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## Margaret Edson's *Wit* and the Art of Analogy

Margaret Edson's play *Wit* (1993) dramatizes in a simultaneously heart-rending and humorous way the suffering and illumination of Vivian Bearing, a professor of seventeenth-century English poetry who is dying of advanced ovarian cancer. The play has become a standard text in medical schools, especially in courses on medical ethics, medical humanities, and narrative medicine (see, for example, the *Wit Film Project*). In these contexts, discussions of *Wit* (or of its video version, with Emma Thompson as the main character) tend to focus on end-of-life treatment, the doctor-patient relationship, and the ethics of initiating or avoiding a resuscitation attempt after a patient's death (full code vs. DNR).

Without minimizing the importance of these concerns, I wish—from a literary point of view—to put them in the framework of the complex network of analogies between worlds or spaces that seem to me to be the governing structural and thematic principle of *Wit*. I suggest that the interplay between contrast and similarity in these analogies creates an affinity, on many levels, between *Wit* and the conceit. In other words, the play not only quotes metaphysical conceits and comments on them but is itself conceitlike. In her introduction to a collection of metaphysical poems, Helen Gardner, a highly influential critic of John Donne whose authority is invoked in *Wit*, says: "A conceit is a comparison whose ingenuity is more striking than its justness, or, at least, is more immediately striking. All comparisons discover likeness in things unlike: a comparison becomes a conceit when we are made to concede likeness while being strongly conscious of unlikeness" (19).<sup>1</sup> In what follows I hope to show how the macrostructure of this play establishes contrasts, similarities, contrasts within the similarities, and further similarities within the contrasts, thus both dramatizing and interrogating wit and its instrument, conceit.

### 1

The play moves between two physical-institutional spaces: the hospital and the university. The space of the hospital is primarily characterized by its constriction. Once Vivian is in it, even when she can still walk by herself, she is carried from one test to another in an obligatory wheelchair. As the play progresses, her hospital existence is confined to one room, then to an *isolation* room, and, toward the end, to a very small part of the bed where she lies curled up with pain. While Vivian

undergoes various tests and treatments, her mind asserts its freedom by remembering vignettes from her career as student, teacher, and scholar. These subjective flashbacks are performed on stage, creating a constant oscillation between the two worlds, corresponding to two temporal dimensions. These worlds are also opposed to each other in that the hospital is preoccupied with the body, while the university sees itself as contributing to the life of the mind. Although Vivian occupies reverse positions in these spaces, as my initial analysis will show, analogies—to be subsequently discussed—are established between the two contrasted worlds.

Being ill, especially being hospitalized, it appears, puts the patient in a position of inferiority, stripping her of the personal and professional status she had in her former world. This process is emphasized early in the play by a confusing double reference in a conversation between Vivian and an x-ray technician:

TECHNICIAN 1: Doctor.

VIVIAN: Yes, I have a Ph.D.

TECHNICIAN 1: *Your* doctor.

VIVIAN: Oh. Dr. Harvey Kelekian.

(16)

If this scene is relatively lighthearted, at a later point Vivian finds the reversal in her position difficult to tolerate: "Once I did the teaching, now I am taught" (37). She who used to conduct seminars has become the object of study.

The situation is aggravated by the impersonality and insensitive attitudes of the doctors, one of whom was Vivian's student in the past. Jarring gaps between Vivian, the patient, and her doctors are dramatized throughout *Wit*, and I select only a few examples. When Dr. Kelekian, the senior specialist, announces to Vivian that she has a terminal illness, his tone is matter-of-fact, devoid of any expression of empathic intuition of what this announcement may mean to her: "Please sit down. Miss Bearing, you have advanced metastatic ovarian cancer" (7). He then continues to explain to her the aggressive nature of her cancer, interrupting his explanation with a tactlessly automatic question—"So far, so good?" (10)—completely disregarding the inadequacy of the literal meaning of *good* in this context. Furthermore, Kelekian often exhorts Vivian to "keep pushing the fluids," as if she were a human machine, and when she returns to hospital very sick, after a short release, Kelekian says: "You're doing swell. Isolation is no problem. Couple of days. Think of it as a vacation" (40). In grand rounds, the specialists discuss present and predicted side effects in front of Vivian, paying no attention to the anxiety this may cause her. Interestingly, they all miss one side effect that should be glaringly clear: her baldness. They miss it because they recite symptoms from memorized books, not even looking at the person in front of them (38–40).

