

# LITERATURE AS MEDICINE: SYSTEM INTERNATIONAL (SI) UNIT AS STYLE AND STRATEGY IN NIGERIAN PHYSICIAN PROSE FICTION

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## Abstract

From our sustained investigations on the Nigerian novel, there has been no serious attempt to discuss the literary quality of the Nigerian physician prose fiction, especially with respect to the stylistic fictionalisation of the system international (si) unit. Previous efforts in journal articles and limited reviews emphasised theme and style of Achebe, Soyinka, and their contemporaries, for instance, (Onuora 1976, Yerima 2008, Ezeigbo 2008). This constitutes a gap and widens the paucity of research in our study, thus necessitates the current study. While not ignoring the thematic preoccupation and the social relevance of Anthony Marinho's *The Victim* (2004) and *Nene and Other stories* (2005); our main aim in this paper is to examine the system international (si) unit as literary style and creative strategy in the Nigerian physician prose fiction. The major findings of the study include: the Nigerian novel experiments with fiction in diverse forms in the examination of unusual themes like gigolo, nymphomaniac, gender and age assumptions of menopause, sperm movement and pregnancy hypotheses, ultrasound machine and gender determinism. We conclude that there is high positive correlation of medicine with literature. In view of the contributions of physician creative writers to the expansion of Nigeria's literary landscape, we advise that the Association of Nigerian Authors (ANA) recommend that our universities as agencies of development create the Departments of

physician literature for physician literature to thrive in Nigerian Universities. If indeed our proposal could have a good hearing, it could relate people and engineer development. It could also be a source of fund generation for our universities as foreign scholars and researchers may be interested in the new literary study.

**Keywords:** Literature, Physician, Style, Medicine, System International (si) unit

## Introduction

Literature is perhaps one of the most elusive terms to define. In the attempt to offer a proper and precise definition of literature, scholars have considered it variously based on some parameters. These parameters include functions and structure among others. For instance, Wembley (as cited in Nzeogwu, 2009) submits that, "Literature is one of the great creative and universal means of communicating the emotional, spiritual and intellectual concerns of mankind..." it then means that the creative capacity of the literary discipline distinguishes literature from other forms of writings or disciplines such as Physics, Chemistry, Mathematics, Geography, History, journalistic writing and many more. For instance, while historians and journalists draw their materials from actual events which must have occurred in specific locations at a specific time, relying on the five W's (Who? What? Where? When? and Why?), Literature thrives on imagination and it imagines very plausible events. Also literary culture is the production of literary works, especially writings having excellence of form, or expressing ideas of permanence, of universal interest, or the body of written works produced in a particular language, country, or age (Websters, 2006:1071). In the same vein, "Literature is the body of written, printed matter, work, material of a particular type, genre such as poetry, novel, essay, etc of a particular culture, or people Scandinavian literature" (Summers *et al* 2006:676). In the emphasis of

Websters and Summers *et al*, Literature may be culture specific, it is universal in its process of communicating with the writer's public.

In the words of Harrison (as cited in Akporobaro, 2008:55)

Literature is an elusive term, we hear it applied to advertising and historical tracts and novels and poems and plays. When does a single document, expressing the ideas or sentiments or knowledge of a single man become a single object for study and appreciation of a humanistic work?

While the extract confirms the elusiveness of the literary discipline, it also reflects its obvious distinction as artistic construct in a language designed to bring pleasure to those who may hear or read it. Harrison further describes literature as "an edifice constructed for aesthetic consideration". Oyegoke (2009:67) adds a more interesting perspective.

Literature is far more productive hatchery for new lexicographical, semantic, and grammatical linguistic additions than the conversational medium.

We agree with the critic's perspective that literature is capable of linguistic regeneration. This perspective compares Literature with the conversational medium and scored the literary discipline above other known creative aesthetics.

Again, on the definition of Literature, Ibitokun (2003:29) attempts something that is novel, a bit complex but detailed. He says,

By its simplistic definition or signification, Literature is a refraction like the word. For some people, it is super life; for others, it is sub-life. What we need to know is that Literature is not born *exnihilio*. It is drawn from life because the writer through whom it comes to light is a social product

who hops in an idiosyncratic way to signify to his audience what he assumes to be truth. By his artistic innovations, he presents and represents those impressions which have been expressed from the beginning of time.

What is significant about Ibitokun's definition of Literature is the highlight of the "word and the world" as the roots of literature. According to the 2003 publication of the critic, Literature means "Oro" or "Aye". The literary discipline is "divine", "oral", "scriptic", "whimsical kinesic bolt", "diachronic", "synchronic", "impression", "expression", "parole", "speech", "statement", "a mystery", "a genius", "enigma", "a damnably approximative phenomenon" (Ibitokun 2003). In all, Literature is a collective pool of human experience that is inexhaustible, complex, and elusive.

All the descriptions of Literature given shows that the literary discipline is not only infinite in designs but also have several parts and vitalities drawn in collaborative acts with the society for pleasure, entertainment, and education. We may base on the fluidity of the perspectives on *litteratus* attempt a description of the literary discipline. Literature is a written material such as poetry, drama, novel and essay or a body of written work that is peculiar to a particular people, culture in a language within an epoch, or age or a period on a particular subject having excellence of form of expression, eulogising, emphasising, predicting, projecting, defending, refuting and defining an ideology or philosophy of permanence, restricted or of universal interest.

