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Truth Begins In Lies': The Paradoxes Of Western Society In *House M.D.*

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“Truth Begins in Lies”: The Paradoxes of Western Society in *House M.D.*

Jason A. Hagey

A thesis submitted to the faculty of
Brigham Young University
in partial fulfillment of the requirements for the degree of

Master of Arts

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Sharon Swenson
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Brigham Young University
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Master of Arts

The core of *House M.D.* is its assertion that current Western civilization lives in a perpetual state of dissonance: we desire to have the rawness of emotion but we can only handle this rawness when we combine it with intellect, even if that intellect lies to us. This is the ontological paradox that the televisual text grapples with. Through the use of archetypal analysis and allegorical interpretation, this thesis reveals that dissonance and its relationship to contemporary Western society. Through *House M.D.* we realize that there are structures to the paradoxes that we live and there are paradoxes in our structures.

Dr. House is a trickster in an allegory of American capitalist culture. The trickster metaphorically pulls away from society the rules protecting cultural values. Dr. House and *House M.D.* participate in revealing the cultural disruption of the current moment of Western society. While playing on the genres of detective fiction and hospital dramas, *House M.D.* is an existential allegory exposing the paradox that we can never be free while still seeking our own self-interest.

Keywords: television, *House M.D.*, Dr. Gregory House, paradox, western society, archetype, trickster, detective fiction, hospital drama, allegory, allegorical interpretation, capitalism, truth, lies, cultural disruption, self-interest, freedom
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In our earliest discussions, Darl Larsen always looked for something to be “interesting and compelling.” To hear him talk, this was the pinnacle of scholarship. If something was “interesting and compelling” then you were on the right track. For me, this gave me something to shoot for. If I could get Dr. Larsen to say something was “interesting and compelling” then I knew I was on the right track. I’m grateful to Dr. Larsen for giving me something to work for in my studies. Also, he talked about academia as “studying cool stuff.” Looking at popular television, such as *House M.D.*, was “studying cool stuff.” This has been a fun journey in large part because working with Dr. Larsen has been fun as he helped me in “studying cool stuff.” The myriad of discussions led us through zigzags of ideas and possible methodologies that ultimately led to this thesis. I am forever grateful to Dr. Larsen for teaching me what scholarship can be and making that ride something “interesting and compelling” itself. He has been an incredible advisor and mentor in “studying cool stuff.”

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Introduction

“Only connect,” writes E.M. Forster in his epigraph to *Howard’s End*. Popular television is popular because it connects with its audience. Though often seen as escapist entertainment, fictional television programming says much about the culture creating it. While the creators of television series seek to connect with audiences, they always come with specific bias and backgrounds that influence their work. The core of *House M.D.* is its assertion that current Western civilization lives in a perpetual state of dissonance: we desire to have the rawness of emotion but we can only handle this rawness when we combine it with intellect, even if that intellect lies to us. This is the ontological paradox that the televisual text grapples with. Through the use of archetypal analysis and allegorical interpretation, this thesis reveals that dissonance and its relationship to contemporary Western society. In the end, the ultimate paradox is that we can never be free while still seeking our own self-interest.

When Paul Attanasio (series executive producer) suggested to David Shore (series creator) they should create a “medical idea that was like a cop procedural” (Callaghan), they set in motion the diegesis of the series. Part of its creation was drawing upon an iconic sleuth. Sherlock Holmes is an obvious inspiration for Dr. Gregory House. Holmes identified criminal killers through logical reasoning. Likewise, Dr. House uses the same process for identifying medical killers. This televisual reality creates the allegorical context. When allegorically interpreted, *House M.D.* is a television show that represents the quotidian organizational life of its audience. Dr. House is also the trickster archetype. When the archetype is given a social context, it can then be refined according to that framework. *House M.D.*’s allegorical patterns create a context for the archetype: corporate culture. Dr. House becomes the trickster in a business allegory.
Most people do not look at *House M.D.* and say, “Hey, that’s an allegory!” But, it was Hugh Laurie (the actor playing the titular character) who proposed the idea of an allegorical interpretation when he wrote in the “Official Guide” to the show:

[Anyone] who thinks Princeton-Plainsboro is a typical hospital must have spent most of their life in rude good health. It isn’t typical or realistic, and wasn’t ever meant to be. To me, Princeton-Plainsboro has always been an enchanted forest, where patients come to be cured of allegorical complaints. The treatments are metaphorical, the dialogue is dialectic...The characters and events are not real. More than that, it’s imperative that they aren’t. Because real is random, and stories are not. Stories are how we impose structure, morality, and meaning on the blank universe (Jackman 10).

Much in the way of commentary has been made about the authenticity or accuracy of the hospital and healthcare portrayed in the show, but *House M.D.*, as divulged from the “mouth” of the lead actor, is about something different. Laurie challenges us to look at the metaphors in the treatments and the reasoning behind the dialogue: the “meaning” imposed on the “blank universe.”

Meaning is not a “face-value” proposition. The premise of *House M.D.* is not about finding what you expect. Dr. House’s department is meant to find the medical zebras. As one of Dr. House’s employees points out, “First year of medical school if you hear hoof beets you think ‘horses’ not ‘zebras.’” Dr. House quips, “Are you in first year of medical school? No.” There have been many books and articles written on the subject of *House M.D.* as it pertains to the medical field, but *House M.D.* is a fantasy. An analysis of the televisual narrative helps to “find out what kind of zebra we’re dealing with here” (1.01).

Reflective of E.M. Forster’s earlier quote, “A screenwriter’s purpose is to connect,” says Claudia H. Johnson in her book, *Crafting Short Screenplays that Connect* (11). Finding the connection between the physical narrative and popular culture allow the viewer to make deeper associations with the televisual text than are proposed by a surface experience. It is important to
note that the first basic interconnectedness of *House M.D.* is the linking to the still popular character of Sherlock Holmes with that of Gregory House. This initial connection may help explain why *House M.D.* gained popularity in the first place. The intertextuality between popular narrative fiction (both visual and literary) serves to improve audience enjoyment of the narrative. *House M.D.* resonates with a broad-spectrum audience of diverse ages and occupations because we like hearing the same story.

A fictional, prime-time television series like *House M.D.* is meant to entertain. The producers are looking to make money from its creation through sponsorship, advertising, DVD sales, etc. This would be its most overt rationale for existing. In America, entertainment value is the difference between a long-running television sitcom like Fox’s *The Simpsons* and one that closes even after a few episodes, such as NBC’s *The Playboy Club*. Where in other countries the television stations are either subsidized or controlled by the government, very few channels in the United States are afforded such a luxury (or confined to a single principle of thought). They must vie for audience attention and advertising dollars.

Entertainment and fiscal increase are inseparably linked. To engage an audience the creative team must take their own views, thoughts, prejudices and bias and find a way to connect with their viewers. “Luckily, audiences want to connect, though this desire may be unconscious, buried” (Johnson 13). This means that the devisers of the medium must connect with their audience and appeal to them on levels that are understood to the viewership, both consciously and unconsciously. It cannot be a story told for mere exploration of a theme; there is always a need to consider the shareholders and appeal to ratings and network needs. The kind of connection then needed to create a successful television show means that you need to find common ground that is pleasurable. For some, watching horror or thriller television is just as
pleasurable as watching comedies are for others. Dramas also seek to connect. Crying can be as powerful as being afraid or laughing. For genre, the consistency of familiar structures is what matters.

The television tradition of hospital dramas is as old as detective dramas and is steeped in tradition. Dr Kildare (NBC, 1961-66) and Marcus Welby, MD (ABC, 1967-75) were two shows that “consolidated what was to become a pattern of later shows: patients (and their illnesses) were vehicles for the exploration of particular issues and topics” (Creeber 34). House M.D. is no exception to this pattern. Neither is it an exception to the popular use of a teaching hospital and paternal mentor and superior relationships. “In 1990s’ hospital dramas there is a rapid alternation between scenes of action – emergency medical treatment – and those of reflection and introspection … for the patients and, more importantly, for themselves” (Creeber 36). House M.D. takes these same premises and turns them on their ears. Effectively, the trickster character of Dr. House not only abolishes the previous utopianism of earlier shows, or even the attempts at higher character dramas found in such shows as ER (NBC, 1994-2009) or Chicago Hope (CBS, 1994-2000), but spitefully mocks them in the guise of similar conventions. In this way, it is satiric of its own genres.

Nick Browne has written about the narrator-/spectator-“in-the-text.” With his methodology, the work of fiction is seen for the way in which it is produced: camera angles, the “stage” pictures created on screen, the relationships visually produced. All of these things have biased meaning attached to them that is not conscious to the filmmakers. But, the filmmakers cannot help but inject a particular perspective to their work. This analysis of House M.D. is not meant to be an analysis a la Nick Browne, but the notion that an unconscious perspective is
inherent in the creation of a television show (or any medium for that matter) is intrinsic to this study (Braudy and Cohen 119).

When the unconscious structure of the show is analyzed, the show then has a context for the things that happen in the text to be interpreted for potential meanings. On the surface, *House M.D.* seeks to be controversial in its subject-matter with explorations of ethical decision-making and social conundrums. These explorations are best understood when given a context. These contexts are a mixture of patterns that have unconscious bias. When a framework is massaged out of the evidences, the unconscious patterns give way to a perspective in which to view the televisual text as a whole. Herein, the structure reveals the paradoxical nature of *House M.D.*

There are three chapters to this thesis with an introduction (which you are currently reading) and a conclusion.

*Chapter One: Archetype and Allegory* outlines what it means to be a trickster archetype and how allegories work to show us our reality. Tricksters are rule breakers and Dr. House is an archetypal trickster. Being a trickster makes Dr. House somewhat prophetic. While tricksters break rules and create ambiguity, they also pull away from society the rules protecting cultural values. The symbol of Dr. House’s cane defines what kind of trickster Dr. House is. He is both trickster and sage: a shaman or medicine man. Paradoxically, his lies and truths are helpful and dangerous. These same lies or truths become irrelevant in the end result. While Dr. House presents us with these contradictions, he gives no prescription for remedies but, instead, asks us what means more: the means or the end result? As allegory, *House M.D.* is a harbinger of “cultural disruption.” This cultural disruption is manifested to the audience as a product of the writers and producers seeking to connect with their audience. In the process, they indirectly
reflect upon the way things are going in Western society at the moment in time in which they are writing.

Chapter Two: The Paradoxes of Western Society focuses on House M.D. as an allegory of American corporate culture and a satiric allegory of capitalist traditions. The parallel it exposes furthers the notion that we live in a paradoxical society where we maintain the rational and the lunatic. We go to House M.D. specifically to experience the recurring patterns. One would expect we are seeking new experiences when, in reality, we find the pleasure in the narrative from experiencing that which is familiar to us. We watch not to learn new things or to be engaged in something different, but to feel safe in that which is identical to our experience. House M.D. harnesses our natural experience of intuitive connection and reinforces those experiences in our lives. Like Sisyphus, Dr. House is a sinner condemned to useless labor. Our paradox is that we too feel the existential angst of being condemned to useless labor while feeling the comfort in the expectation of recurring patterns. We find relief in repetition because we are satisfied to find what we expect. Dr. House reveals to us something about ourselves: the paradox of the ends justifying the means. Dr. House is motivated by the puzzle; business is motivated by the money. Both are self-interested motivations. Dr. House cannot (nor can we) have freedom in his life until he takes the freedom of others as his goal.

Chapter Three: Allegorical Complaints explores how the lens of archetype and allegory can be applied to House M.D. and what it says about Western society. This chapter is three “case study” analyses from select episodes. They are not meant to embody all that is in the television show (such an undertaking is beyond the scope of this study) but illustrate what resulting conclusions can be drawn from an allegorical interpretation.
Because this is an introductory chapter, there are a few matters of mechanics and general information needing explanation. By very nature, television series are made up of seasons and episodes. In this study, episodes are indicated with the season first, a period, and the episode for that season. For example, the first episode of Season Five, “Dying Changes Everything,” would be notated as (5.01). All quotes from this episode would be referenced thus, “Almost dying changes nothing. Dying changes everything” (5.01).