At the height of this instance of alienation, however, a likeness emerges. Grand rounds, Vivian notices, are "full of subservience, hierarchy, gratuitous display, sublimated rivalries—I feel right at home. It is just like a graduate seminar" (37). The hospital and the university, being institutionalized spaces, are both characterized by hierarchy, power-inequalities, and the exercise of distance.

A certain degree of collusion between Vivian and Kelekian is suggested even during the scenes of alienation. In the very first interview, Kelekian says, "You are a professor, Miss Bearing," and her answer underlines the analogy: "Like yourself, Dr. Kelekian" (7). The similarity is further developed in the sequel, both professors emphasizing their thoroughness and complaining about its absence in their students (10). In grand rounds, Kelekian seems to wink at Vivian, sharing with her his amazement at what the young doctors overlook: "Why do we waste our time, Dr. Bearing?" he asks; and Vivian answers with delight, "I do not know, Dr. Kelekian" (39). In the same scene, they simultaneously compliment Jason on his "excellent command of details" (37).

The collusion is facilitated by the fact that both medicine and academic life are characterized by the pursuit of knowledge, a noble characteristic, not free of dangerous consequences. The play suggests that the objectification of the patient is at least partly attributable to the doctors' orientation toward research, purportedly necessitating distance and minimal emotional involvement. As a scholar, Vivian shares the immense respect for knowledge and the impersonality it entails. When Kelekian first presents the proposed treatment modality to Vivian, he says: "This treatment is the strongest thing we have to offer you. And, as research, it will make a significant contribution to our knowledge." And she concurs: "Knowledge, yes" (11). After the grand rounds, which end with Jason, her ex-student doctor, complimenting her for being cooperative, she turns to the audience: "Wasn't that . . . Grand? [. . .] At times, this obsessively detailed examination, this *scrutiny* seems to be a nefarious business. On the other hand, what is the alternative? Ignorance? Ignorance may be . . . bliss; but it is not a very noble goal. So I play my part" (40–41). And later, when Susie, the nurse, discusses with her the status of full code vs. DNR, she explains that the doctors prefer the former because "they . . . always want to know more things." Vivian's immediate response is "I always want to know more things" (68), but this is followed by her decision against resuscitation.

The collusion between Vivian and the doctors as knowledge seekers—chinks in which were already implicit in the above quotations—is completely shaken in a moving scene in which Vivian is so anxious that she can no longer play her professional-intellectual role. Contrast here becomes prominent in the analogy. Vivian asks Jason about his fascination with cancer as well as the degree of his attachment to patients. While she is groping for human contact, Jason inconsiderately talks about the bedside-manners course as a "colossal waste of time for researchers" (55), dismisses "the part with human beings" as a regrettable necessity—"Everybody's got to go through it [. . .]. Just cut the crap, I say" (57)—and implies that although he *tells* patients he will miss them after their death, he does not necessarily feel grief. Vivian, who habitually cannot tolerate sentimentality, is very hesitant in this emotion-laden scene, but Jason takes her hesitation as a symptom of short-term memory loss, asking: "Professor Bearing, who is the President of the United States?" (55) The momentary discrepancy between the two formerly similar professionals could not be greater.

Similarity, however, is soon reestablished when Vivian reflects about the recent dissymmetry as a matter of structural and temporal position. Immediately after Jason leaves, she explains to the audience:

So. The young doctor, like the senior scholar, prefers research to humanity. At the same time the senior scholar, in her pathetic state as a simpering victim, wishes the young doctor would take more interest in personal contact.