With respect to the medical dimension of the study, it is important to cite the position of Omobowale (as cited in Virtanen and Owonibi, 2008:86)

The symbiotic relationship between Medicine and Literature have been acknowledged since the classical age, although effort to harness the resources of this unique relationship did not gain prominence until recently.

The passage is illustrative example of the complementarities of Medicine and Literature. These fields of study were seen as diametrically opposed because Medicine is based on empiricism while Literature is largely rooted on imagination. Recent remarks that imaginative literature is complementary medicine because it provides the outlet for emotion seems to draw attention to the contentious positive correlation of Medicine with Literature.

Predictably, the extent to which Medicine and Literature guarantee psychological and physiological equilibrium have excited and still generates varieties of general and academic interest and research, it could have been surprising, if the study with the element of drama in it, had not. The paper hopes to show the creative quality and relevance of Medicine (i.e the system international unit) to the discipline of Literature. According to Ivan Illich, (as cited in Haralambos and Holborn, 2008:291) Medicine or Medicalisation is

The activities and conditions that might have otherwise be ignored or seen as a social problem or a normal part of life, as have all come to be defined as medical issues which fall under the expertise of the medical profession

“Medicine may also be defined as the study and practice of treating or preventing diseases and injuries” (Durrell 2009). Also, “Medicine or medical jurisprudence, derived from the 17th century Latin words, *medicus* or *medicallis* physician relate to the science of medicine, cure or treatment of patients by drugs etc as opposed to surgery” (Summers *et al* 2006:741). All the perspectives of the critics on Medicine tend to point to one direction, the changing relationship between patients, doctors, and forms of knowledge. In other words, illnesses may be seen as a social construct and not wholly biological. Like crime, it disturbs societal functioning, but its deviance can be controlled or forced into performing its social roles.

## Style

Style in the words of Wu, 2007, varies from one author to another and are sometimes eccentric. Jonathan Culler (as cited in Akporobaro, 2008) says style is the “poetics of fiction” **that aids the writers sophisticated projection of reality** (Our emphasis added). Also, in the words of Leech and Short (as cited in Oha, 2006) “style is a way in which language is used”. All the definitions given on style show the concept as idiosyncratic and or infinite. It is a formal one with one innovation giving way or clearing the path for another. It is not surprising therefore, that Marinho’s style in his novels particularly *Nene* appears confusing with the unusual such as: the capitalisation of sentence fragments, use of figures, formulas, measurements, symbols and so on. Examples of these are: “ $R^{13}EAD = R$  to the power 13 and Discuss =  $R^{13}EAD$  (*Nene* p.106), “70:30 radions” (*Nene*, p.307), “linear measurements, 0.0” (*Nene*, p.33). In the novel, Marinho’s language style borrows across disciplines, including Mathematics, Physics, Chemistry, Engineering and so on. In addition, the novel’s medical language is multiple, that is, a combination of medical English, medical German, medical Italian, medical Dutsche and medical Scandinavian apart from borrowed words and phrases of Greek and Latin. With these, readers of the novels are tasked with analysing ordinary, literary, and medical languages of the novelist.

## Theoretical Framework

This study is premised upon psychoanalysis, the invention of Sigmund Freud, a Viennese physician’s form of curing mental psychological and physiological disorders through an investigation into the relationship between the “conscious and unconscious elements of the mind” (Freud, 1939).

The theory insists that patients should be made to speak out their ailments to bring into the conscious mind all repressed conflicts and fear. This action will make trauma less harmful when exposed to

the consciousness. This means the unconscious part of the mind has a very strong influence over the conscious. Central to Freud's psychoanalysis is the belief that "repressed materials or traumatic past can be given a sublimated expression", (Freud 1971) when it is discussed, either with a physician, a friend or expressed in the form of writing. Writing may not provide a panacea; it offers a palliation for the symptoms of post-traumatic stress disorder, the opportunity to formulate traumatic memories, either in the form of scripto therapy or brief but coherent autobiographical testimony. In other words, the more detailed and vivid the articulation of traumatic past or injury is, the better the chances of healing and recovery. Scripto therapy indeed has been used to heal forms of disorder (Churchill 1982, Carter 1986). For instance, Virginia Woolf who was diagnosed of maniac depression, childhood sexual abuse, and schizoid survived almost six decades because of the artistic transmutation of pain.

Freud insists that as the mind keeps all unacceptable impulses out of awareness, still, "they manifest in the realm of dreams, dream-work...dream distortion" (Phillip and Waugh, 2001:24-25) as well as "parapraxes screen memory and lips of the tongue like jokes, memory failures as in forgotten appointments, misreading, mislaying and other unintended actions" Freud (as cited in Virtanen and Owonibi, 2008).

In addition, the outcome of the early 2018 research of the proceedings of the National Academy of Sciences (PNAS) reveals that brain wave synchronization in the context of pain offers new insight into the role brain to brain coupling may play in touch induced analgesia or healing touch. This is advancement over Freud's rigorous storytelling to kill pain. Goldstein *et al's* electro electroencephalography (EEG) or interpersonal synchronization allows a patient or sufferer of disorder to physiologically mirror the people they are with. The new pain killer illustrates how the power of the human touch is associated with some brain wave synchronicity in the alphas band that activates healing and reward mechanisms in the brain. The researchers explain,

“you may express empathy for a partner’s pain *and or disorder*, but without touch, it may not be fully communicated (Emphasis added). The passage illustrates the healing power of the human touch as the brain falls into sync to get the pain vanished. (See Goldstein *et al* The role of touch in regulating inter partner physiological coupling during empathy for pain. Retrieved April 17th 2018 from <https://www.com/articles/S41598-017-03627-7>).