Throughout its run of eight seasons, Dr. Gregory House has worked with a changing team of specialists that most notably include the following subordinate doctors: Eric Foreman, Allison Cameron, Robert Chase, Chris Taub, Remy “Thirteen” Hadley, and Lawrence Kutner. His boss (until her departure in Season 8) has been Dr. Lisa Cuddy. His best friend and peer is Dr. James Wilson. As is typical of modern television dramas, Dr. House (as titular character) develops intricate relationships with each of these doctors. In the show, the doctors usually do not refer to each other by their titles as “Dr. Cuddy.” Usually, Dr. House is referred to simply as “House.” In this study, however, the use of Dr. House and the full title of House M.D. help to distinguish between the character and the television series.

On a broader note, this thesis is anticipated to join in the following discourse:

The popular culture movement was founded on the principle that the perspectives and experiences of common folk offer compelling insights into the social world. The fabric of human social life is not merely the art deemed worthy to hang in museums, the books that have won literary prizes or been named “classics,” or the religious and social ceremonies carried out by societies’ elite (The Journal of Popular Culture).

The cultural scholar, Ray B. Browne believed that understanding popular culture was necessary to understanding culture in general: “Popular culture is the way in which and by which most people in a society live….Students of culture increasingly realize that … they must take into consideration all aspects – all drives, all expressions of life and culture – if they are to
understand the world and the interconnectedness of its parts” (15). To take time to understand
*House M.D.* is to take time to understand Western society generally. But, one cannot understand
*House M.D.* without first appealing to “all drives, all expressions of life and culture.” The
expansiveness of “the world” is too much for any one scholar to explore, but looking at some of
the interconnectedness of some of its parts allows the scholar to get a better picture of Western
society in the modern moment.
Chapter One: Archetype and Allegory

As the personal unconscious plays a part in the activities of the personal conscious mind, the collective unconscious influences the collective consciousness. The collective unconscious is connected to all people (or “species-specific”) from all ages of time. This is neither a provable nor disprovable notion. The fields of information which govern collective myths are the matter which makes the archetype possible. When we understand archetypes, we can begin to understand character.

Archetypes are not specific entities or dependent upon particular imagery. They do have outward manifestations of symbols, but they are not the symbols themselves. Because they exist as the forming of collective unconscious, it is expected that they will be had among many cultures. Research into mythologies has shown that these archetypes do cross space and time, thus bolstering the idea that we do have collective unconsciousness (Rowland 226). Jung said, “Archetypes are, by definition, factors and motifs that arrange the psychic elements into certain images, characterized as archetypal, but in such a way that they can be recognized only from the effects they produce” (Jacobi 31). These effects produce greater understanding of the televisual text, helping us to see better the paradoxes in the narrative.

The archetype is an “empty program” that:

[B]ecomes activated automatically when it encounters appropriate stimuli. The details of the inherited pattern are developed and refined through a socialization process that begins in earliest infancy, building neural connections through active engagement with caretakers and the world at large (Haule 62).

The “pattern of behavior” is given context by the world in which the archetype is given life. Archetypes are “empty vessels” composed of “patterns of behavior” which then can be filled with the necessary information based on the era in which they are present. One such archetype is that of the trickster.
Dr. House the Trickster

The character development of Dr. Gregory House has demonstrated his role as trickster archetype. “If we mean by ‘trickster archetype’ the archetypal images of the trickster … we are struck by the family resemblances of tricksters around the world: breakers of rules, agents of mischief, masters of deceit” (den Uijl 72-73).

One commentator on the character of Dr. House says, “the Vicodin-popping House insults his colleagues, demeans the medical fellows who work for him, disregards hospital policy, ignores patient wishes and dismisses as irrelevant both basic rules of medical ethics and the law” (Koch 67). Another commentator gave a lengthy description of worth to discussing Dr. House:

Throughout the series, House lies; deceives; breaches confidentiality; badgers and coerces patients and family members; insults the hospital administrator, physicians, nurses, patients, and family members; and fails to secure informed consent for tests and therapies. For example, when a mother refuses House’s recommended treatment for her teenage son, House gets her to change her mind by reading a phony release with provocative language, such as her son “kicking off” and her “completely idiotic decision.” In another episode, House gets a patient to reveal information about his past by forcefully removing his oxygen mask. On a few occasions, House even orders fellows to break into patients’ houses to look for evidence that might facilitate a diagnosis. Moreover, at the end of an episode, he often receives approval for his “bad behavior,” which generally produces good results (i.e., correct diagnosis and successful treatment) (Wicclair 16).

Dr. House is asocial, amoral, and anarchic. Policies have no meaning, the law has no meaning. Ethics no longer exist. People and propriety are to be used by the character. Compare these descriptions of Dr. House with how Lewis Hyde describes tricksters in his book, “Trickster Makes This World”:

In short, trickster is a boundary-crosser … We constantly distinguish – right and wrong, sacred and profane, clean and dirty, male and female, young and old, living and dead – and in every case trickster will cross the line and confuse the distinction. Trickster is the creative idiot, therefore, the wise fool, the gray-haired baby, the cross-dresser, the speaker of sacred profanities … Trickster is the
mythic embodiment of ambiguity and ambivalence, doubleness and duplicity, contradiction and paradox (7).

*House M.D.* is paradox. It is the representation of the paradoxes of our Western society. Aptly named after the lead character, *House M.D.* is designed to present “ambiquity and ambivalence, doubleness and duplicity, contradiction and paradox” (7). Tricksters do not provide meaning, despite their ability to reveal truth through the profanities of their actions. Tricksters present a perspective of reality. “[T]ricksters offer special insight with ‘lies that tell a higher truth’ … there is a kind of ‘prophetic contingency’… Even shamelessness can have its prophetic side” (Hyde 284). But the idea of prophetic insight is twisted by the very nature of the trickster himself. If one considers a prophet to be someone righteous and holy, the prophet who is lying, thieving and unprincipled is very different. “This is prophecy with a difference” (Hyde 284). Thus, he is still a prophet, but the trickster is about clarity of contradiction, not simplicity.

The purpose of every trickster is to pull away from society the shielding structures of rules designed to protect cultural values. This does not mean providing meaning, but stripping culture down to its supporting framework to reveal the worms in the wood. The task requires a trickster that is shameless. Such is the character of Dr. House who, in each season, finds ways to break rules simply because they exist. He is a high functioning sociopath.

“For a human community to make its world shapely is one thing; to preserve the shape is quite another, especially if, as is always the case, the shape is to some degree arbitrary and if the shaping requires exclusion and the excluded are hungry. So along with shapeliness comes a set of rules meant to preserve the design. ‘Do not steal. Do not lie. Do not blaspheme. Do not gamble. Do not pick things up in the street. Behave yourself. You should be ashamed . . . .’” (Hyde 217-18). Whether the “human community” consists of hospitals, businesses, or America is unimportant. The trickster exists to show us our weakness and strength in the same moment.
*House M.D.* tackles many subject-matters by design: "We're looking to create the same thing that most shows are: drama and an opportunity for people to examine various ethical issues...." (Callaghan, David Shore on Creating the Show "House MD"). Where the detective seeks to uncover the truth of the matter by logic, each episode does this by way of logical and intuitive rationale. This logic, however, does not apply to the trickster because the trickster desires to strip these “ethical issues” to their nakedness. After that, it leaves the matter completely with the viewer. A common issue is that of faith versus reason, religion versus science. Dr. House neither disproves nor proves there is a God that rules this world, but he does seek to reveal the societal construct for what it is, and the meaning of that construct is less important than the absence of blinders. He reveals by taking away the pretenses of religious cultures. The attack of this structure is given allegorical significance, taken to the literal in the episode, “House versus God” (2.19).

After healing someone in a spiritual revival meeting, a teenage preacher named Boyd suddenly collapses in pain, saying to his father that he needs a doctor. After the usual series of diagnostic differentials and tests, Dr. House and Dr. Wilson (his peer and the closest person to whom he can call “friend”) have a discussion concerning Boyd’s miraculous ability to help a cancer patient earlier in the episode. This conversation leads to Dr. House’s standard epiphany moment. Dr. House walks into Boyd’s hospital room saying, “Ok, let's start with the shirt.” There proceeds to be a discussion of needing to strip the young man down to find signs of herpes encephalitis. Dr. House insists the young man had sex to contract the herpes. Of course, the young man vehemently refuses. The confrontation boils down to the following dialogue:

**BOYD:** Dad, you have to have faith in me.
**DAD:** I have faith in the Lord. You, I trust; as much as you can trust a teenage boy. Take off your clothes (2.19).
Boyd gives up his fight. He pulls down his pants to reveal the herpes on his buttocks. Later, Dr. Chase (one of Dr. House’s subordinates) argues with Dr. House about the difference between “winning the lottery” and miracles. The herpes on Boyd’s backside helped him unwittingly shrink a woman’s tumor. Boyd described it as a divine gift. Dr. Chase argues that coincidences can be miracles. Dr. House retorts, “Yeah, the hand of God reached into this kid's pants, made him have sex so he could scratch the rash, stick his fingers into some woman's face, give her a few extra months. Come on, he's just another liar and manipulator.” Walking in on the discussion, Dr. Wilson ends the argument, “Well nobody's as perfect as you are. It is possible to believe in something and still fail to live up to it” (2.19).

Dr. House’s manipulation and shamelessness reveal the truth of the matter. He is not the prophet, necessarily, but the instigator of the figurative clothing being stripped to reveal it (and in this case, he literally had the young man stripped). Whether God exists or not, whether science or religion has more meaning, is never made clear in any episode. We are still left, as an audience, with some ambiguity. And this is as it should be with any trickster. There is a thought, not divulged by Dr. House but his trickery leads to its disclosure, which gives a bit of wisdom: “It is possible to believe in something and still fail to live up to it.”

All social structures do well to anchor their rules of contact in the seemingly simple inscription of the body, so that only after I have covered my privates am I allowed to show my face to the world and have a public life. The rules of bodily decorum usually imply that the cosmos depends on the shame we feel about our bodies. But sometimes the lesson is a lie, and a cunningly self-protecting one at that, for to question it requires self-exposure and loss of face, and who would want that? Well, trickster would, as would all those who find they cannot fashion a place for themselves in the world until they have spoken against collective silence (Hyde 172).

Dr. House is not a prophet, but his actions as a trickster lead to prophetic revelations. These revelations are not that of giving the audience something. These revelations come by
taking away the covers and allowing us to see something in the traditional sense of apocalypse: a revealing. In this apocalypse, Dr. House desires for us, as audience (as if he knew we were there watching), to see the realities that surround us – past even his lies which ultimately give us truth – by stripping the structure of society. In what is left we find a greater sense of what is truth. As Dr. House puts it: “Truth begins in lies. Think about it” (1.01).

**Shamans, Saviors and Dr. House**

As a kind of negative prophet, Dr. House performs many roles of importance to us as a collective unconscious culture. As intimated earlier, archetypes can be recognized by their symbols. The symbolism that surrounds Dr. House gives us a greater insight on an unconscious level as to who he is. There is a prop which Dr. House is almost never without: his cane. This one metaphor alone gives deeper insight into the symbol of this trickster character and further develops with levels of complexity.

At a surface level, the cane speaks of age which is usually attributed to those with wisdom. In a way, it is the symbol of the archetypal sage. But, when put in context, the cane is in the hands of, “the wise fool, the gray-haired baby” (Hyde 7). A cane gives the impression of infirmity while also the impression of support, of strengthening. The cane enlightens us as to the rigidity of personality that is Gregory House and it enlightens us regarding his unwillingness to bend. Equally so, it is a symbol of his own fragility – he always walks with a limp. The cane, also, is reminiscent of mythic rods, scepters, and staffs. The rod is “an ancient emblem of supernatural power … [it] gives its holder power over the natural world – to transform, prophesy, arbitrate, heal wounds…” (Tresidder 415); the scepter and staff both symbolize, along with the rod, power and authority.
The cane is symbolically aligned with who Dr. House is. Through this symbol, Dr. House becomes both trickster and sage: a shaman. Quoting Jung, Jacobi writes, “An archetypal content expresses itself, first and foremost, in metaphors” (31). At the beginning of the episode, “97 Seconds,” Dr. House hands his cane to one of the potential replacements to his old team. As he does this he remarks, “Would you mind holding my metaphor for a second?” (4.03) The clue ties Dr. House as signified directly to the cane as signifier. Dr. House is Mercurius or the Roman version of Hermes (different sources on trickster archetype reference the two interchangeably): “A curious combination of typical trickster motifs can be found in the alchemical figure of Mercurius; for instance, his fondness for sly jokes and malicious pranks, his powers as a shape-shifter, his dual nature, half animal, half divine, his exposure to all kinds of torture, and – last but not least – his approximation to the figure of a saviour” (Jung 255). No, Dr. House could not walk around with a literal caduceus in the modern diegesis of Princeton-Plainsboro, but he does carry a cane with him for similar representation.