Now I suppose we shall see, through a series of flashbacks, how the senior scholar ruthlessly denied her students the touch of human kindness she now seeks. (58-59)

On stage, the scene changes to a classroom, and a series of flashbacks is enacted. Vivian coldly criticizes her students for their lack of thoroughness, callously refuses one of them an extension of a paper deadline, treating the death of his grandmother as a transparent pretext (63), and maintains an ironic attitude toward the class. Moreover, like Kelekian, she comments on a student's developing idea by a cold "So far so good," followed by an explanation to the audience: "but they can think for themselves only so long before they begin to self-destruct" (61). In short, her attitude toward the students is not substantially different from the doctors' attitude to her.

This revelation of "likeness in things unlike," to use Gardner's expression again, is akin to metaphysical conceit. It also marks a stage in Vivian's painful learning of the art of dying, and that of living. At a relatively early stage in the play, she says about her eight months of cancer treatment: "It is highly educational. I am learning to suffer" (31).<sup>2</sup> As the play proceeds, she has increasing insight into the meaning of being human, including the importance of distrusting intellectual brilliance and with it conceit (the word *conceit* evoking not only the metaphysical trope but also vanity). Vivian's emotional *bildung* is assisted by Susie, the nurse, who is constantly contrasted to the doctors in the play. Susie keeps Vivian company in moments of loneliness, comforts her in moments of anxiety, and brings her a popsicle to help fight the dehydration caused by the chemotherapy. Like everything else in the play, this manifestation of a human touch is not presented uncritically. It has a sentimental side, to which Vivian reacts in revulsion: "Popsicles? "Sweetheart?" I can't believe my life has become so ... *corny*" (69). Nevertheless, this resistance leads to an acceptance: "Now is not the time for verbal swordplay, for unlikely flights of imagination and wildly shifting perspectives, for metaphysical conceit, for wit. [. . .] Now is a time for simplicity. Now is a time for, dare I say it, kindness" (69). If Vivian earlier complained about the transition from teaching to being taught, in the sense of becoming an object of study, we now realize that she is also being taught, in the sense of becoming a learning subject.

## 2

One of Vivian's defenses against the spatial constriction, the emotional humiliation she experiences in the hospital, and the concomitant reduction of her life to the physical is to conjure up spaces made of words, enabling her to enter into texts that constitute her cultural, metaphysical world. The verbal, intertextual space

she invokes, however, turns out to be both counterpoised and similar to the contracting space from which she tries to escape. Furthermore, the two main intertexts of *Wit*—the poetry of Donne and children’s stories about rabbits—could not be more dissimilar, and yet similarities between them emerge.

Language manifests itself in all its glory in *Wit*’s main intertext—Donne’s Holy Sonnets, quotations from which are accompanied by Vivian’s own inspired comments, transporting her beyond the confines of the hospital and the body. On the other hand, the theme of the sonnets, the confrontation with death, mirrors Vivian’s predicament in a way that creates a conceitlike effect.

In a flashback dramatizing her student days, Vivian remembers her own undergraduate interpretation of “Death be not proud,” one based on an inauthentically punctuated edition, and Professor Ashford’s comments, relying on Gardner’s text. The juxtaposition between the two versions enacts two different views of the relation between life and death. Particularly relevant is the last line of the sonnet, which in Vivian’s text runs:

And Death—*capital D*—shall be no more—*semi-colon*!  
Death—*capital D*—*comma*—thou shalt die—*exclamation point*!