### Textual Analysis

The process of analysing and evaluating the Nigerian novel has resulted in a wide range of theories and positions about the genre of literature. Awosika (as cited in Nzeogwu, 2009) states, “until the extent of the novelist’s intention is established, it is a complex and delicate adventure to arrive at any judgment on its aesthetic form”. Thus, the interpretations of every new novel (including Marinho’s) to an extent must vary. As a result, Marinho’s *The Victim* (2004) and *Nene and other stories* (2005), henceforth *Victim* and *Nene* should be of critical interest to curious researchers in terms of the experimentation with unusual theme, style, and unique fictional techniques, especially when the professional engagement of the novelist is considered.

The *Victim* is the story of the innocent protagonist, Joe Offaro who sets out on a business trip to Northern Nigeria. He had not really left Lagos when he runs into a dying accident victim. He takes the victim in his car to St. Sebastian Hospital. “The man was still coughing and rolling on the seat when Joe parked in front of the Casualty Department” (*Victim* p.2). Cases of road accidents and bloody clash involving rival churches swell the list of patients in the hospital. As Dr Kitan confirms the accident victim dead on arrival, the story peaked. Joe Offaro decides to return home to relate his experience to Naomi his wife. Dayo, Naomi’s ex-lover is caught having sex with her in his matrimonial bed. Joe Offaro engages Dayo in a fight as the protagonist recalls perspicaciously.

...So you think you can just go around proving your foul theories on other people's wives do you? Joe hissed at Dayo who had again taken up a defensive stance. Suddenly Joe kicked out, his toe caught Dayo below the belt completely unprepared. He went down like a log of wood with a scream of anguish. Well, I have a theory of my own, Joe continued with a sardonic laugh. If a bastard is kicked in the balls enough, he becomes sterile (*Victim* 19)

With such a nymphomaniac character like Naomi, the novelist tends to down play the value society places on the relationship between male and female gender especially in the Nigerian society. Marinho's extract is an example of sexual politics in contemporary Nigerian literature.

After Joe's fight with Dayo, unaware of the blood stain on his white shirt, he went to the police station to report the encounter he had with the unknown accident victim. His blood-stained shirt, and scars implicated him as the suspect and killer of the accident victim he had helped to the hospital. "You did not mention how you came across the injuries flashed the sergeant" (*Victim* p.23). So, Joe Offaro is arrested, detained, and charged for murder. Superintendent of Police", Utok, a reckless police detective investigates Joe's murder case. He insists the Police overlook the fact of the matter and criminalize the allegation against the protagonist for it to appear colourful, convincing and attract public interest. The corrupt police detective designed a plot to further implicate Joe Offaro and bring him to public ridicule. Superintendent Utok insists,

The man should be arrested away from the station so that it will appear to everybody inside and outside the force that we tracked him down. "Don't you want promotion, man? ...the best way to go about the affair was to put a "WANTED" advertisement in the paper. "That way"

continued the superintendent; we kill two birds with one stone. We announce that we are looking for this man and get information just in case he does not turn up. But more importantly, we get in the public eyes as their protector (*Victim*, pp. 36-37).

The passage reminds us of the deliberate abuses of public offices and positions especially by the Nigeria police through disinformation, distractions, misinformation to dissipate facts and earn unmerited applause. Naomi excludes Dayo from her statement to the police while Dayo's evidence helped to make Joe Offaro a criminal. An issue in the 191-page novel fills readers with awe, a creative style which agrees with the position of Anthony Throlope (as cited in Okhuhomo, 2001). He warns "let an author tell his tale so as to touch his reader's heart and draw his tears."

Next is Marinho's short story novel, *Nene*. The stories are structured into twenty-seven short stories all in twenty-seven separate chapters that are independent of the other. As a result, the study explores synchronization in the discussion of the stories in Marinho's short story novel to reveal the writer's literary quality, this includes thematic, stylistic and characterization techniques of the novelist. The items chosen are enough to adequately represent in our view the literary strategy of the physician novelist. We do not follow Marinho's view about life in the chronological order presented in his novel. This also does not frustrate our intention to pursue the writer's level of realism which we may describe as 'reflective realism'. The stories are based on the author's significant level of experience.

We begin with our first story chapter, "The Rescue Plan" which is also the first of the stories in the novel. The focus of the writer in the story is hygiene especially of Nigeria's tertiary institutions. Nene, Yemi and her room mates have just resumed back into their overcrowded classrooms. Students' misbehaviour expresses itself in the form of

drugs, riots, female undergraduates as educated harlots, often described as academic freedom. The physician writer reveals the social economic implications of uncontrolled childbirth as Nene is born within a year of Naomi. The birth of Nene results from the belief that “gravity will not allow a pregnancy to catch if they did it standing up” (*Nene* p.4). This means a female can get pregnant from any position.

The writer who presents this story in the Eye of God narrative gives the example of Iku-Nla, a lecturer in Nene’s nameless university who picks his biological daughter inadvertently, while preying around for undergraduates who are part time prostitutes. The language of this story is consistent with modern usage, which is a style favoured by young university educated writers lacking the overt orality and colloquialism of traditional African speakers of English. The incident and character that we find in “The Right Certificate” are very revealing about the Nigerian society. The story takes experimental health view of the masses. The extract below reveals:

You have an ulcer in the mouth... They are called aphthous ulcers... spread by kissing and improved by regular cleaning of the teeth, gums and under the tongue. Even gargling with toothpaste for at least five minutes, while you are in the shower will prevent them (*Nene* p.209).

