it a good thing to write about, too? That is what I wish to know. Besides, I need the money. Verily, one always needs the money when one has but recently escaped from the ministering clutches of the modern hospital. Therefore I write.

It all dates back to the fair, bright morning when I went to call on a prominent practitioner here in New York, whom I shall denominate as Doctor X. I had a pain. I had had it for days. It was not a dependable, locatable pain, such as a tummyache or a toothache is, which you can put your hand on; but an indefinite, unsettled, undecided kind of pain, which went wandering about from place to place inside of me like a strange ghost lost in Cudjo's Cave. I never knew until then what the personal sensations of a haunted house are. If only the measly thing could have made up its mind to settle down somewhere and start light housekeeping I think should have been better satisfied. I never had such an uneasy tenant. Alongside of it a woman with the moving fever would be comparatively a fixed and stationary object.

Having always, therefore, enjoyed perfectly riotous and absolutely unbridled health, never feeling weak and distressed unless dinner happened to be ten or fifteen minutes late, I was green regarding physicians and the ways of physicians. But I

knew Doctor X slightly, having met him last summer in one of his hours of ease in the grand stand at a ball game, when he was expressing a desire to cut the umpire's throat from ear to ear, free of charge; and I remembered his name, and remembered, too, that he had impressed me at the time as being a person of character and decision and scholarly attainments.

He wore whiskers. Somehow in my mind whiskers are ever associated with medical skill. I presume this is a heritage of my youth, though I believe others labor under the same impression.

As I look back it seems to me that in childhood's days all the doctors in our town wore whiskers.

I recall one old doctor down there in Kentucky who was practically lurking in ambush all the time. All he needed was a few decoys out in front of him and a pump gun to be a duck blind. He carried his calomel about with him in a fruit jar, and when there was cutting job he stropped his scalpel on his bootleg.

You see, in those primitive times germs had not been invented yet, and so he did not have to take any steps to avoid them. Now we know that loose, luxuriant whiskers are unsanitary, because they make such fine winter quarters for germs; so, though the doctors still wear whiskers, they do not wear them wild and waving. In the profession bosky whiskers are taboo; they must be landscaped. And since it is a recognized fact that germs abhor orderliness and straight lines they now go elsewhere to reside, and the doctor may still retain his traditional aspect and yet be practically germproof. Doctor X was trimmed in accordance

with the ethics of the newer school. He had trellis whiskers. So I went to see him at his offices in a fashionable district, on an expensive side street.

Before reaching him I passed through the hands of a maid and a nurse, each of whom spoke to me in a low, sorrowful tone of voice, which seemed to indicate that there was very little hope.

I reached an inner room where Doctor X was. He looked me over, while I described for him as best I could what seemed to be the matter with me, and asked me a number of intimate questions touching on the lives, works, characters and peculiarities of my ancestors; after which he made me stand up in front of him and take my coat off, and he punched me hither and yon with his forefinger. He also knocked repeatedly on my breastbone with his knuckles, and each time, on doing this, would apply his ear to my chest and listen intently for a spell, afterward shaking his head in a disappointed way. Apparently there was nobody at home. For quite a time he kept on knocking, but without getting any response.

He then took my temperature and fifteen dollars, and said it was an interesting case—not unusual exactly, but interesting—and that it called for an operation.

From the way my heart and other organs jumped inside of me at that statement I knew at once that, no matter what he may have thought, the premises were not unoccupied. Naturally I inquired how soon he meant to operate. Personally I trusted there was no hurry about it. I was perfectly willing to wait for several years, if

necessary. He smiled at my ignorance.

"I never operate," he said; "operating is entirely out of my line. I am a diagnostician."

He was, too—I give him full credit for that. He was a good, keen, close diagnostician. How did he know I had only fifteen dollars on me? You did not have to tell this man what you had, or how much. He knew without being told.

I asked whether he was acquainted with Doctor Y—Y being a person whom I had met casually at a club to which I belong. Oh, yes, he said, he knew Doctor Y. Y was a clever man, X said—very, very clever; but Y specialized in the eyes, the ears, the nose and the throat. I gathered from what Doctor X said that any time Doctor Y ventured below the thorax he was out of bounds and liable to be penalized; and that if by any chance he strayed down as far as the lungs he would call for help and back out as rapidly as possible.

This was news to me. It would appear that these up-to-date practitioners just go ahead and divide you up and partition you out among themselves without saying anything to you about it. Your torso belongs to one man and your legs are the exclusive property of his brother practitioner down on the next block, and so on. You may belong to as many as half a dozen specialists, most of whom, very possibly, are total strangers to you, and yet never know a thing about it yourself.

It has rather the air of trespass—nay, more than that, it bears some of the aspects of unlawful entry—but I suppose it is legal.

Certainly, judging by what I am able to learn, the system is being carried on generally. So it must be ethical. Anything doctors do in a mass is ethical. Almost anything they do singly and on individual responsibility is unethical. Being ethical among doctors is practically the same thing as being a Democrat in Texas or a Presbyterian in Scotland.

"Y will never do for you," said Doctor X, when I had rallied somewhat from the shock of these disclosures. "I would suggest that you go to Doctor Z, at such-and-such an address. You are exactly in Z's line. I'll let him know that you are coming and when, and I'll send him down my diagnosis."

So that same afternoon, the appointment having been made by telephone, I went, full of quavery emotions, to Doctor Z's place. As soon as I was inside his outer hallway, I realized that I was nearing the presence of one highly distinguished in his profession.

A pussy-footed male attendant, in a livery that made him look like a cross between a headwaiter and an undertaker's assistant, escorted me through an anteroom into a reception-room, where a considerable number of well-dressed men and women were sitting about in strained attitudes, pretending to read magazines while they waited their turns, but in reality furtively watching one another.

I sat down in a convenient chair, adhering fast to my hat and my umbrella. They were the only friends I had there and I was determined not to lose them without a struggle. On the wall

were many colored charts showing various portions of the human anatomy and what ailed them. Directly in front of me was a very thrilling illustration, evidently copied from an oil painting, of a liver in a bad state of repair. I said to myself that if I had a liver like that one I should keep it hidden from the public eye—I would never permit it to sit for its portrait. Still, there is no accounting for tastes. I know a man who got his spleen back from the doctors and now keeps it in a bottle of alcohol on the what-not in the parlor, as one of his most treasured possessions, and sometimes shows it to visitors. He, however, is of a very saving disposition.

Presently a lady secretary, who sat behind a roll-top desk in a corner of the room, lifted a forefinger and silently beckoned me to her side. I moved over and sat down by her; she took down my name and my age and my weight and my height, and a number of other interesting facts that will come in very handy should anyone ever be moved to write a complete history of my early life. In common with Doctor X she shared one attribute—she manifested a deep curiosity regarding my forefathers—wanted to know all about them. I felt that this was carrying the thing too far. I felt like saying to her:

Конец ознакомительного фрагмента.

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