Professor Ashford characterizes this as “hysterical punctuation” to which the meaning of the line is sacrificed. Following Gardner’s edition, she punctuates the line thus: “And death shall be no more, *comma*, Death thou shalt die.” The religious interpretation she consequently offers bridges the gulf between life and death:

The sonnet begins with a valiant struggle with death, calling on all the forces of intellect and drama to vanquish the enemy. But it is ultimately about overcoming the insuperable barriers separating life, death, and eternal life [. . .]. Nothing but a breath—a comma—separates life from life everlasting. It’s very simple really. With the original punctuation restored, death is no longer something to act out on a stage, with exclamation points. It’s a comma, a pause [. . .]. Not insuperable barriers, not semicolons, just a comma.

(14–15)

In this reading, death is not the opposite of life, but a pause between life and life-everlasting. “Insuperable barriers” are replaced by a threshold—connecting, bridging, even as it separates. The comma emerges as an expression, on the level of punctuation, of a creation of rapprochement between seeming dissimilarities.

The two competing views of the relations between life and death *are*, in fact, acted on stage, the flashback scene thus becoming a *mise en abyme*, that is, a miniature mirroring, of the whole play. After Vivian’s quiet death, the medical staff engages in a frantic effort to resuscitate her, violently disturbing her well-earned peace. The violence needed to bring life back emphasizes the contrast between these two states. Susie interrupts the doctors, and a battle between death and life ensues:

SUSIE: She’s DNR. (*She grabs him.*)

JASON: (*He pushes her away.*) She’s Research!

(82)

The doctors, it appears, are trying to produce a clinical semblance of life for the sake of further research. They are trying to preserve the body, paying very little

attention to the mind—always problematic, but particularly jarring in the case of a person like Vivian whose life was devoted to the Mind. Susie wins, and Vivian's "living corpse" is allowed to regain its calm. An instant later, a different form of quickening occurs, a smooth transition, emphasizing likeness between states that were previously experienced as radically contrasted. The dead Vivian lifts the blanket, steps out of bed, takes off her cap and gown, and is seen "naked and beautiful, reaching for the light" (85). The theatre lights are then dimmed and the play ends. Vivian's death, we are made to see, has indeed been a pause, a transition to a state of quasi-transfiguration.

Another sonnet by Donne, quoted at a later stage in *Wit*, explicitly compares death to the end of a play:

This is my playes last scene, here heavens appoint  
My pilgrimages last mile [. . .]. (52)

In the context in which the sonnet is embedded, the analogy between it and the last stage of Vivian's illness is so evident that it becomes uncanny, a state of affairs of which Vivian is fully aware, saying to the audience: "I have always particularly liked that poem. In the abstract. Now I find the image of 'my minute's last point' a little too, shall we say, *pointed*" (52–53). She alludes to this sonnet again when she receives aggressive pain killers: "I apologize in advance for what this palliative treatment modality does to the dramatic coherence of my play's last scene. It can't be helped. They have to do something. I'm in terrible pain" (70).

Pain, and its relation to language, becomes a junction of another conceitlike network of contrasts and similarities. Physical suffering causes a regression of language in the play, opposed to the flourishing on which I have dwelt so far and parallel, perhaps, to the constriction of the physical space. In an early scene, Vivian vomits as a result of chemotherapy. "I haven't eaten in two days. What's left to puke?" she bitterly wonders; then—turning to the audience—she adds: "You may remark that my vocabulary has taken a turn for the Anglo-Saxon" (32). What Vivian experiences as a reversion to an earlier stage of the English language corresponds to a return to an earlier stage in personal development, but the interplay between linguistic registers in the childish stories with which Vivian engages is far from simple.

Vivian's very entry into written language takes place in an attempt to read a story about rabbits. The recollected scene is enacted on stage, showing Vivian on her fifth birthday, grappling with *The Tale of the Flopsy Bunnies* in the company of her father, who is busy perusing the newspaper.<sup>3</sup> She stumbles over the word "sopor-i-fic," and her father, obviously delighted by her act of deciphering but without putting the newspaper away, explains that *soporific* means "makes you sleepy." Vivian then notices that the bunnies in the picture are asleep, a coincidence of image and word that "seemed like magic," as she retrospectively puts it (42–43). The acquisition of a word of a high register early in life anticipates Vivian's ever-expanding exploration of complex words: "So imagine the effect that the words of

John Donne first had on me: ratiocination, concatenation, coruscation, tergiversation" (43).