Becoming a kind of modern Mercurius, Dr. House is constantly exposed “to all kinds of torture.” His leg is always in pain, thus creating his persona of “Vicodin-popping.” Also, he is not above electrocuting himself to see if heaven is on the other side, trying experimental drugs in an attempt to alleviate his sufferings, and he is even shot in one episode. His physical sufferings are one thing, but he apparently is tortured emotionally a great deal, hiding this anguish behind sly jokes and malicious pranks. In the mythological sense, this representation of trickster aligns with that of the shaman – the medicine-man or man of medicine – “for [the shaman], too, often plays malicious jokes on people, only to fall victim in his turn to the vengeance of those whom he has injured. For this reason, his profession sometimes put him in peril of his life. Besides that, the shamanistic techniques in themselves often cause the medicine-man a good deal of
discomfort, if not actual pain” (Jung 256). Dr. House’s intense moments of pondering which lead to epiphany revelations could be likened to “shamanistic techniques.” His intellect and his intuition make Dr. House a powerful prognosticator and medical practitioner.

Historically, shamans are known for their trances. Drumming and dancing were often part of the ceremonies. For the audience, we are given this same sense through the use of montage, the music representing the ancient drumming and dancing of primitive shamanism, that often precede moments of revelation. What also must be mentioned is the shaman’s use of psychedelic drugs. Dr. House’s addiction gives him hallucinations. “At all events the ‘making of a medicine-man’ involves, in many parts of the world, so much agony of body and soul that permanent psychic injuries may result. His ‘approximation to the saviour’ is an obvious consequence of this, in confirmation of the mythological truth that the wounded wounder is the agent of healing, and that the sufferer takes away suffering” (Jung 256).

As a “wounded wounder,” Dr. House is the epitome of “the agent of healing.” He is frequently looked to as a savior. By nature of his profession, he performs miracles that other doctors have not been able to do: he diagnoses the impossible to diagnose. And, often, he saves individuals from certain death. Most episodes are a race against death. In this idea of death, Dr. House becomes like Mercurius, governing between those who live and those who will proceed to the underworld. Sometimes he stops them and sometimes he leads them there. In the episode, “Lockdown,” Dr. House is trapped in a room with someone’s case that he did not originally take and, because of it, the man is going to die due to an incorrect diagnosis. Early in the episode, he further enacts his role as Hermes when he says, “The next few hours are gonna be grim. There'll be nausea, pain, no company, as soon as I can get myself out of here. I can unlock the regulator. You can put yourself in a narcotic haze, sleep blissfully to the end” (6.17). Initially the man
refuses, until the end of the episode: “I think I'm ready to take you up on your offer” (6.17). Dr. House immediately turns up the morphine drip, disabling the lock that limits its distribution. “An archetype of death exists and it joins all men in the same way that birth does. Death defines life for us” (McCully 154). Whether saving lives or helping others to go to their deaths, Dr. House is at that boundary to stop or to help across.

If, at the end of the trickster myth, the saviour is hinted at, this comforting premonition or hope means that some calamity or other has happened and been consciously understood. Only out of disaster can the longing for the saviour arise – in other words, the recognition and unavoidable integration of the shadow create such a harrowing situation that nobody but a saviour can undo the tangled web of fate. (Jung 271-72).

While acting in this role of savior, most famously in the pilot episode, Dr. House declares, “Everybody lies” (1.01). And in a later episode Dr. House asserts, “You’re going to trust me? I lie about everything” (4.15). He appears to hate lies and yet is the greatest proponent of their use. This contradiction is not as much about coming to any final conclusion as it is a request for the audience to consider the probability that contradictions can coexist. In a way, trust is what we are being asked to consider. The question is what are we putting our trust in: the person or the result? If we receive the desired result, but we know that the means of getting there is flawed, do we still trust in that result?

“On a more philosophical level,” the show’s creator David Shore says, “[House M.D.] asks the question: What’s more important – Kindness or Truth” (Callaghan, David Shore: Creator, Executive Producer)? The truth is relative. So too is kindness. The episode “It’s a Wonderful Lie” posits that sometimes lies are better because they are kind. In this episode there is a mother who is dying and she has a daughter who is there with her. According to both of them, they never tell each other lies. The team sees this as impossible. Dr. House declares, “There’s a reason that everybody lies. It works. It’s what allows society to function, it’s what
separates man from beast … Lies are a tool, they can be used either for good – No wait, I got a better one. Lies are like children. Hard work, but they’re worth it. Because the future depends on them.” Dr. Wilson retorts, “You are so full of love … or something. When you care about someone –” “You lie to them!” Dr. House interrupts (4.10). And yet, Dr. House is usually the bearer of the awful truth when that time arrives.

Often times, the lie is what is killing the patient. There is usually something left out of the holistic causes for the ailments. There is something that the patient is not telling them. Learning the truth then becomes the vehicle to life. Knowledge of the right kind allows the team to save the patient from impending death. In this way, kindness is the truth, but the delivery of the truth is rarely done kindly. For Dr. House, the band-aid being ripped off swiftly allows the wound to heal more quickly. Despite the fact that most wounds were previously unknown, Dr. House appears to believe it is more important to let it air publicly: “You tell people the cold hard truth all the time. You get off on it.” There is no room for kindness to enter into the equation, “Because I don’t care” (4.10). In the end, Dr. House saves the woman. The greatest kindness is the end result, regardless of truth or lies.

Archetypes presuppose that we as people have a collective unconscious from which specific patterns spring. These patterns are the same across time and space but their details are changed depending upon the era in which they are used; they are filled with specific cultural information. These archetypes appear in narratives to function in roles of cultural significance.

Because of his role as the titular character, Dr. Gregory House must be understood for the trickster he is. Knowing his archetypal purpose is not giving us truth but removing pretense for us to see what lies beneath, makes him a different kind of prophet. This helps us to think about House M.D. in terms of deeper resonances rather than didactic moralizing. His lies teach us of
our own deceits. By his very nature, Dr. House requires us to think. He leaves behind the structure without the pretense; thus clarity. Dr. House’s archetype says something about who we are as human beings. In Western society we must decide between our emotional desire for kindness and our intellectual need for the required result.

*House M.D. is Allegorical*

In simple terms, we “call allegory the particular method of saying one thing in terms of another in which the two levels of meaning are sustained and in which the two levels correspond in pattern of relationship among details” (Leyburn 6). When analyzing a television narrative, the patterns give the meaning of the story. For instance, *House M.D.* has patterns that interpret as an allegory apart from the first level meanings inherent with healthcare and medical practice. On the second level of meaning that will be described later, *House M.D.* is a modern allegory of Western culture.

There is some debate among literary scholars as to whether allegory is a means of writing or a means of interpretation. Obviously, allegory as a means of writing implies that the writer decided to craft his story with the intent that it says one thing in terms of another. Allegory as a means of interpretation puts the power in the hands of the reader – or, in terms of television – the spectator. When an allegorical interpretation is used, interpretation allows the viewer to give a kind of “new historicism” end result to his reading of the television show.

“To put it another way: the new historicist situates the literary text in the political situation of its own day” (Barry 179). This does not mean that the allegorical interpretation is purely new historicism but it does look at the world in a more holistic perspective – the enchanted forest for its entirety as a marriage between overarching framework and the details.
found therein. This requires looking at the patterns involved in the show’s narrative and linking it back to patterns in contemporary society.

**House M.D. Reflects Society**

Looking for patterns of relationships among details, the clues to the allegory (or maybe allegories) are in the small things, such as earlier described when Dr. House hands his cane to a potential hire and says, “Would you mind holding my metaphor for a second?” (4.03). “[The] reader, to read allegorically, must find a series of metaphoric parallels that connect two (or more) associative, metonymic extensions of key ideas” as in the connection between wisdom and canes or shepherds heralding the Messiah (Greenfield 64). On the other hand, the allegory can be found in the structure of the narrative itself. Looking at it from either perspective (or both perspectives) may be enlightening to the meaning of the text as a whole.

The text may not be in a book, but the audience is reading a televisual text. Especially in the highly competitive world of television programming, those same writers would be hyperaware of their audience (ratings blare loudly) and therefore the attitudes of the public would be on their minds all of the time. Regardless of the narrative’s intent, the “allegory exists in the way we translate text into meaning” (Greenfield 55). Clifford states in *The Transformation of Allegory*:

> The heart of all allegories is a focus of multiple interpretations rather than a meaning, but by no means all allegories are equally confident about the possibility and purpose of interpretation. Older allegories assume that the world as well as the work is legible, susceptible to being ‘read’… In modern allegories digression is not an excursion into another part of the same coherent system, but parodic or even futile, a reflection of the essential fragmentation of the universe and our intellectual relationship with it (Clifford 54).

Thus, there is not necessarily one meaning in *House M.D.* but it should be seen as “a reflection of the essential fragmentation” of the multiple ideologies and perspectives of our...
Western culture (as is true of most current television drama). “[A]llegory has demonstrated a formal congruence with structures of cultural values. But this relationship is multiple, changing with the mode preferred by any given narrative … and others can only raise but cannot resolve this most important issue: the relationship between generic literary discourse and the cultural values that are mobilized in every aspect of sociopolitical life” (Madsen 136).

*House M.D.* becomes paramount in frustrating its audience because the allegory “cannot resolve” the connection of the text to every cultural value of sociopolitical life. The writers seek to look at the multifaceted angles of contemporary society and the allegory becomes almost lost in the complexity that is “today.” This means that where older allegories (as in Dante’s *Inferno*) or even more contemporary works (as in Kafka’s *Metamorphosis*) there is some degree of metaphoric resolution to the whole of the narrative allegory; *House M.D.* represents a continuing perplexity – something that is essential for episodic television. With the need to continue the story *ad infinitum* through not only several episodes but seasons, the necessity of allegorical conclusion is lessened because contemporary audiences require the opposite of the *Brady Bunch* parables of the 1970s. “Detective stories are not concerned to preach. Their first and foremost aim is entertainment” (Crispin 10). And *House M.D.* does entertain.

It is the very innocence of this primary aim that makes them such significant testimonies to the prejudices and presuppositions of the society out of which they spring. When Conan Doyle set his stories in London at the turn of the century, he did not intend to present us with clues about the nature of English society at that time, but he did just that (Paul 6).

We learn indirectly about contemporary society. Through the allegory, we find pleasure in the pain, and we become intimate with indirectly reflected images of “the prejudices and presuppositions of the society” from which *House M.D.* springs.
As a “medical procedural” *House M.D.* is both set in a hospital with doctors and is about the deciphering of a mystery locked in the medicine itself. Looking at *House M.D.* as essentially a piece of detective fiction, “[T]he writer of detective fiction, without conscious intent, appeals directly to those moral and spiritual roots of society unconsciously affirmed and endorsed by the readers. And because of his or her dependence on popular taste in order to sell books, the writer will be particularly sensitive to changes that occur in these basic attitudes of the public … it may help us to see the way society is going” (Paul 7).

**House M.D. as Harbinger of “Cultural Disruption”**

Deborah Madsen wrote in *Rereading Allegory*, “Allegory flourishes at times of intense cultural disruption, when the most authoritative texts of the culture are subject to reevaluation and reassessment. Not only the place of these texts within culture but the whole set of sociopolitical values that these texts are to justify and propound is what is really at issue” (Madsen 135). Taking this sentiment as true would mean that *House M.D.* having any degree of popularity for any amount of time is representative of a culture at a time of “intense cultural disruption.” Looking at the world today, *House M.D.* began in 2004 as the internet, social media, and general technology were exponentially changing the way we interact. The economic “bubble” figuratively burst a few years later, with the housing market collapsing, the stock market in upheavals, government bail-outs, etc. Wars in the Middle East were intensifying while the first African American President was sworn into office in 2008. It stands to reason, amongst this “cultural disruption,” *House M.D.* fits well as an allegorical interpretation of current society.