Melodrama resurfaces in the story through the characters of Yemi, Jimi, Bobo, Sheri, Ngozi and Nene. The passage reveals the various dental related implications of regular and irregular cleaning of tooth, gums and under the tongue as well as gargling. The writer tries to avoid needless elongation of the story to free himself from complex plot to achieve a consciousness of style that shortens the story to impressive form.

“Testing the Waters” our third in *Marinho’s* collection of short stories is metaphorical view of sexual abuse and related implications. In this short story, the writer tells his story within a story to achieve

gripping aesthetics simultaneously. Although, both stories in one teach major but similar theme of unwanted pregnancy. The central idea of each story is how most ladies and young men go into sexual relationships just for the fun of “testing the waters”. Our storyteller questions rhetorically

Do you know how many girls get drowned, used, and are left with nothing but lost virginity and unwanted pregnancy for testing the water “my boyfriend is too quiet” or I want some excitement, life is passing me by” (Nene, p.225)

The central issue of the story is what is expected of the youths when confronted with the uneasy choice between decline and compromising in the quest for casual sex. The story nibs the bud of the pranks ladies play when they are reluctant to the pressure from male’s insistence on sex. The physician storyteller reveals that ladies either request for condoms or pretend to be menstruating. Females may insist that boys produce “AIDS, gonorrhoea, candidiasis and trichomonas certificates” (Nene, p.224). The storyteller gives the example of Sheri who didn’t know she was pregnant until it was three and half months grown. The boy who impregnates her rely on the theory of “one time never result in pregnancy” (Nene, p.227). The Nigerian obstetrician/gynaecologist continued his sex education centred story thus,

Those sperm have a way of swimming into places that you think they don’t get permission *coitus interruptus*... between the legs and no penetration. They will get there (Nene, p.228)

The extract may exude laughter; still we are not veiled against its very important messages that are contained in the sex education story. Marinho regrets that “the gutters are full of aborted mistakes and getting fuller daily” (Nene, p.231). The work does not only exude symbolism, it celebrates it. But it subsumes to the common everyday

experiences of sexual misbehaviour. Given the above narrative mode, its sexually erotic graphic passage may not be labelled as involving or celebrating sex in an unpleasant way as they are for sex education and are not meant to excite the reader. As a medical doctor, the novelist achieves his styling by adopting a narrative technique without which his satiric mode would not have been successful.

Our fourth story choice in the collection is “water wars”. The writer opens the depth of environmental problems, shortage of water on campuses of Nigeria’s tertiary institutions. The nameless and overpopulated city polytechnic in the story uses “pit latrine” (*Nene*, p.33). The unhygienic condition of the campus is so bad that “many a kiss was exchanged for a drop of water” (*Nene*, p.31). The condition led to riots, bloodshed, and eventual closure of the campus. This aspect of the story is a true reflection of the ongoing strikes, maiming and killings in the nation’s tertiary institutions. The writer emphasizes the relevance of water to man:

The body loses sweat. In the tropics, a body loses 3 to 4 litres of fluid a day to urine and perspiration. If that water is not taken in, much will still be lost, urine will become concentrated and chemical will be deposited in the kidneys causing kidney stones, leading to pain, blood in the urine and passage to renal stones in the urine and back pressure in the kidneys (*Nene*, p.33)

The medical language Marinho deposits naturally in his work, seems to have rebelled against the readership consumption attitude of the Nigerian society. Being a physician creative writer, some of the contents of the stories require a deeper level of interpretations, yet irrelevancies and contradictions and carefully avoided to achieve smooth, vivid, and telling piece in the story.

In our fifth story, “killing me softly”, Marinho adopts a consistently ironic mode throughout in the chapter. The story criticizes

the fear of menopause and confirms its manifestations in both men and women. From the writer's perspective, when a man or woman gets old, menopausal stage in life inevitably sets in but differently in man and woman. This means it may be wrong to assume that such inevitable biological experience is associated with females only. The female character in the story announces to her husband mockingly "I heard on the radio that you men get the menopause like we get the menopause Ha! Ha!, welcome to the club" (*Nene*, p.283).

Our sixth story, "Elizabeth will Never be King" combines history with traditional mysticism and science to reveal societal preference for male children, especially by a throne in need of an heir. King Harry of the English Hampton Court desires a male to the royal family to put an end to his shame among his subjects. At first, the image emerging from the ultrasound machine reveals the child in the making as a boy. Unfortunately, the child who emerges finally from the birth is a girl. As a result, the king feels betrayed by soothsayers, physicians, magicians as well as the Almighty God. King Harry arrives at a death knell, accuses God of partiality for the uneven distribution of male child. Marinho attempts to draw significant conclusions on global gender problems and politics as revealed in the inquiries below,

Now some countries are delivering ratios of 70:30 for boy:girl. This gender bias is at its most grotesque and extreme. Where are the girls going to come from to marry this artificial excess of boys? (*Nene*, pp.307-308).