The initiation scene recurs in two different variations later in the play. The first focuses on the word *soporific*. In order to reduce Vivian's unbearable pain, Susie arranges a morphine drip for her. Vivian "lies down and, in a final melodramatic gesture, shuts the lids of her own eyes and folds her arms over her chest." She then says: "I trust this will have a soporific effect" (73). Susie, who is not familiar with the word that might have come straight out of Donne, replies: "Well, I don't know about that, but it sure makes you sleepy." This coincidence between a "high" and "low" way of saying the same thing strikes Vivian as delightfully funny; she explains why, and a bond of laughter is created between the two women who have very different cultural heritages. Not only is this closeness opposed to the relative distance between Vivian and her newspaper-bound father; it also foregrounds Vivian's gradual acceptance of the viability of impoverished language—possibly echoing the narrowing of space and opposed to the growing complexity of Vivian's vocabulary in the course of her career. As we have already seen, illness has taught Vivian the virtues of simplicity.

A little later, Professor Ashford comes into Vivian's room (or is this a hallucination on the latter's part?), takes her shoes off, and gets into Vivian's bed. She wants to recite a poem by Donne to Vivian, but sensing the latter's reluctance, she chooses a story called *The Runaway Bunny*. It is not the same story that Vivian read as a child, but her listening to it is a kind of return to childhood at the end of life. In this context, Professor Ashford becomes a mother figure, whose physical and emotional closeness are implicitly contrasted to the father's aloofness in the earlier scene. Perhaps this gender differentiation can also be associated with the contrast between the doctors and the nurse throughout the play. Professor Ashford sees the story as "A little allegory of the soul. No matter where it hides, God will find it" (80). This comment suggests an affinity between the simple children's story and the poetry of Donne, which hitherto has seemed to be at the opposite pole of sophistication. More specifically, it recalls Donne's sonnet "If poisonous minerals" and Vivian's comment on it in a classroom vignette: the speaker, afraid of God's unrelenting awareness of his sins, hides under a rock. Unlike most believers, and contrary to Professor Ashford's reading of the rabbit story, however, the speaker in the sonnet wishes God would forget rather than remember him.

Vivian's language in this scene is reduced to sounds of pain and then to complete silence until her death. Language in *Wit* is thus perceived both as offering an alternative to the world of the hospital and as similar to the very space it tries to transcend, gradually shrinking and ultimately helpless against pain and death. A different but equally relevant connection between body, language, and silence emerges from K. K. Ruthven's analysis of the metaphysical conceit: "One of God's most brilliant conceits was the Incarnation, although it took a saint rather than a literary critic to see what God was lightly hinting at when the Word became flesh, for it was no less a person than St. Augustine who detected God's wit in allowing

the Word to become speechless (*infans*) in the infant Jesus" (46). Thus silence is not only weakness but also spiritual strength. Ironically, however, speechlessness in *Wit*—together with its spiritual strength—is coupled not with an incarnation but with an undoing of the flesh. A similar quasi-paradox emerges from Donne's sonnet quoted earlier, warning Death not to be proud. This warning is corroborated by the end of the play, where Vivian's speechless body is seen yearning, Christ-like, toward the beyond, in a transition between life and life-everlasting. At the same time, the sonnet contains an inner contradiction, the death of death perpetuating its existence, since there must be someone or something exterminating it. Like death, and in relation to it, language in *Wit* triumphs from one point of view but fails from another.