*House M.D.*, as Laurie put it, is “an enchanted forest” (Jackman 10). The hospital is not meant to be realistic. As an allegorical playground for the writers of the television show, they are able to reflect society but in an indirect manner, something “not-so-in-your-face” as if they were
to directly attack specifics of our society through a plea to realism. Instead, they work in a fantasy world, mixing two genres (mystery and medical) where “anything can happen” but in a world that is approximately believable. The end results of episodes often feel “magical” or impossible (and much criticism has been made of the series for this reason) but the indirect reflection of our reality allows *House M.D.* to then approach topics of the nature of man, the nature of truth, and the improbability of hope without coming across as a didactic speech. We are left with all kinds of philosophical conundrums representative of those sociopolitical conundrums found in the “cultural disruption” we are currently experiencing in America.

What the mirror reveals is, to be sure, just a reflection of reality; but it is only by means of the reflection that reality is to be perceived … The appropriation of the same figure of the mirror by both satire and metaphor, with the implied extension to allegory, indicates a fundamental affinity in the need for indirect communication through the reflection in the mirror. To say one thing in terms of another is the readiest way for the satirist to create the reflection and thus achieve artistic removal. Such removal is what gives his reader the chance to enjoy instead of resenting (Leyburn 9).

Leyburn’s statement above is the power of *House M.D.* in its ability to show us how the world is going by giving the audience “the chance to enjoy instead of resenting” because they see themselves in the show’s reflection. Instead, they concentrate on Gregory House’s personality, his disintegrating relationships, and the other hyper-human failings he possesses while being a brilliant diagnostician. “Allegorical writing, like other kinds, changes because the material it seeks to analyze is changed – the world and society or, more precisely, people’s knowledge and perceptions of them … Far from endorsing the conventions and norms of established society, the mode increasingly criticizes, satirizes, and finally rejects them” (Clifford 44).

**House M.D. is Satiric Allegory**

Before a study of *House M.D.* as allegorical television can be pursued, clarity must be given: *House M.D.* is a *satire*. In typical allegory, “The hero is a repository for all the virtues the
group needs to believe in to survive … the mediator between men and gods, the epic hero humanizes divinity by his flaws and sufferings no less than by his miraculous exploits. In identifying with these heroes other men come to see in themselves the same predisposition to persecute and suffer as well as the means for ennobling their fateful human condition” (Honig 156-57). Gregory House is anything but “a repository for all … virtues.” He is categorized as a misogynist curmudgeon. For all of his genius, he is despicable in his selfishness, manipulative nature, and his open lasciviousness. As a doctor, he should embody the virtues expected of any hero, and this would be mere allegory if he did, but because of his disreputable demeanor he is classified in the realm of satire. As The Spectator, 249 put it (as if speaking of Dr. House himself) satire consists of “Mean persons in the accoutrements of heroes” (Addison).

It is in the writers’ use of detective fiction that the allegory becomes satiric. Dr. House’s mantra, “Everybody lies,” is echoed regarding all detective fiction when an equally contemptible character says, “Everybody has secrets….The most innocent-looking people have things they want to hide” (Ames 117). In the case of Dr. House as trickster, he is the most openly guilty, but he uses his guilt, instead, to hide those things most dear to him. Dr. House’s lack of virtue and reason in his personal life transform the allegory:

However complicated and inane the circumstances seem to be, there is order and rationality, if only we can find the clue that will unlock the mystery: given the right thread, the hopelessly tangled skein can be unraveled … At the center of … every other detective story, there is the unspoken assumption that, given the facts, meaning exists which can be understood by our reason (Paul 17).

First, the writers of House M.D. produce an episode each week couched in the creed of a medical mystery being presented and, by Sherlock Holmes’ deduction, the “hero” unmasks the villainous reason the patient is sick. The patient’s mystery is broken through to prove that “meaning exists which can be understood by our reason.” This premise of unraveling the
“hopelessly tangled skein” is core to detective fiction. The ability to make reason of our lives – that each life’s chaos can be made sense of by power of reason – is the hope of every reader and audience member of detective fiction. “Detection is par excellence the romance of reason” (Barzun 145). Or, put another way, “[The] detective story has to show that within a given set of bewildering circumstances, there is a rational solution that explains the facts” (Paul 13).

As reason prevails in the detective element of the House M.D. narrative, it is reason that fails when Dr. House’s life is continually growing to greater chaos that appears to have little reason. Dr. House becomes the true mystery of the show which bears his name and there is no one in the narrative to “show that within [the] given set of bewildering circumstances, there is a rational solution.”

Because of this paradox, House M.D. reconciles further to the satiric. “Satire risks movement towards despair, tragedy, nihilism … They are more negative – concerned to show what is wrong, or evil, or hostile rather than what is good or beneficent (Clifford 44). There is no greater example of this than the final episode of the seventh season where Dr. House is bringing back to his previous lover, Dr. Cuddy, her hair brush. Instead of doing as “normal” people would do, he decides to ram his car through her dining room. He steps out of the wreckage, produces the brush, and leaves the scene (7.23).

Just before Dr. House drives the car through the dining room wall, Dr. Wilson (who came with him to return the hair brush) asks, “House, what are you mad about?” He follows this unanswered question with, “Just let it out. You’ll feel better.” After Dr. House leaves Dr. Cuddy’s home, Dr. Wilson stands outside with his mouth agape. Cheerfully, Dr. House proclaims, “You're right. I feel much better” (4.23). This interjection is what makes the
otherwise nihilistic moment funny. “Laughter results from a pleasant psychological shift” (Morreall 133).

As the writers take the otherwise painful moment and turn it into a “laughing matter,” they make the satire both bearable for the audience and shift the audience into a privileged position. After all, not many of us would consider it reasonable to run a car through a wall to return a hairbrush. The idea is absurd. The successful writer of satire and allegory expects that his audience fancies itself reasonable, right-thinking people. In writing the text, the writer poises himself as narrator of the story and therefore superior to the human foibles which he illustrates. Equally, the audience is given an assumed position of detachment with the writer. This allows the audience to continue to see its own reflection without being aware that what is being seen is, to some degree, meant to be representative of them.

The sharing of the laughter intensifies the fun for the maker of the joke and his few friends alike by the extra pleasure of being in the special corner together … This power of allegory to put the reader in what the author regards as the proper point of view is one of the determining reasons why the satirist finds allegory so apt an instrument for his purpose (Leyburn 13).
Chapter Two: The Paradoxes of Western Society

The allegory of American corporate culture is latent in *House M.D.* This does not mean that it is obvious, but comes to the surface upon closer inspection of the “clues” to be found in the text. Much like Winslow Homer’s painting of “The Veteran in a New Field” (Figure 1), *House M.D.* provides clues to its possible meanings (remember, that in allegorical interpretations there are many possible meanings). In the Homer painting, a man is cutting wheat in his field. The sky is blue, the field is golden and the setting appears serene. But this painting is allegorical: it’s about the Civil War. At first glance, it’s a simple portrait of cutting wheat. Upon closer look, there are clues that tell us the true nature of the painting: a Union soldier’s jacket in the bottom right corner, the scythe (a universal symbol of death) being used to cut the wheat and, of course, the title of the painting. The nuances of meaning deepen and proliferate as we consider that these same clues indicate rest and normalcy after war, plenty after famine, and an overall sense of renewal.

![Image](image.png)

**Figure 1** - "The Veteran in a New Field" by Winslow Homer
House M.D. portrays a cantankerous doctor of diagnostics; healing patients in the guise of medical/detective fiction. Looking at the clues, as we do with the Homer painting, reveals allegorical meaning. Allegorical interpretations can take on many guises based on the perspective we take with the text. “Allegory is always … a way of interpretation. Only by interpreting can we read a text as allegory” (Greenfield 52). These interpretations are done in a “writerly” fashion, where the reader decides on the meaning of the allegory based on evidences. This also means that the reader is the one who does the linking of different topics metaphorically, allowing “texts to unite topics that would be incompatible in a reader’s normal patterns of association … to create the possibility that the two topics may combine to become parts of one topic” (Greenfield 136).

In one of the production photos used for advertising the show, Dr. House is standing erect with two snakes wrapped around him as if he were a rod, capped by wings (Figure 2). Here, the photo unites “topics that would be incompatible” in a single image. To illustrate, we must understand the clues of the picture with some background: Mercurius carried with him the caduceus – “a rod entwined by two serpents, sometimes capped by wings” (Tresidder 82). The caduceus symbolizes commerce, or business. It is mistakenly used in America as a symbol of medicine (that symbol would be a rod with a single snake wrapped around it as held by Asclepius, the god of medicine). House M.D. is depicted as being about business. Through an allegorical interpretation (looking at the patterns that are represented) House M.D. becomes satiric allegory of capitalist traditions.
Diagnosing the Evidence in *House M.D.*

In Season One, Edward Vogler (an “old school” businessman) is investing millions of dollars into the hospital – a not-for-profit teaching hospital – with the intent of turning the hospital into a profitable research center. House’s diagnostics team runs directly contrary to his desired direction and House’s job is put into jeopardy. This clue would say *House M.D.’s* allegorical agenda is anti-corporations, but there is a critical exchange between Dr. Cuddy and Vogler near the end of the season:

VOGLER: It’s the same motion as yesterday, people, same reasons. All those in favor of dismissing Gregory House raise a hand. [Everyone raises a hand except Dr. Cuddy.] Dr. Cuddy, you realize this is going to happen.

CUDDY: I can’t do it.
VOGLER: You can’t abstain.
CUDDY: I’m not abstaining, I’m voting no.
VOGLER: You’ve changed your mind since yesterday? What did he do, buy you dinner and roses? Threaten to drown your dog?
CUDDY: He did his job.
VOGLER: Right. He saved another life.
CUDDY: Maybe.
VOGLER: Good for him. It’s great. It’s not the point.
CUDDY: It’s what we do (1.18)

Jim Collins, a business researcher, wrote in 2001, “Picture two animals: a fox and a hedgehog. Which are you? An ancient Greek parable distinguishes between foxes, which know many small things, and hedgehogs, which know one big thing” (Good to great). Leaders and companies are separated into different types of individuals depending upon their style: foxes and hedgehogs. In his estimation (and the results of his team’s study of successful companies) hedgehogs are better for business. The fox is always trying to find ways of making money, looking for different means of approaching the market. In his book, Good to Great, he expanded on this concept: “Hedgehogs see what is essential, and ignore the rest” (91).

Edward Vogler is a symbol of “old-regime” thinking in the business world. He is about developing hierarchical structure, pushing for profits, and looking for the latest trend. He is Collins’ proverbial fox: “Each day, some version of this battle between the hedgehog and the fox takes place, and despite the greater cunning of the fox, the hedgehog always wins” (91). When Vogler became Chairman of the Board for the hospital, he stated first that he was interested in researching Alzheimer’s, later he expressed interest in cancer. His swift changing in tactics and the increasing complexity of his motivations hearken back to the fox. While he talks of Alzheimer’s and cancer, he runs a pharmaceuticals company too. His “foxiness” is more pronounced when House is forced to give testimonial to a “new” drug put out by the Vogler’s company:
HOUSE: A few things I forgot to mention. Ed Vogler is a brilliant businessman. A brilliant judge of people, and a man who has never lost a fight. You know how I know the new ACE inhibitor is good? Because the old one was good. The new one is really the same, it’s just more expensive. A lot more expensive. See, that’s another example of Ed’s brilliance. Whenever one of his drugs is about to lose its patent he has his boys and girls alter it just a tiny bit and patent it all over again. Making not just a pointless new pill, but millions and millions of dollars. Which is good for everybody, right? The patients, pish. Who cares, they’re just so damn sick! God obviously never liked them anyway. All the healthy people in the room, let’s have a big round of applause for Ed Vogler (1.17)!

Without question, the narrative’s motives are to defame the stereotypical bottom-line thinking of business while Cuddy’s declaration that saving lives is “what we do” has “[simplified] a complex world into a single organizing idea, a basic principle or concept that unifies and guides everything” (91). Cuddy, as representative of the “hedgehog,” finally wins the battle. She has seen “what is essential” and ignored the rest: even $100 million. Vogler thus personifies an old way of thinking about business as Cuddy represents the new way of thinking about business. In this way, the filmmakers have reinforced new corporate culture.