The passage revives the problem of gender imbalance generally. The seventh story chapter which is our last choice of story, though not the least in the collection is, "there is no malaria in Putney". We have the situation of race, racism as the focus of this story. In the story, Dr Joachim requests the help of Dr Coombs to ascertain the delirious nature of the illnesses of a couple. Their blood samples were taken, "looking for toxic viral particles in the blood film" (*Nene*, p.390). Dr

Coombs however believes that wrong diagnosis results from the test when he heard that it was conducted by Professor Adebo, a Nigerian consultant. So, he ordered Professor Kumberley, a white man to rediagnose the patients. The story revisits western discriminations against Africans who are modern medicine practitioners in the West.

Marinho expands his theme of racism to include attempt by the west to 'colonise' and or control the system of knowledge. He explains instances of how proposals from Africa on the control of malaria, global warming and so on, are withdrawn from the priority list of International Research. The medical doctor novelist gives the example of Dr Samuel, an African, a Nobel Prize Winner for medicine whose proposal for a vaccine against malaria suffered a discriminatory neglect. To summarize, Marinho employs an elastic variety of styles, from maniac stream of consciousness to lucid omniscience. As the stories are, Marinho we may say represents a school of thought of Scottish fiction writers, particularly strong on the short story. Marinho's stories are linguistically exciting, varied, exploiting the space between working class medical doctor and literary philosopher. Finally, the themes of most of the stories are similar hence we are faced with the complex task of choice in our selection of the stories in the 405-page short novel.

### **Characterization and Character's special traits in Marinho's *The Victim* and *Nene and other stories***

As a necessary follow up to the discussion of the primary texts, we may attempt a brief discussion of the character traits found in the novels of Anthony Marinho. The concept "character" in the words of Oyegoke (2016:151) is "a free moral agent with a capacity to choose, had a communicational mandate to articulate life". In the perspective of Adebajo (2010) a character refers to "a deeply complex intricate web...agent of moral reconstruction. The views of these Nigerian scholars trigger a paraphrase of Aristotle's as the most important defining features of ethical conduct (Aristotle 1962). In psychology, a

character refers to a type of mask or appearance we represent to the world (Kennedy and Gioia, 2007). We may then describe a character as distinct quality(ies) that differentiate one person or (things) from all others. Thus, a writer of fiction creates characters to represent or reflect our own human nature. Under the influence of pioneer psychologists like Freud and Jung, psychology became an essential part of the creation and study of literary characters. We understand that Freud laid some of his philosophical conclusions in psychology by insisting that there is a link between medicine and literature as seen in his example of the Greek play, *Oedipus Rex*, one of the seven plays that survived out of the 120 plays of Sophocles (496-406BC), the Greek tragedian (Drabble *et al* 2007:670). Without any doubt, the presentation and understanding of characters is the major aim of fiction and literature.

Character's special trait that we observed in Marinho's prose fiction are the intra, inter, dissociative identity (noticeable) and Factoid (Repeated). The intra trait is a psychological experience known only to the character. This is a disorder in the first degree. Example of this is Joe's deadly fight with Dayo whom he caught having sex with his wife, Naomi in his matrimonial bed. The determined Joe fights Dayo with the intention to render him sterile with "frequent kicks in his balls" (*Victim*, p.19). The inter trait externalizes the intra by involving other characters in communication. We may not give any example of this in the novel since it is a common experience as communication exists generally between and among characters in the novel. The dissociative identity (noticeable) disorder also exists as character trait. In this case of disorder in the second degree, characters may not engage in the experience consciously. This experience is spasmodic, that is it occurs briefly in the life of a character and not often. Example of this in Marinho's (*Victim* p.19) is seen from the perspective of the protagonist, Joe Offaro "This is the last time I try to help someone in trouble". The Factoid (Repeated) is repetitive in nature as the concealed thoughts of

the character are expressed to achieve psychological relief. Example of this is Marinho's (*Victim* p.21) "she mumbled a reply, but no words came, only sounds" This was the outcome of the fights between Dayo and Joe Offaro.

Character representation in the novel is neither paragons of virtue nor monsters of evil nor are they impossible combinations of contradictory units. The characters are consistent with their behaviours unless there is a clearly stated and sufficient reason for a change in behaviour. There is evidence of character's psychotic alteration of behaviour in the selected works. Marinho's characters, the protagonist in *Victim* to be specific appear in the novel in a logical combination of auditory, kinesthetics and tactile. The creative representation of male characters in the *Victim* and *Nene* appears lionized (for instance, Dayo, Offaro, Police officer Utok, Iku-Nla, King Harry, Dr Joachim) while females are generally presented as underdogs (i.e Naomi, Iku-Nla's daughter, female undergraduate prostitutes). The characters in Marinho's novels analysed in the study are presented as suffering from one form of disorder or another. It is as a result that we briefly discuss Sigmund Freud's psychoanalysis, but with emphasis on the present state of knowledge of psychoanalysis.