### 3

The complex balance between similarities and differences informing the relations between the two main spaces in the play, the hospital and the university, as well as their equivocal connection with the world of language and its manifestations in two opposed yet parallel intertexts, acquires a self-reflexive dimension in the play's attitude to the world of the theatre and the role Vivian undertakes in it. As if to regain the position of power she had had at the university and lost in the hospital, Vivian assumes the role of a narratorial agent (an "impresario," she says [34]), self-consciously presenting the play to the audience, commenting on it, controlling and manipulating the spectators' reactions. Many of the passages quoted earlier in this paper manifest boundary-crossings from the fictional world represented on stage to the nonfictional spectators in the auditorium, but I would now like to focus on the operation of similarity and contrast in them.

In the fashion of a metalepsis, Vivian's direct addresses disturb the assumed borderline between on-stage and offstage, a borderline that is not only spatial but ontological.<sup>4</sup> On stage, there are actors who represent characters, while the auditorium seats real women and men who have bought tickets to see the play. Characters normally speak to each other, not to the audience, although—of course—this convention has often been transgressed in the theatre. This is how Vivian proposes to mediate between the play and the audience to whom she speaks:

In this dramatic structure you will see the most interesting aspects of my tenure as an in-patient receiving experimental chemotherapy for advanced metastatic ovarian cancer [. . .]. If I were writing this scene, it would last a full fifteen minutes. I would lie here, and you would sit there. (*She looks at the audience, daring them.*) Not to worry. Brevity is the soul of wit. But if you think eight months of cancer treatment is tedious for the audience, consider how it feels to play my part. (34–35)

The "part" she thus plays is not only that of a terminal cancer patient but also that of an actress. The underlying analogy between life and a play is a trope with a long history, in some periods entertaining an affinity with wit and the conceit. "Onely we dye in earnest, that's no Jest," the last line of a poem by Sir Walter Raleigh (1612) that develops the trope, is considered in Gardner's introduction to her

edition as "a conceited epigram" in a text that "hover[s] on the verge of becoming a metaphysical poem" (21).

As actress, Vivian is subordinate to a script written by someone else. The failure to control, we realize, is not restricted to her illness; it similarly affects the play-world, in which she tries to be a narrator but is simultaneously a puppet. The superposition of her roles as patient and actress-narrator often creates unsettling effects. Thus Vivian is "dismayed to discover the play would contain elements of . . . *humor*. I have been, at best, an *unwitting* accomplice. (*She pauses.*) It is not my intention to give away the plot; but I think I die at the end. They've given me less than two hours" (6; emphasis hers).<sup>5</sup> At one point, she rebels against her subordination to the text by introducing a slight change in the lines assigned to her: "My next line," she informs the audience, "is supposed to be something like this: 'It is such a *relief* to get back to my room after those infernal tests.' This is hardly true" (53). When she does return to bed, she finds herself saying the expected line, with a significant addition of her own: "Oh, God. It is such a relief to get back to my goddamn room after those goddamn tests" (54). This amendment, however, is also part of the written script, and a further similarity between Vivian's roles as actress and patient emerges: just as the text of the play is dictated to her, so is the "text" of her illness. She receives experimental treatment, with predicted cycles and predicted side effects, and however much she tries to master the situation by "distinguishing myself in illness" (53), she remains subjected to powers beyond her control.

An essay about a play replete with reversals of structural position may do well to end by analyzing the play's beginning. *Wit* opens with Vivian "look[ing] at the audience, sizing them up," then saying: "Hi. How are you feeling today? Great. That's just great" (5). At this early stage, the spectators are probably embarrassed, perhaps even offended, by the false familiarity the question assumes as well as the cliché reply, and (even more) by the breaking of the conventional distance between on-stage characters and offstage audience. Vivian's address to the audience, we soon discover, is mimicry. She continues in "her professorial tone" thus: "This is not my standard greeting, I assure you. I tend toward something a little more formal, a little less inquisitive, such as, say, 'Hello.' But it is the standard greeting here" (5). "Here" is the hospital, the space represented on stage, and Vivian is repeating the automatic greeting she endlessly hears from members of the medical staff in charge of her treatment. The effect of addressing the audience by quoting a greeting addressed to her is to make the spectators experience, albeit briefly, the incongruity between the pseudofamiliar address and the situation. Vivian expands on this incongruity:

I have been asked "How are you feeling today?" while I was throwing up into a plastic washbasin. I have been asked as I was emerging from a four-hour operation with a tube in every orifice, "How are you feeling today?"