Season Four leads us to see another clue of the business allegory. As background, in Season Three Dr. House loses his entire team (three doctors) to different jobs and he tries (at first) to do his job alone; something which he fails to do. Within Season Four he is required to employ a team and decides to do an enormous hiring with the intent to fire. Over forty doctors are hired and gathered into a lecture hall. The following exchange occurs as Cuddy confronts him regarding this process:

CUDDY: Did you forget how to count to three?
HOUSE: I've got a budget for three, doesn't mean I can only hire three.
CUDDY: Actually that's exactly what it means.
HOUSE: I cut the permanent salaries by 10 percent, over 3 years that'll more than make up for the breakage on the 27 that I'm going to weed out over the next few weeks.
CUDDY: There's forty people in there.
[Dr. House looks inside the lecture theatre]
HOUSE: Row D, you're fired. [Everyone in Row D starts to leave. Dr. House turns back to Dr. Cuddy.] I didn't actually count all the resumes.
CUDDY: This is stupid, you can't manage that many people, you're just going to keep weeding them out arbitrarily.
HOUSE: Sure. [people start walking out between Dr. House and Dr. Cuddy at the door] And having them sitting in my office schmoozing about their favorite Algerian surfing movies, that's a much better system. Wait a sec. [Stops number 19, a pretty brunette, from leaving] Were you in Row D?
19: Yes.
HOUSE: My apologies, my boss says I'm being arbitrary and stupid. [He sticks his head back in the lecture theatre] Row D is not fired, Row C is fired.
19: Great, thank you. [The Row D people start to go back into the lecture theatre and Row C start to leave.]
HOUSE: [to Dr. Cuddy] See? That was not arbitrary (4.02).

This episode originally aired on October 2, 2007. The above serves as both a clue to the allegory but also as a commentary regarding current business practice. The United States Department of Labor’s Bureau of Labor Statistics posted online regarding the 2006-2007 layoffs, “In 2006, there were 13,998 mass layoff events and 1,484,391 initial [unemployment insurance benefits] claims” and “In 2007, the total numbers of mass layoff events, at 15,493, and initial claims for unemployment insurance benefits, at 1,598,875, were higher than in 2006” (Bureau of Labor Statistics). The experience of recession during this time and needing to make budgetary cuts resulting in the mass loss of jobs feels arbitrary. The sheer number of job losses connects with the House M.D. viewership.

Reading the text of House M.D. allegorically, allows the audience to connect the topics of “medical mystery” and “business practice” into a united whole. Thus, House M.D. through allegory becomes about corporate culture. “The author of allegory believes in pattern, he believes that it is valid to talk about human experience in terms of repetition and generalization, and he assumes that his readers will understand the narrative, not just as the record of a unique human experience … but as an expression of larger kinds of truth” (Clifford 14). Looking for patterns that are similar between the “real world” and that of the “narrative world” is part of the unlocking required to understanding how House M.D. is an allegory of business.
Steve Jobs and Gregory House

An exercise of this kind could be done regarding any multiplicity of public characters: Bill Gates, Lee Iacocca, Barak Obama, George W. Bush, Bono, Lady Gaga, etc. All of these characters are emblematically connected to our society’s perspectives of leadership – and all of them exemplify some form of business. For now, we will look at Gregory House through the lens of the late Steve Jobs because of the timeliness of the topic. This idea is not new. It is not unusual that art should imitate life. “‘In the simplest terms,’ writes Angus Fletcher, ‘allegory says one thing and means another’” (Van Dyke 25). In this instance, Gregory House works in a hospital. One House M.D. writer commented, “[Hospitals] are not like any other businesses” (Holtz 212). But here, it is not the patterns of a hospital that are emitted. It is a pattern of business.

August 24, 2011 Steve Jobs puts in his resignation as CEO of Apple. This moment stirred uproar across social media networks like Facebook and Twitter. There are many things written about the past and future of the company. Jobs’ departure heralds the end of an era. This was only intensified by his death on October 5, 2011. Many blog commentators wrote admirably about his accomplishments, sometimes even with envy. Others pointed out his foibles, his humanity, and his vulgarity:

Steve Jobs doesn't tolerate duds. Shortly after the launch event, he summoned the MobileMe team, gathering them in the Town Hall auditorium in Building 4 of Apple's campus, the venue the company uses for intimate product unveilings for journalists. According to a participant in the meeting, Jobs walked in, clad in his trademark black mock turtleneck and blue jeans, clasped his hands together, and asked a simple question: "Can anyone tell me what MobileMe is supposed to do?"

Having received a satisfactory answer, he continued, "So why the f*** doesn't it do that?" (Lashinsky).

This anecdote brings up a few different things worthy of note: 1) Jobs is intolerant of mistakes; 2) Jobs has a specific look and 3) as visionary as he is touted, Jobs is not necessarily a
nice man. In 1976, Steve Jobs and Steve Wozniak began Apple. The personal computer began to change the way business was done. Over the years, Steve Jobs has become legendary for his manner of running business. Many business owners and CEOs want to learn from him. Steve Jobs has become an emblem of our contemporary corporate culture: an icon of modern business.

There is a definite argument regarding legacies: Steve Jobs will likely be hailed as a genius; Gregory House will definitely be hailed as a jerk. But all of this comes back to our perspectives. For Jobs, his “marketing” is extremely positive. As consumers, we see the beauty of his results and equate that to the individual. There are past executives and other members of Apple’s organization who have told different stories of their experiences, stories that are reminiscent of Dr. House with all those in his personal circle. There are still, however, many patients on *House M.D.* that request to work with Dr. House simply because he is the best and gives them the results that they believe they want. Like the earlier example, so many potential employees that there are *rows* to terminate stands as testament to Dr. House’s own public persona in the wider medical field.

Steve Jobs is a perfect illustration of the kind of “pattern-seeking” required by the allegorical interpreter to understand the nuances *House M.D.* is resonating about American culture as a whole. For example, Newsweek produces “The Daily Beast” as its online offering. In this “magazine” Leander Kahney produced an online “infographic” detailing “The Ten Commandments of Steve”:

1. Go for perfect.
2. Tap the experts.
3. Be ruthless.
4. Shun focus groups.
5. Never stop studying.
7. Keep your secrets.
8. Keep teams small.
9. Use more carrot than stick.

This presents a pattern of behavior reflected in Jobs’ own actions as CEO of Apple. This also illuminates characteristics of Gregory House. This does not require much “stretching” as Dr. House is a representation both in personality and visually of the expectation our culture has of its leaders. His relationships to others signify our relationship to these leaders. His professional results are not unlike Steve Jobs’ results in being miraculous. His personal results may be representative of what we can expect our future to be in following this leadership. As one Harvard Business Review blog commentator put it, Steve Jobs has given the business world a lesson, “It needs to maintain within it the rational and the lunatic” (Dediu).

House M.D. is Not a Commentary

Gregory House is not meant to be Steve Jobs. They may both embody a combination between “the rational and the lunatic” but they are not meant to be the same person. In fact, it is not likely the design of the writers to create Steve Jobs, or business culture for that matter, on the screen. Therefore Jobs does not have a direct correlation to Gregory House. If they were seeking that, the correlation would be much higher.

As with all of the above allegorical evidences, the writers are seeking to entertain. In that entertainment, the writers seek to connect with their audience. “We strive – some say compete – and we connect. We need to win and we need to belong. That’s the human matrix – a vertical pattern of striving and a horizontal pattern of connecting. And these human patterns – recreated in unique ways – are the source of a story’s shared emotions” (Johnson 16). As the writers work on these two levels to connect with their audience through the striving of their characters, they must exemplify human patterns that help develop shared emotions. These emotions cannot be shared unless we, as an audience, have those patterns in our lives. Jobs has public patterns to his
being as he has developed into a cultural icon; thus, Jobs has effectually become a pattern in our lives.

For instance, Jobs’ is known for his attention to detail. When first producing the iPod, the night before launch he had the Apple staff replacing headphone jacks because they were not “clicky” enough. Dr. House is also known for watching the details. He frequently has his staff up all night working on determining specific causalities through lab tests. The idea is to know perfectly what their patient (the customer) needs. This portrays a value desirable to leaders throughout America: get the job done. This also exhibits the requirement to always meet customer needs.

Like Apple, the Diagnostics department at Princeton-Plainsboro works to hire specialists. Where Jobs has no General Managers, Dr. House has no General Practitioners. At the recent PCA/ACA conference there was a professional development session called, “Creating a Professional and Personal Brand Image” (Cecil 27). The purpose of having experts is to hone their best works and use their expertise to see situations and possibilities from multiple angles. In business this is useful for profits, in the world of *House M.D.* this is often the difference between life and death. Allegorically, this means that specialization is also the difference between life and death in business.

The examples of Dr. House being ruthless are numerous. He has worked many times to gain medical means for his patients outside of standard protocols. He has out-and-out lied to get surgeries and MRIs performed. He has been pitted against other diagnosticians and has seen it as a competition where he must win, even if it means getting clients to divulge confidential information in order to cure them. He has faked conditions in patients in order to get his way.
Jobs famously said, “People don’t know what they want until you show it to them.” Jobs does not meet with customers to find out what they want, or what they perceive they need. Dr. House infamously refuses to meet with his patients, often going to great lengths to avoid them. Traditional thinking on customer service says that you should know what your customers want/need, but Jobs (as does Dr. House) turns this notion on its head. The introspection that occurs is more useful to finding solutions and Dr. House has other means for getting to know his clients than talking with them. In the end, the result often exceeds expectations. Yes, Dr. House is often considered a “know-it-all,” but he still does his homework. We do not see him pouring over texts as Jobs did when designing Apple’s early brochures, but we do see him use cutting-edge knowledge. A good example of this is when he uses “cognitive pattern recognition” as a diagnostic tool. Not only is he aware of this experimental methodology, he also knows that the necessary equipment is already available in the hospital (6.16).

When Apple created the prototype iPod it had many buttons. Jobs told them to get rid of all the buttons. This resulted in the iconic scroll wheel. Where the original solution was complicated, they developed an interface that was simple. Dr. Foreman explains in an early Season 1 episode that the term “Occam’s Razor” means “The simplest explanation is always the best” (1.03). The solution to any given set of circumstances is always pared down in the conference room adjacent to Dr. House’s office. They take the symptoms and then work until only one solution is available. Working to simplify solutions is an inherent part of every episode. A common maxim (especially in business) is ‘K.I.S.S.: Keep It Simple Stupid.’

One could go down the entire list of “The Ten Commandments of Steve” and find parallel patterns to their behavior. This would become boring very quickly, and perhaps it
already has, but there is a point here: Where this is art imitating life, it is also an indirect connection in the allegorical fashion.

Another pattern of allegorical significance is the formulaic nature of the episodes themselves. The basic formula of each episode involves the setting up of a clear objective through the “hook” scene where we see someone become mysteriously sick, often nearly dying. This establishes the goal for the rest of the episode. Then, through gathering together the symptoms and laying out the necessary data, they systematically seek to understand the causes of the situation. Through that process, they give recommendations for action, take action, making mistakes and learn from what occurs with periodic reviews. They have to engage others within and without their team to get things done and, by the end, both the characters and the audience members are often given feedback to learn from the episode. This formula can be presented in the following formula:

1) Establishing goals;
2) Thinking systematically;
3) Learning from experience – while it’s happening;
4) Engaging others;
5) Providing feedback.

This formula was postulated as a system of leadership in 2000 by the Harvard Management Update, a newsletter from Harvard Business School Publishing (3-4). The idea may be interesting but it has deeper resonances than that. Here we see what we see in our businesses – or believe we should see – and it resonates with our deeper consciousness. Umberto Eco, writing about “TV serials” said that we often believe that we are watching stories because we enjoy their novelty from week-to-week but, instead, we like those stories because there is that recurrence of narrative scheme which appeals to us. “The series in this sense responds to the infantile need of always hearing the same story, of being consoled by the ‘return of the Identical,’ superficially
disguised” (86). The beauty of the allegorical approach is that it deals less in being a commentary on today’s business affairs and more in dealing with our American cultural condition.

**Being Familiar with Dr. House**

As pointed out earlier, medicine uses a common aphorism: “When you hear hoof beats behind you, don't expect to see a zebra” (Holtz ix). When we see certain symptoms we should expect to see usual diseases manifested not rare oddities. Most audience members will not know what amyloidosis is or how lupus *could* manifest itself. The typical lay-audience would not even know what the symptoms *should* be because they lack the vocabulary necessary to find the “who-done-it” by the end. Yet, they still enjoy the show. Appreciating the recurring patterns is part of the enjoyment, even pleasure, of partaking in the narrative. The character of Dr. House provides us with an entertaining guide.

We connect with the narrative because the patterns inherent in the televisual text are patterns that we recognize intuitively. Suzanne Langers, an art philosopher, called these patterns “forms”:

The comprehension of form itself, through its exemplification of formed perceptions or ‘intuitions,’ is spontaneous and natural abstraction; but the recognition of a metaphorical value of some intuitions, which springs from the perception of their forms, is spontaneous and natural interpretation. Both abstraction and interpretation are intuitive, and may deal with non-discursive forms. They lie at the base of all human mentality, and are the roots from which both language and art take rise (Langer 378).