In the obvious medical setting of Marinho's *Victim*, he introduces his accident victim using doctor patient communication mode of discourse, thus combine medical discourse with literary narratology. This means the medical doctor writer tells what the patient expressed in the absence of the patient's own voice as often encountered in pathology; the issue of the point of view in arguing for a "dialogic" (patient and physician) rather than the traditional "monologue", (physician only), the story of the patient is addressed, King and Standford (as cited in Durrell, 2009). The physician writer uses medical concepts, phrases, language etc that explain new concepts by means of familiar concepts (conceptual metaphor), thus using

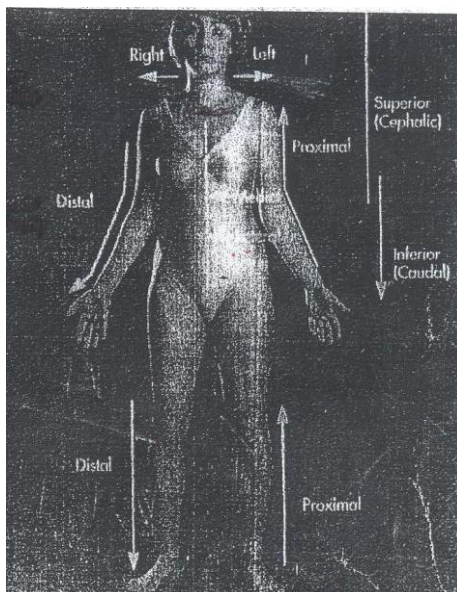
metaphor as concept dependent to give its complete meanings. Marinho's *Victim* reads,

The man had obviously had a final bout of coughing which had splattered blood up the backrest and thrown the man off the seat onto the floor to his final resting place in the car... He debated the need for a stethoscope confirmation of this dead also. Science prevailed over sentiment. Dr Kitan brought out the instrument from his pocket and promptly returned it when he realized the futility of the task of looking for a suitable place to apply it. Instead, he went round to the other side of the car and opened the door stooping down... he looked into the steering eyes. He found the pupils dilate positive sign of death. He brought the eyelids together...meanwhile James, you and Ade will arrange /the body/ on the seat of the car in a respectable manner (*Victim*, pp.5-6).

(Also see Benthall and Polhemus, *The Body as a medium of Expression*, 1975)

As seen in the above passage, "The body", we observed is a recurring concept in both physician and non-physician novels, for instance, the body in medicine may refer to the (living or dead) i.e. the flesh as opposed to the spirit, while traditionally in literature, it means human being. It means the usage of the concept, "body" or "the body" has now transcend interdisciplinary boundaries of medicine and literature, hence often used to describe the living and the dead in both medicine and literature. For example, see the contextual usage of "the body" in interdisciplinary context: "the body" in medicine, (*Victim* p.1) refers to the living or human being, while "The body" in (*Victim*, p.6) refers to the dead or corpse. Also, the body in literature for instance in Lekan Oyegoke's (*Ill Winds* p.9) describes the living or human being while the body (*Ill Winds* p.17) means the dead or corpse. The concept

is now popular, also connects both literature and medicine. The figure below gives a further explanation on the how this important concept connects medicine and literature.



The Body Parts (“bodice”)

### KEY

The body- The entire physical structure of a human being, living or dead, (corpse), the flesh as opposed to the spirit.

Cephalic - Relating to the head, situated in or near the head.

Anterior - Farthest away from the main, near the head

Posterior - Back of the buttocks, rump

Ventral - Relating to the front part of the body or situated on the upper or inner side of organ.

Dorsal *dorsalis* - Relating to the back or spinal part of the body.

Proximal - Situated close to the centre, median line, point of attachment or origin.

Dispel - Expel, relating to organ of elimination.

Bodice - A tight-fitting corset worn laced over a blouse (formerly) as a woman's undergarment but worn by men and women in the 16th century.

## Interpretations of Figure (2)

It becomes necessary, therefore, to attempt a brief explanation of how "the body" with medical origin now connects medicine and literature.

With the introduction of medical phraseologies into medicine by the Greek physician, Hippocrates in 460BC, ancient physicians saw the need to organise an approach to physician language which was mostly Latin and Greek derivative (Beck 1991). The body parts (figure 2) is essential part of this development in medicine "The body is the entire physical structure of a human being, the flesh as opposed to the spirit" (Summers *et al*, 2006:129).

Below is the specific interpretation of figure (2) The body- The entire physical structure of a human being, living or dead, (corpse), the flesh as opposed to the spirit. Cephalic- Relating to the head, situated in or near the head, Anterior- Farthest away from the main, near the head, Posterior- Back of the buttocks, rump. Ventral-Relating to the front part of the body or situated on the upper or inner side of organ, Dorsal *dorsalis*- Relating to the back or spinal part of the body, Proximal-

Situated close to the centre, median line, point of attachment or origin. Dispel- Expel, relating to organ of elimination, Bodice- A tight-fitting corset worn laced over a blouse (formerly) as a woman's undergarment but worn by men and women in the 16th century.

The figure combines the whole physical structure of a person, stresses the joints in a structural labelling and at the same time emphasizes that an organ is clinically not separate body part, but quasi universal part of the whole body. The concept, "body parts" was

acquired into the 16th century medical lexicography and has since strayed into literature, the novel especially. *Body Parts* (“*bodice*”) – A corset like undergarment worn by men and women in the 16th century. The front and back halves are called “bodice”. The word became a part of medical lexicography in the 16th century. (Benthall and Polhemus, 1975) Essentially figure (i) prove that certain concepts, subjects, genres, and forms may be used across disciplines but sometimes with meanings in inter-disciplinary contexts. Precisely, with the creative use of the word, “body” in the novels written by Nigerian physicians and non-physicians; this figure reveals what literature have not said but written on medicine. For instance, “A sob shook Kike’s body”, Oyegoke’s (*Winds* p.37). Thus, the figure provides new form of information and interpretive comment on “the body”. Also, you must bring me an hair from the chief’s/body/Olafioye’s (*Tomorrow* p.7). While non physician Nigerian authors often use the concept, “body” in a general context in their novels, the semantic context of the word by medical doctor novelists, for instance in *Marinho’s* (*Victim* p.2) is different as it carries medical connotations/meanings that have been imported into the novel. This is because of the changing medical approaches and views of diseases that resulted in particular ways of viewing the body through “clinical gaze”, *le regard*, a “patient has also come to be viewed as the body (Friedson, 1970:310). Thus, *Marinho* in *Victim* refers to the accident victim as “the body” (...*Victim* p.2). “Ade will arrange the body on the seat of the car in a respectable manner” (...*Victim* p.2).