I am waiting for the moment when someone asks me this question and I am dead. I'm a little sorry I'll miss that. (5)

At a later stage in the play, when Vivian's illness is much more advanced, she challenges the audience again, though in a weaker voice: "Hi. How are you feeling today?" After a silence she continues, describing her situation in terms that both evoke theatrical performance and suggest the failure of her attempt to control: "These are my last coherent lines. I'll have to leave the action to the professionals. It came so quickly, after taking so long. Not even time for a proper conclusion" (72). Vivian realizes that at this stage, she has to relinquish control and leave the action to others. Both *action* and *control* are doubly referential, evoking not only the represented world but also that of the representing play. This is a particularly poignant moment, because throughout Vivian tries not only to exercise control over the audience but also—as we have seen—to compensate for the loss of power over the body by asserting power over language. Now she knows she will not have time even to formulate her own conclusion.

#### 4

Many contrasts, of different kinds, emerge from my analysis of *Wit*: body/mind, body/language, richness/poverty of language, physical/metaphysical, hospital/university, doctors/patients, control/subordination, intellect/emotion, distance/closeness, male/female, stage/audience, theatre/life, death/life, finality/afterlife. However, the opposed elements of each pair share common qualities, so that a network of similarities—sometimes containing further contrasts—emerges. One dimension of this structural configuration may be said to be a dismantling of binaries, in a deconstructive vein, by suggesting that each contains elements of the other and that differences are therefore not between but within. According to my interpretation, however, more than making opposites annul each other, the play bridges the gulf between them, in the fashion of the *discordia concors* the critical tradition attributes to metaphysical conceits. "Insuperable barriers," as Professor Ashford called them in her reading of Donne within *Wit*, are transformed into thresholds. The continuity created between constructed opposites is typified in the play by one punctuation mark, the comma. Here is Professor Ashford again: "It's a comma, a pause [. . .]. Not insuperable barriers, not semicolons, just a comma" (14–15). But is it? The printed title of a play in which a recollected character proclaims the supremacy of the comma replaces the letter *i* by a semicolon: *W;t*. Separation and continuity, contrasts and similarities, dramatization and interrogation, are intertwined—herein, I think, lies the strength of the play as well as its wit.

#### Notes

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<sup>1</sup> On the conceit, see also Ruthven who, among other things, shows the indeterminacy of many definitions of the term, and Bethell who discusses early theorists of this trope, e.g., Gracian and Tesauró.

<sup>2</sup> Note that the name *Vivian* carries connotations of life, while *Bearing* may evoke suffering.

<sup>3</sup> The video version superposes Vivian as child upon Vivian as sick adult in her hospital bed. No such stage direction appears in the written text.

<sup>4</sup> I borrow the term *metalepsis* from Genette's *Narrative Discourse*, where it is defined as "any intrusion by the extradiegetic narrator or narratee into the diegetic universe (or by diegetic characters into a metadiegetic universe, etc.), or the inverse" (234–35). Although Genette is concerned with narrative, and *Wit* is a play, I think the term remains relevant both because of Vivian's narratorial role and because the phenomenon of crossing the boundaries between ontological levels is in no way limited to narrative. In talking about the theatre, we may prefer to use *representational* instead of *diegetic* or *narrative* levels. There has recently been a renewed interest in *metalepsis* (see, e.g., Genette, *Métalepse*; Malina).

<sup>5</sup> Note the subtly *metaleptic* use of *unwitting* in a play whose title is *Wit*.

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