Robert Carson, a Montana State University Professor of Education, appropriated these “forms,” calling them “configurations” and wrote the following as an interpretation of Langers’ own theory:

By intuition, that configuration can be perceived, but this “internal perception” cannot be brought up directly into consciousness. Thus, it is something we ‘feel’
without being able to know it directly in consciousness. What we feel is not the experience itself but the particular configuration of neuron activity that represents that experience in cognition. This configuration is able to be transposed across sensory and expressive modalities (Carson 22).

For example, when we experience an emotion, that emotion creates a pattern in our brains. This pattern in our brains is not the original “emotion” but it has been transformed into a “psychological currency” – a new “substance.” When we listen to some music, the music is also transformed into this currency that forms a similar mental pattern in our brains; we then intuitively feel the emotion also. The music has connected with us on a personal level.

Filmmakers enjoy this same ability to connect with their audience through the use of moving visual pictures often accompanied by music. This phenomenon is described in the 1995 documentary, *Frank and Ollie*. At one point in the film, the two former animators are speaking of some of the final sequences in the Walt Disney film “Snow White” (Cottrell, Hand and Jackson) that they participated in animating. When the dwarfs bring out Snow White in her glass coffin they noticed something peculiar to them about the audience: they were crying. Their reaction to this is to think, “They’re just drawings” (Thomas and Johnston). These drawings presented a pattern familiar to audience members which evoked an emotional response.

This theory gives explanation to how we connect not only with art or music but with narratives: we intuitively recognize those patterns represented in the medium. Where *House M.D.* is a serial narrative about an acerbic and misogynistic diagnostician, it is allegorical of our lives and therefore possesses the patterns (form/configurations) that we recognize on a subconscious plane. This recognition allows us to “feel” the story. Though we may not all be doctors, or work in hospitals, the fantasy “makes sense” to us because we are familiar with the feelings from our everyday experience.
The psychologist Morris R. Schechtman wrote about this idea of the “familiar”: “It’s a feeling state we return to again and again, an emotional pattern that has tremendous power over us…. The familiar is a very safe place, and it’s the only security in an increasingly insecure world” (3, 6). He goes on to talk about how we all have familiars that rule our lives. These familiars will cause us to choose hardship and things less favorable to our present condition simply because they are a feeling we are used to. Therefore, we may not desire to feel a specific way but we go to it because that which we “understand” is more comforting than the desire to change or find new familiars.

We are all aware of those bosses or other “respected” individuals in our lives that hurt us but we continue to find ourselves going to them. Dr. House may only be a representation of these characters in our lives, but he is nonetheless a reality at some level of unconsciousness. Absolutely, on a conscious level we are able to distinguish between that which is fiction and that which is reality. On a subconscious level, because we find evidence of this when reading a book, watching a film, or participating in a play, we may not be able to distinguish these created familiar patterns from those that happen to us in reality. Watching the Seven Dwarfs profoundly effects our emotions, some of us to the point of crying, yet they are just drawings. *House M.D.* is just moving photographs.

As the familiar of the television narrative becomes interconnected with our familiar emotions, those patterns of recognition are no longer different substances in our brain (i.e. the feeling of the show versus the feeling of the emotion). What we have experienced on television is no different to our minds than what we experience in our lives. The feelings are just as real internally.
As we participate in serial television, returning to the identical, we return to what is commonplace emotionally and we feel safe. The story of Dr. House may be gruff, vulgar, and reprehensible but there is something in the patterning of the television show which we identify intuitively. This says something about the culture, individually and collectively, in which we live. We would like to believe that those who serve us (as Dr. House cures his patients) would work as hard to meet our needs as he does on television. Furthermore, the allegory of corporate culture is generalized to meet the patterns of many organizations. As we find our personal realities mirrored in Princeton-Plainsboro we reinforce those familiar patterns further.

This does not mean that we go out of our way to recreate in our lives would-be Gregory Houses. Instead, this means that the feelings that are engendered from watching the show are further given validity. Of course this experience is not unique to House M.D. The experience of such patterning takes in many forms of expression: cultural, societal, spiritual, musical, literary, organizational, institutional, etc. What House M.D. does is harness this natural experience of intuitive connection we all have and then reinforces those experiences in our lives.

For audiences to enjoy a television show, that television show must reverberate with principles and parallels that they understand. House M.D., like all popular television, was created to connect with its audience. Because we generally connect with organizations and Americans live in a capitalist society (the main audience for House M.D.) the patterns used are those of business culture. Therefore, House M.D. is an allegory of capitalist, corporate society. When we watch House M.D. we are watching our collective lives portrayed through the allegory. The allegory being indirect in its portrayal means that we intuitively recognize ourselves in the narrative without believing that we are seeing ourselves.
The connection between audience and television show in the case of *House M.D.* is about patterns – there is an explicit framework to the television show that goes beyond writers’ needs for simplicity. Perhaps those needs are the organic reason for its institution in the first place, but patterns are not exclusive. The same patterns that come from practical reasons can have unexpected consequences. Whether anticipated patterns or not, *House M.D.* is overflowing with allegorical meanings from episode to episode. What once was meant to merely connect with audiences has deeper implications, and more far reaching connections over time.

**Dr. House and the Myth of Sisyphus**

Odysseus, speaking of his time in sojourn to the underworld, said, “And I saw Sisyphus at his endless task raising his prodigious stone with both his hands. With hands and feet he tried to roll it up to the top of the hill, but always, just before he could roll it over on to the other side, its weight would be too much for him, and the pitiless stone would come thundering down again on to the plain. Then he would begin trying to push it up hill again, and the sweat ran off him and the steam rose after him” (Homer). Sisyphus had been condemned by the gods for actions he had taken in spite of them. A kind of trickster, Sisyphus “was the wisest and most prudent of mortals” (Camus 88). Using that so-called “wisdom” he tricked the gods and thereby defied death. He was adamant about living his life according to his own will and desires. And he meant to continue living it forever. Because of his insolence, the gods banished him to the underworld with the punishment which Homer above describes. Albert Camus wrote of Sisyphus, “They had thought with some reason that there is no more dreadful punishment than futile and hopeless labor” (88).

Within the context of patterns given to Dr. House, he is a trickster in the world of commerce. But he is not unlike Sisyphus, a condemned sinner meant to push his metaphorical
boulder up the hill each episode only to start over again the next episode. “We are condemned to useless labor,” declared Dr. House. As a trickster, he keeps to his prescribed role in the institution: a liar, a disturber of the peace, and a profane prophet revealing truth through his pranks. “The workman of today works every day in his life at the same tasks, and this fate is no less absurd” (Camus 90).

Dr. House may reveal to us the very nature of our business (whether that business be non-profit, education, commerce, or religion) but he becomes nothing different from week to week. He may help this character here, or that character there, to overcome their maladies, but that is not unlike rolling the rock to the top of the hill only to do it again the next day: “At the very end of his long effort measured by skyless space and time without depth, the purpose is achieved. Then Sisyphus watches the stone rush down in a few moments toward that lower world…” (Camus 89). The episode is over and we will come back to the next with the beginning of yet the same pattern of behavior again: business as usual.

We find comfort in the expectation of the pattern. We are willing to wait. We could turn the channel or eject the DVD, but we prefer the pleasure of the experience. If this were not so, we would do similarly with our own lives: eject. But for most of us, this is not the course of action we want to take. And, it is not the course of action Dr. House takes. He returns for this season, and the next, and the next after that: pushing the stone up the hill again.

We find relief in the repetition: repetition emphasizes sameness, and the monotonous quality of the televisual text is an important part of its appeal. “The series consoles us (the consumers) because it rewards our ability to foresee: we are happy because we discover our own ability to guess what will happen. We are satisfied because we find again what we had expected” (Eco 86).
*House M.D.* reveals what life is for all of us without prescription of how it should be. The allegorical fantasy is about the negative space left behind that Dr. House reveals, letting us see the world through new eyes. Thus the trickster archetype makes sense in the allegorical world of business – life perpetuates in the same repetitive cycles (the hills Sisyphus travels up may even change, but we will find ourselves usually doing the same kinds of things we always do) – when we strip our lives down to those bare cycles of monotony we are begged to ask ourselves, “Where is meaning?”

We as Americans have this paradox of absurdity in our lives - it’s what drives us to consume more, to get in debt more, to spend our lives pushing through selfishly, looking for something (even in our philanthropy) to hold onto in life. We live these patterns of repetition and in those patterns we want so desperately for a sense of meaning to it all. We are waiting for Godot. And Godot is not coming; at least, we as Americans do not feel that way.

In *Waiting for Godot*, “[Beckett] is trying to capture the basic experience of being ‘in the world’, having been thrust into it without a by-your leave, and having, somehow, to come to terms with ‘being there’…” (Esslin 173). This is the same experience of both Dr. House and his audience: we are all coming to terms with “being there” “in the world.”

ESTRAGON: Charming spot. (He turns, advances to front, halts facing auditorium.)
INSPIRING PROSPECTS. (He turns to Vladimir.) Let’s go.
VLADIMIR: We can’t.
ESTRAGON: Why not?
VLADIMIR: We’re waiting for Godot.
ESTRAGON: (despairingly). Ah (Beckett 8)!

These characters embody the absurd sense of waiting – the play is about this idea of waiting. Beckett was the first playwright to explore such a feeling as the whole of his text, “his dominant metaphor for existence” (Brady 25). As an audience, we feel that same sense of waiting as Dr. House pushes the same stone each week. There are nuances from which we find
pleasure: the characters’ interactions, the mystery to be revealed from the deadly lists of symptoms, or Dr. House’s antics. Yet, when the episode is over we know that we will be waiting yet again for the next episode to go through the same pattern again. And as we watch that episode, maybe our Sisyphus makes some snide remarks as he pushes the stone up the hill, or maybe he will impress us with his virtuosity in doing the trick a different way, or maybe he will tell us a story between his grunts. Regardless, he is still meant to push that stone up the hill again. “His rock is his thing” (Camus 91). He tries to let the rock just roll back to the bottom of the hill:

HOUSE: I quit.
FOREMAN: You can't quit.
HOUSE: I think you're confusing me with Jake Gyllenhaal.
CUDDY: House, are you okay?
HOUSE: Yeah, and I want to stay that way. Talked it over with my therapist. I need to change my environment, my habits.
FOREMAN: But he cleared you to get your license back.
HOUSE: Which will help immensely with my new job in research. I’ve sent out some resumes. Research means no patients, less pressure.
CUDDY: Well, you just got out. Have you had enough time to think this through?
HOUSE: I'm sorry. I know this will affect both of you... And Thirteen... And the one with the nose. I just can't risk coming back here.
CUDDY: Okay (6.03).

And yet, Dr. House does not move:

VLADIMIR: Well? Shall we go?
ESTRAGON: Yes, let’s go.
They do not move (Beckett 109).

He continues to push the rock up the hill. We wait for Dr. House to change, but he is not going to. He's proven that time and again. We wait for him to have a worthwhile relationship but that is not going to happen. We wait for ourselves to change and it never happens because we never put forth the effort. The changes that do come, at best, feel incremental, and therefore hard to perceive. We only get more obese and more in debt in the search of something that is not
there. Perhaps we are rejecting possible changes in ourselves as we would Dr. House if he changed. The show is nihilistic and the narrative is a reflection of us as a capitalistic, Western society.

Our reality can “be seen” in the patterns of the show when interpreted allegorically. As trickster, Dr. House allows us that opportunity. He removes the sheets that cover our nakedness and we see our faults. He should be doing well financially, but he consistently borrows from Dr. Wilson and others for food. He spends his money on frivolities – like his motorcycle, pornography, prostitutes, flame-throwers, high-powered archery, big screen televisions, etc. – but food is something he leaves to others. He perpetually owes money. He spends his and other peoples’ money without remorse. Then there is his addiction to Vicodin and his seeking for pleasure to the extent that he is willing to pretend he has brain cancer with the hopes of being given drugs directly to the pleasure center of his brain. Still, he is not happy. He is also nowhere. He does not progress, even for all his efforts to satiate his passions. As all tricksters, his appetite knows no bounds. Even in his most lucid self-reflexivity he is unable to believe what he knows true about himself: he is stuck. He is still waiting.