We observed that *Marinho* uses metaphorical and symbolic meanings that are attached to the body parts’ and as naturally carried over to illnesses affecting the body parts and its profound impacts on the sufferer, (Damassio, 1999) as the body depression occasioned by the symptoms of the pathologist. In *Victim*, the accident victim was “coughing” ...blood from his mouth, nose and ear”, ...“the man coughed again spluttering blood all over Joe’s white shirt”, “he half-

dragged, half-carried the now struggling man towards the car” (*Victim* p.1). This means the unknown victim’s body communicates a language, as in the symptom that announces his own possible mortality. The “spluttering blood, in medicine is seen as the transmitter of a lineage, the blood disorder in the victim may extend through the entire proximal or ventral line of the sufferer’s blood relation. (Benthall and Polhemus 1975) This means the “blood” and “coughing” are the organ of contagion par excellence. And a “disease which, for instance, affects the bone marrow is symbolically one that touches the deepest cellular recesses” (Henri and Wulff2004). When a person suffers from an illness, the affected part of the body part or organ is not a separate body part, but a quasi-universal part of the whole body. Thus, the victim’s illnesses evoke inevitably the symbolic meaning that is acquired by a body part within the context of a culture’ (Zola, 1973), (Kerr and Lacelle 2000), (culture here refers to the signs of ill health), illnesses as expressed in physiological terms.

Interestingly, the anthropological, pathological, and ‘cultural’ referents to the body are its ability to serve as metaphor by acquiring a ‘new state’ or ‘new life’. This is because meanings are given to the body because of the carry over to illnesses, as associative meanings are attached to the respective body parts across languages and cultures. In medicine, patients are often described as ‘afflicted body parts’, though a physician may regard the body part as the patient as a whole (synecdoche), a frequent occurrence in biomedicine. The sufferer of an illness becomes the affected body part. So, unlike the ordinary metaphors seen for example in Oyegoke’s ...*Winds* and Olafioye’s *Tomorrow*, the metaphors in Marinho’s ...*Victim* are associative, thus revealing medicine as a collaborative exploration, yet defining “diseases or illnesses as segregate or distinct, not part of bodily functioning and that is why diseases are said to be ‘acquired’ in clinical referents” (Strong 1979).

In furtherance of the practical task of experimenting with medicine and literature, we express the (si) and language of medicine seen in the selected novels in the study. So that we may not destroy the general interest which arises from reading the progress, maturity and ‘creative-transfer of medical knowledge’ into the novel of medical doctor-novelists, we construct a table (i) of the system international (si) units/lexicalization of diseases and language of general medicine to reveal clearly the impacts of medical registers on the Nigerian novel or and to show the extent to which medical registers exist technically outside literature and of course demonstrate what literature has written but have not said about medicine. The Nigerian physician novels that are primary to the study that we engage in this table are (Marinho’s ...*The Victim* and *Nene*)

**Table (3) (SI) System International Units, Lexicalisation of Diseases and Language of General Medicine in the Nigerian Novel**

Y.P.P/N/Physicians	(SI)	LEX DSS/LGM
2005 (p.1-405), N+M	M, (N + p. 33) 4 litres	M, (N + p.5) sickle cell M, (N + p.24) kleenex
2004 (p. 1-191), V+M	M, (N + p. 66) 100-gallon water M, (N + p. 212) 25% M, (N + p. 311) 45 Inch (N+P292) a few millimetres M, (N + p. 367) 337 M, (N + p. 293) H <sub>2</sub> S M, (N + p. 307) 70:30 M, (N + p. 315) O <sub>2</sub> 5	M, (N + p.23) fever M, (N + p.23) VDRL M, (N + p.23) virus-(N+P183) LMP M, (N + p.183) breast cancer M, (N + p.224) candidiasis M, (N + p.192) incision M, (N + p.195) drugs M, (N + p.292) pulse less M, (N + p.314) genes M, (N + p.343) DNA M, (V + p.2) diagnosing. M, (V + p.3) casualty M, (V + p.5) anatomical M(V+P4) theatre M, (V + p.6) stethoscope M(V+P4) Patient card M, (V + p.9) operation

	M, (N + p. 338) 3D	M, (V + p.26) pathology St(V+P7) doctor
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**KEY**

Y.P.P/N/Physician- Year of publication, page, novel and physician

V.- *Victim*

N.- *Nene*

(SI) - System International Units (figures, measurements, formulas and symbols)

LEX DSS/LGM - Lexicalization of diseases and Language of General Medicine

**Interpretations of Table (I)**

The Nigerian novels examined in the study are two novels of Nigerian physicians that show clear evidence of the creative use of the system international units (si); lexicalisation of diseases and language of general medicine. In this case and for our purpose in the table, the physician novels are *Marinho's Nene* (N), and *Victim* (V). This means ordinary language is combined with medical and literary registers in the novels and in our analysis.