“For the moment, I want to speak only of a world in which thoughts, like lives, are devoid of future. Everything that makes man work and get excited utilizes hope. The sole thought that is not mendacious is therefore a sterile thought. In the absurd world the value of a notion or of a life is measured by its sterility” (Camus 51). *House M.D.* is significant because it does tell us a prophetic vision of how things are going today: the current economic downfall, the increasing obesity rate, and growing debts. Everything is a commodity. We hope through the lies we tell ourselves. We want no risk and no effort but we want the outcomes that come from risk
and effort. We quickly move to the next iteration of the same, of the identical: different hill, different rock, same experience.

**Existentialism is a House-ism**

This leads to the existential perspective: what we do is what defines the essence of who we are; not what we say we are. Jean-Paul Sartre gave a speech on October 29, 1945 at the Club Maintenant in Paris. The speech was a treatise, of sorts, which he entitled, “L’Existentialisme est un humanism” (“Existentialism is a humanism”). Freedom was the main theme of this discourse. He also used it as a means to discuss the meaning of their philosophy known as “existentialism.” He was seeking to defend this philosophy from its Christian critics. Early in his speech he stated, “[B]y existentialism we mean a doctrine which makes human life possible and, in addition, declares that every truth and every action implies a human setting and a human subjectivity” (12). As an atheist (not unlike Dr. House) Sartre does not believe that the concept or “essence” of man was conceived of before he was born into the world but that he was born into the world and therefore found subjectivity. In other words, “existence precedes essence” (15). And, “if existence really does precede essence, man is responsible for what he is” (19) because “Man is nothing else but what he makes of himself” (18). As the patient, Rebecca Adler, says in the first episode of *House M.D.*, “It’s not what people say, it’s what they do” (1.01).

In Sartre’s play *No Exit*, three individuals have been fighting in a room they have labeled as “hell.” Two of them, Estelle and Garcin, decide to leave Inez behind. They yell at the powers that be for the door to open. When it finally does, there is a long silence. When Inez prods Garcin to leave he responds, “I shall not go” (41-42). It is at this point that Garcin becomes conscious of his intent and he makes choices that purposefully reflect his essence: “Each man has an aim in life, a leading motive; that’s so, isn’t it? … A man is what he wills himself to be” (43). Garcin
reasons that it is the intent that matters but Inez speaks truer to the existential philosophy when she retorts, “It’s what one does, and nothing else, that shows the stuff one’s made of … You are – your life, and nothing else” (43). Shortly after, Garcin states the infamous adage, “Hell is – other people” (45).

“In order to get any truth about myself, I must have contact with another person,” says Sartre (44). In his treatise, *Existentialism is a Humanism*, Sartre explains, “The other is indispensable to my own existence, as well as to my knowledge about myself … like a freedom placed in front of me which thinks and wills only for or against me” (44-45). At Princeton-Plainsboro, Dr. House is not only a Sisyphus but also like the characters in *No Exit* because there are other people. And yes, it almost goes without saying, these other people are his hell. More importantly, however, it is in his relationships with others and the ethical decisions that Dr. House reveals to us not only things about himself, as a character, but of us the audience.

In business there is the aphorism, ‘the end justifies the means’ which is now mostly defunct in human resource terminology. Instead, this has been changed to a more principle-driven perspective: “You can make money without doing evil” (Google). And we could say that Dr. House does not perform “evil” in going about his duties. The medical maxim would be, ‘do no harm.’ Instead, Dr. House lives up to the existential standard of “value is nothing else but the meaning that you choose” (Sartre, *Existentialism is a Humanism* 58). This is the very core of capitalism. The market (another word for society) decides what is valuable and what is not. As Dr. House investigates a person’s issues, the patient still has some say in what is valuable to their diagnosis, but this does not always mean that “the customer is always right.” And, Dr. House is quick to recognize this current factor in his work. He can do this because, like in business, the end result is usually what matters most to the customer and the means needs only to be
acceptably ethical to the customer. Therefore, the business makes “money without doing evil” insomuch as the means is agreeable to the market; in other words, we have not progressed beyond “the end justifies the means.” Instead, we have given the value another meaning of our collective choice. Watching Dr. House when he breaks ethical standards and applauding him for his disruptive behavior because he saves the patient reinforces the picture of how things are today in America. The allegorical nature of the show allows us to see ourselves through that looking-glass, but askew enough that we do not recognize ourselves in the patterns except intuitively. We find comfort in that reality because we are familiar with it, despite its damning nature.

Dr. House’s will is often merely to pit him against that of the hospital. He finds ways of disturbing the required notions of doctor-patient, manager-subordinate, peer-to-peer relationships. All of these boundaries are pushed by him. He pushes against the fabric of society, metaphorically making faces at it, sneering and jeering at the institution. And then nothing really happens. He is stuck. Like in the Charles Shultz comic strip, Peanuts, Dr. House becomes like Charlie Brown. Charlie, in nearly every strip, goes through an epiphany, having moments of introspective understanding, but his world never changes. Again, he comes to the next strip with his psychology unchanged. Dr. House does the same. At the end of some episodes there are the makings of change, but even as Dr. House pulls out of his addictions and finally crossing the boundary of the infamous (among fans) “Huddy” relationship he thwarts his possible improvement only to fall back into his own familiar patterns. To press the self-destruct button is far more efficacious in meeting personal comfort than it is to achieve any desired goals. Audiences watch, waiting for him to change, but he never does.
His shaping is as if he were fated to remain the same amidst all the chaos of his relationships and those things brought as consequences down upon himself. In turn, rather than learn from his mistakes or his epiphanies, he falls back into his normal train of thought. There is safety in the familiar.

“We want freedom for freedom’s sake and in every particular circumstance. And in wanting freedom we discover that it depends entirely on the freedom of others, and that the freedom of others depends on ours … I can take freedom as my goal only if I take that of others as a goal as well” (Sartre 58). And here, we see that Dr. House takes the lives of his counterparts and he enslaves them as he enslaves himself. There is no freedom despite all the freedom that he desires (as we desire) for “freedom’s sake” because Dr. House again reminds us that we are selfish beings in search of our own self-interest. As in the first episode, when Rebecca Adler queries Dr. Wilson about Dr. House:

REBECCA: Is he a good man?
WILSON: He’s a good doctor.
REBECCA: Can you be one without the other? Don’t you have to care about people?
WILSON: Caring is a good motivator. He’s found something else (1.01).

It is implied that Dr. House has another motivation for what he does than the freedom of people. Instead of caring for people, he cares more for solving the puzzles that surround him. The perplexities of diagnosis are more motivating than the pursuit of understanding the people beyond needing to manipulate them. This is not unlike business’ motivation to help others with the intent to make money in the process:

Google is a business. The revenue we generate is derived from offering search technology to companies and from the sale of advertising displayed on our site and on other sites across the web. Hundreds of thousands of advertisers worldwide use AdWords to promote their products; hundreds of thousands of publishers take advantage of our AdSense program to deliver ads relevant to their site content (Google).
Google offers “search technology” that costs nothing to the consumer on the surface. Instead, they provide their free service with advertising displayed on their site to entice the consumer. They get to know their consumers through data driven means; every search is accounted for and given a statistical analysis. Dr. House is not interested in the patient so much as fulfilling their needs through an objective, highly sterile process that negates the people from holistic beings to mere statistics of data (symptoms and possible causes). Whenever Dr. House’s employees break into a patient’s home to find out things that may be useful to their business, they are like Google or Facebook (or any other search engine or social media). These internet entities are breaking into our homes and personal lives (they have been invited in, even) and they leave having smuggled interesting tidbits of information that make their business better for helping the consumer.

**Patterns and Paradoxes**

*House M.D.* is satiric allegory in the guise of detective fiction. The detective fiction makes the show popular and the allegory allows for meaning to shine through the popular fiction. Thus, *House M.D.* can inadvertently tell us about our society without overtly thrusting that meaning on us. When we watch *House M.D.* it allows us to unknowingly watch ourselves. When we do this, on a subconscious level, we are learning about ourselves. In a society that has seen political and economic angst for the past ten years, *House M.D.* fulfills a need for Americans.

Allegory gives us a means to see ourselves indirectly. This indirectness makes us feel safe to witness ourselves, even in our most flawed state. In other words, because American society is an intelligent bully during a time of wars, economic distress, and other miscellaneous “cultural disruption,” *House M.D.* is providing a sense of “order and rationality” while simultaneously criticizing, satirizing and rejecting some of the more culturally arbitrary notions.
Every episode has a firm structure to adhere to that is necessary for television shows. For instance, whether the show has a four act or six act structure is determined by the network’s need to put commercials at specific points in the episode. Also, for the ease of the writers, the episodic formula is necessary to pump out scripts quickly. These provide “order and rationality” and indirectly point to the need for cultural rituals in what is otherwise a chaotic society. This arbitrary need for television provides the meaning that society craves despite “however complicated and inane the circumstances seem to be.” Equally, the content of House M.D. strips the Western culture of its pretenses and forces viewers (albeit, indirectly) to see the underbelly of familiar notions: kindness versus truth, faith versus reason, etc. for their paradoxes. When the arbitrary and thematic intersect, the audience receives an allegory to interpret.

The writers’ intent may not be to present us with clues about the nature of Western society at this time, but they are doing just that. The trick now, for the audience and scholar alike, is to decipher the allegory for its possible meanings. When this kind of allegorical interpretation is done, House M.D. may present the “detective” with clues about the way society is going. If this is true, then popular television allows the audience to better understand their world. A television show like House M.D. affords us that opportunity when interpreted allegorically.

Allegory being indirect in its portrayal means that we intuitively recognize ourselves in the narrative without believing that we are seeing ourselves. The connection between audience and television show in the case of House M.D. is about patterns – there is an explicit framework to the television show that goes beyond writers’ needs for simplicity. Perhaps those needs are the organic reason for its institution in the first place, but patterns are not exclusive. The same patterns that come from practical reasons can have unexpected consequences. Whether
anticipated patterns or not, *House M.D.* is overflowing with allegorical meanings from episode to episode. What once was meant to merely connect with audiences has deeper implications, and more far reaching connections over time.

“Progress is betterment. Man is always the same. The situation confronting him varies” (Sartre, Existentialism is a Humanism 52). Our technologies may improve, change, or otherwise differ from what it was before but we are always the same. Dr. House reminds us of this existential reality. We may have grown the personal computer in the last two decades from 16-bit monitors to full, high-definition smartphones that do thousands of times more processing – and then there is the internet with all of its nuances – but we are relatively the same creatures. “The existentialist will never consider man as an end because he is always in the making” (Sartre, Existentialism is a Humanism 59). We are not free because we are still seeking our own self-interests – individually and collectively.
Chapter Three: Allegorical Complaints

The purpose of this chapter is to explore how the lens of archetype and allegory can be applied to *House M.D.* and what it says about Western society. This chapter is three “case study” analyses from select episodes. They are not meant to embody all that is in the television show (such an undertaking is beyond the scope of this study). What has been written previously has proposed that *House M.D.* is an allegory of capitalism and Dr. House is the archetypal trickster in this allegory. These case studies are employed to illustrate the function of this allegory and what resulting conclusions can be drawn from its application.

As Hugh Laurie put it earlier, “patients come to be cured of allegorical complaints” in this “Enchanted Forest” (Jackman 10). Each case study looks at the minute patterns in the episode to determine what the “allegorical complaint” is for that specific episode. Every episode will allegorically link back to something related to America culture because of the overarching “extended metaphor.” These principles vary from entrepreneurship to social media. The scope can be as focused as branding and brand management and as broad as economic crises. Because we have determined the allegory, the “complaints” the patients come to be “cured of” is now the focus of our analysis.

Current events would have informed the writers’ and producers’ work, and would have been a part of their own collective unconscious. Linda Olds explains, in her book *Metaphors of Interrelatedness: Toward a Systems Theory of Psychology*, that this is not a connection that is meant to give us epiphanies so much as to reveal to us our own interconnection with each other, as a Western society, across a horizontal plane rather than a vertical:

> We no longer inhabit a universe capable of being represented vertically alone; the embeddedness of us all in an intricately interrelating dance of energy and spacetime, of connection and change, has become the inescapable heritage of our time. We must reach out for horizontal metaphors which speak the language of embrace and interconnection, rather than striving and rising above (xii).
In Claudia H. Johnson’s book, *Crafting Short Screenplays that Connect*, she discusses the idea of “The Screenplay Paradox.” She explains that audiences want to watch stories about themselves, “But we don’t want to see our own life up there on the screen because we’ve seen it already, and that would be boring. We want to see our own life – and we don’t” (15). This is where the business allegory becomes useful to the writers. They can show us our lives, our current events, and our own experiences through the guise of Dr. House and his staff. The function of the following analyses is to point out where these “horizontal metaphors” may be employed “to watch stories about” ourselves.