**System International (SI) Units** - However, this includes the formulas and, symbols used in *Marinho's, Nene* includes " $H_2O$ : (p.293) and " $O_2^5$ " (p.315)  $H_2S$  (p.292). The reason for the shortened forms in medicine and or science generally is for brevity or exactness as concepts should not be misplaced or misused. These may be strange to the literary field but applications and use in the novels connect medicine and literature. Influences overtime of German, France, Greek, Latin, Romans, and so on birthed a chain form to produce equations, or formulas which are now template for medical experiments. These symbols that are generally in use in modern medicine are also called "the System International Units (SI) which were approved internationally in 1960 for general scientific medical and technical use throughout Britain and the world (Beck 1992). Interestingly, such symbols now stray into the field of

literature since the medical doctor whose novels are being examined unavoidably transfer his medical language and experiences into his creative works especially the novel. It is as a result, the Nigeria physician demonstrate a mixture of literary grammar, and ordinary English. According to Henri and Wulff (2004), these are combined with,

medical English, medical *French*, medical *Dutch*, medical *Scandinavian*, medical *German*, medical *Italian*, and others that have now replaced Latin as vehicle for international communication in general medicine. (our emphasis added)

The above explains further the reasons behind the relatively complex form of the novels written by Nigerian physician writers, if compared with the novels written by non-physicians.

**Figures** - Some concepts in our selected novels are written in figures. Examples from Marinho's novel are "120 million", (*Nene*, p.212), "40 million", (*Nene*, p.212), %, (*Nene*, p.212), "100 level", (*Nene*, p.326) and 6591 (*Nene*, p.93), 320,17,400 (*Nene*, p.93), 280,491 (*Nene*, p.93). In the medical field, the reason for the reduction of words to figure may be for emphasis, precision, correctness and for speed realization as well as to avoid possible errors in the craft of numbers in words, such a practice is now a good part of the Nigerian novel.

**Measurements** - The medical doctor novelist, also transfer the use of measurement in medical textbook practice to his creative works. A few examples in Marinho's novel are "Body loses three to 4 litres of fluid a day" (*Nene*, p.33). These perhaps prove that the language of medicine comprises different fields of learning like Mathematics, Engineering, biology, physics, and chemistry. Other examples of measurement in the novel are (in lengths) "each breast is divided by two lines" (*Nene*, p.185) and linear measurements, 0.01 (*Nene*, p.87) millimetres (*Nene*... p.292) centimetres, 6 centimetres (*Nene*, p.185).

There are also plane angle measures, “Inspect the breast in quadrants” (Nene, p.185) Hours “...five hours” (Nene, p.293) minutes “...two minutes before the time of death” (p.293) (d) radions (R) 70:30 (p.307). Some of the Medical registers in use in Marinho’s *Nene...The Victim*, provide outlet for the transfer of information/concepts from Medicine to literature and or the exchange of useful information between the disciplines. We may also consider the (LEX DSS/LGM)- lexicalization of diseases the language of general medicine, in the Nigerian physician novel. LGM – Language of general medicine: Within the knowledge communities, some of the words that are now creatively integrated into the novel have “formed a practical and convenient shorthand for discussing a complex matter that is associated with medicine” (Henri and Wulff 2004). Most of the medical expressions in use in the novels may be largely opaque to readers outside the medical field but constitute the novel’s aesthetics. These registers include “aphthous Ulcer”, (Nene p.209), “Kleenex” (Nene p.24), “candidiasis” (Nene p.224), “dehydration,” (Nene p.32).

There are situations in the novel when such technical language i.e., “disorder” passes for ordinary language. Example is “disorder” as in Marinho’s *Nene* p.139. The word “disorder” means depression, psychological disorder it has entered common parlance or general usage, (eating disorder, hysteria, obsession, disorders generally). It is not surprising therefore that “a number of medical analysts trained in the Department of English have turned to the field of literature for methodologies, models and concepts for the interpretations/analysis of novel” (Ker and Lacelle, 2000). Medical doctors also “read” patients using the interpretative strategies readers apply to literary texts. A few of them which are not specific to literature includes parallelism, repetition, narrative technique, character development and plot.

Also, in medicine “diseases are not static in naming” (Williams, 1984). Pathologists have commented on the lexicalization of diseases

and aspects of medical language across cultures, in distinct situations and bodily functioning. For instance, it has been argued that “diseases are constructs of medical diagnosis first, and then ultimately of language” (Barbara and Lacelle, 2000). The above Table (i) therefore, confirms and justifies the extra-aesthetic values of the medical registers that have been transferred into literature, the primary novels written by the Nigerian medical doctor, used for the study to be specific. Apart from knowing the extent to which medical registers exist technically outside its original anchor, the table explains how the modification of material tiers of medical phenomenon which appear in the Nigerian literature can also play a role in the novel.

### **Conclusion**

We may conclude that the Nigerian physician prose fiction being examined is representative sample of the Nigerian novel. The novelist is influenced by his medical profession/experience using the characters, allusion, language, and style that may have tasked his memory. He uses unique perspective and technique that may be suitable to his peculiar aims. Informed by these are relevant themes that are contemporary such as gigolo, nymphomaniac, gender and age assumptions of menopause, ultrasound machine and gender determinism, sperm movement and pregnancy hypotheses. This fresh wave of thematically and stylistically diverse fiction of the Nigerian medical doctor novelist reveals a high positive correlation of medicine with literature.

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