**Entrepreneurship**

Originally airing on April 11, 2006, episode 2.17, “All In,” is about digging up the past in order to understand the present. From an allegorical perspective, these changes are specified by the writers and producers of the show. In this episode, Dr. House is depicted in one of his most kindly of incarnations. And, from a personality stand-point, one could say that Dr. House may only be kind about it because of a desire to solve a previous unsolved puzzle. This might not be an incorrect assumption regarding Dr. House, but his desires are not nearly as important as the existential perspective regarding his actions: what he does defines who he is. In turn, his trickster archetype in this episode more fully defines the allegorical meaning of the text.

Ian Alston is a six year old with the same symptoms as an elderly client Dr. House tried to diagnose (and failed) twelve years earlier. This gives a compelling perspective to this episode as Dr. House’s team are able to write up the list of symptoms, in order, before they happen and then anticipate the path that death will take getting the boy to his final destination. All along the way, each symptom is a new harbinger to anticipate and prepare against. Each symptom that comes means that they failed the test of the previous symptom. In the beginning, based on Dr.
House’s assumption from the previous patient, he states his belief that the culprit is Erdheim-Chester disease. He never found out the real cause of her death because the family would not allow him to autopsy. Upon initial testing, the team rules it out. In the end, when testing again after Dr. House demands it several times, Dr. House stands correct.

Two Scenes

In the opening scene of the episode, Ian appears to be an average kindergartner or a first grade student. They are at a life science museum where the class of students enters into a gigantic replica of the human heart. His teacher is very pregnant and appears to go into labor when she discovers that Ian is bleeding profusely from his rectum as evidenced by the backside of his pants being soaked with blood. Ian is unaware that he has a problem except that he expresses the need to go to the bathroom previous to this discovery.

The second scene is at a hospital charity function where they are playing poker: Dr. House, Dr. Wilson and Dr. Cuddy against one another. After a long attempt to annoy Dr. Wilson in order to determine the kind of poker hand he has, Dr. House is quickly distracted to Ian’s case after an E.R. doctor reports his symptoms to Dr. Cuddy. Dr. House leaves his hand behind which Dr. Wilson sneaks a peek: “pocket aces,” or a pair of aces – something that is possible 1 in 221 hands (Ray) and thus also somewhat rare. Despite his odds of winning the hand (which he would have if he had stayed and played) Dr. House is more interested in Ian’s case and the gamble involved there. In the end, this same hand is what wins Dr. Wilson the entire poker tournament and his gloating to Dr. House is what gives Dr. House the epiphany necessary to make the intuitive leap back to an earlier diagnosis and finally to solve the case.

Between these two scenes, the writers have composed a rationally structured and ordered action to the rest of the episode; nothing is left to coincidence. The purpose of the episode can be
exposed by looking at it through the lens of the business allegory. We are looking at the “heart” of business: entrepreneurship. To be an entrepreneur, the individual has to be willing to go “all in” on whatever venture they deem worthy of their time. In this case, they could go for what is small in comparison to what is of greater worth (as in Dr. House seeing the poker game as trivial to the rewarding benefits of saving a life). In other words, think of the poker game as one of two things: a normal job working for a company or the business student still in school. The normal job is going to pose very little reward for very little risk. The business student is merely playing with ideas and theories, which is even less risky.

*The Gamble of Entrepreneurship*

Leaving the low risk opportunity for a much higher risk entails in it a greater possibility of failure but also a greater reward at the end. When Dr. House leaves the “normal job” of his poker hand, he departs with not only that greater reward/failure scenario but he also goes with a plan for solving a previously explored scenario. Most entrepreneurs do not go into a venture without first having a taste of it. In fact, the next step Dr. House takes is to pull out his old files on his previous patient with the intent of using it to help him in this new venture. When the team (and others) finds out what he is up to they call him obsessed and crazy. Dr. Wilson goes so far to compare him to Moby Dick’s Captain Ahab, saying, “Obsession is dangerous.” This is indicative of what most entrepreneurs feel when they decide to push forward: naysayers. What the writers tell us, through Dr. House, is: “You do realize that the point of metaphors is to scare people from doing things by telling them that something much scarier is going to happen than what will really happen?” (2.17). The implication is that entrepreneurs are inherently tricksters.

Sumantra Ghoshal and Heike Bruch in their article, “Going Beyond Motivation to the Power of Volition” related the story of Wim Ouboter, the founder and CEO of Switzerland's
Micro Mobility Systems. They compared his story to Homer’s *Odyssey* and the need for entrepreneurs to plug their ears to sirens in order to accomplish their goals. Ouboter initially had many naysayers to his plans to create the microscooter. "That's when I said I'll do it anyway," Ouboter recalled. He had to learn to protect his purpose, stave off the naysayers, and move forward to the end goal. This was a conscious decision on his part (51-57). Similarly, Dr. House is consciously protecting his aim by saying “I’ll do it anyway” (a classic trickster motif).

The allegorical perspective of this episode poises Dr. House as an entrepreneur in a world of big business. The expectation in business has been that the bigger companies create greater dominance than smaller companies. In modern times, however, companies such as Google, Facebook, and Netflix were small entrepreneur ventures that first provided services before worrying about financial gains. The poker game was small to these entrepreneurs and they went “all in” for the big gambles, as Dr. House demonstrates. The models had never been tried before. There was never any proof that their new forms of approaching business would be profitable – only a hunch. In turn, they were rewarded for their efforts, as Dr. House is rewarded in the end. It is Dr. House’s concentration on his customer that wins, his learning from past experience, and being willing to forge forward against the odds with a hunch. He had to be obsessive about it, protecting his aspiration from all naysayers.

*Philanthropists and Capitalists*

Dr. House is able to do what he does because he makes decisions to gamble for higher stakes than those at the card table. Where oftentimes Dr. Cuddy is postured as a kind of benevolent servant to people, the archetypal savior that we are accustomed to in demeanor (well-meaning, caring about the greater whole, looking for win-win scenarios, protecting others, etc.), she is revealed here as dismissive and concerned only about small stakes (the poker game).
Philanthropic enterprise is equally concerned with its customer – the poor people of the world – but the economic gains are small, if at all. They begin with the right idea in mind, but there is little to gain for Western society in only giving to needy causes. The economics would never support it.

When Dr. Cuddy is initially asked what the E.R. doctor should do for Ian, she quickly responds, “That sounds like gastroenteritis and dehydration. Order fluids and I'll take it on my service” (2.17). She goes back to the poker game and becomes frustrated when Dr. House shows interest in Ian’s symptoms. She believes that it’s a ploy for him to distract from the game in order to win. Barbara Barnett, in her tome to House M.D., considers Dr. Cuddy an “idealist” (118). What Dr. House as trickster reveals is that idealists are easily distracted from important matters right in front of them. As is evident in her office, her idealism is throughout the world, with pictures of Dr. Cuddy in third world countries helping people in far distant lands. She is the quintessential philanthropist doctor giving of time and talents all over the world. One will never find such things in Dr. House’s office.

Dr. House could be seen as equally the philanthropist as Dr. Cuddy. The difference is subtle. She concentrates on the people and their needs. Dr. House concentrates on their needs. She gains a sense of purpose in the people. He gains from this experience, but only as much as any trickster needs to gain: satisfaction in doing it anyway. As much of society contemplates “going social” or “going green” because it’s better for humanity and the earth. House M.D. says that we should be doing things just for the satisfaction of doing them.

Dr. House is a capitalist. He is a symbol of how the writers subconsciously believe contemporary capitalism should be transformed. Most of society today believe that businesses are only in it for money and that social idealists, like Dr. Cuddy, are the future. Many experts
would not argue with that notion. The writers and producers of *House M.D.* subconsciously have a different, broader vision.

When the symptoms list is put side-by-side on the board, it is figurative of the way things will go with society. The pattern on the left has been allegorically outlined from the industrial economic age and its ultimate failure. The twelve years dead elderly woman is the industrial economic age. The pattern on the right is that of the twenty-first century information economic age, what should be young and vibrant, dying by the same patterns of the industrial economic age. Dr. House, in this episode, rebels against the old pattern of things. A new gamble must be taken by entrepreneurs to sustain American economics not by money but by caring about serving people’s needs – not by shifting costs to and borrowing benefits from people, communities, society, etc. The implication is that the end result will be greater American abundance (or life).

At the end of the episode Dr. House insists that he believes it is Erdheim-Chester disease. They all believe that it has been ruled out and cannot be the cause. He makes his team run a test on the last piece of Ian’s heart. The stakes are at their highest because Dr. Cuddy has banned Dr. House and his team from touching the boy further. When Dr. Chase asks, “You sure about this?” Dr. House responds, “Wait, let me think about that. Don't pressure me. Just run the damn test” (2.17). He is more willing to experiment, to go back to the beginning notion of what the cause could be, than his subordinates. As an archetypal trickster, he can do things that are revolutionary – like considering starting over our way of thinking from the beginning – and get away with it. In doing so, they all are surprised by the result: the test is positive and the boy is saved. Similarly, the writers and producers of the show are unconsciously asking us (allegorically speaking) to go back and rethink our methodology for approaching our current economic crisis from the beginning. This means redefining what it means to be capitalists.
As an antihero, the “All In” episode demonstrates why Dr. House has the “hero” in his antihero label: he is always willing to go to heroic lengths to save someone from death. He believes in something greater than the mundane of life. Regardless of his plans, his existential actions are those of a hero. In short, Dr. House goes “All In” as the archetypal trickster, and it pays off. Death is his nemesis in nearly every episode; there are very few (if any) more powerful enemies to be warring with. The death of capitalism is not what is being advocated in this episode but fighting that death by taking a new perspective on it. We are being encouraged to learn from the past. The patterns lay before us, and the creators of the televisual text give us a prescription for success.

**Economic Crisis**

“House’s Head” and “Wilson’s Heart” (Episodes 4.15-16) are considered two of the best episodes written for *House M.D.* They comprise a two-part finale to Season 4. For his performance in “House’s Head,” Hugh Laurie was nominated for a Primetime Emmy Award for Outstanding Lead Actor in a Drama Series. Greg Yaitanes, the director of the episode “House’s Head” received the Primetime Emmy Award for Outstanding Directing for a Drama Series. The narrative has allegorical parallels of the 2007-2009 American economic crises.

To understand these episodes, it is important to understand that Dr. Wilson (Dr. House’s best friend) has a girlfriend named Amber Volakis. As a character mostly unseen in these episodes, she is central to its finale.

At the beginning of this two-episode storyline, Dr. House is in a strip club with skull fracture, concussion, and no memory of how he got there; thus the mystery. Much of these two episodes exist in the subconscious and “locked” memories of Dr. House. The audience, with Dr. House, slip in and out of his mind, in and out of time-period, and even have to interpret the
subconscious clues (such as an amber necklace as a symbol of Amber Volakis) to determine the answers to the questions. In these episodes, the medical mysteries are not the center of attention as much as the subconscious mysteries necessary to knowing the end. The past must be revealed and examined. And, in the end, one life is saved while the other is lost due to circumstances rather than medical mistake. The unintentional murderer is Dr. House – and only he can reveal his own identity.

Thinking, Reason and Results

The pilot episode of the series revealed a recurring theme for the entire series: the Rolling Stones’ song, “You Can’t Always Get What You Want.” When Dr. Cuddy tries to convince him to do clinic duty to which he responds, “Well, like the philosopher Jagger once said, ‘You can’t always get what you want.’” Later, Dr. Cuddy has looked into “philosopher Jagger” and rebuttals with, “Oh, I looked into that philosopher you quoted, Jagger, and you’re right, ‘You can’t always get what you want,’ but as it turns out ‘if you try sometimes you get what you need’” (1.01). The song was also played at the end of the episode. At the end of “Wilson’s Heart,” dead Amber speaks with Dr. House on an ethereal bus. To understand the following comments, we have to understand that Dr. Wilson and Amber are in a relationship and having been living together:

    HOUSE: I could stay here with you.
    AMBER: Get off the bus.
    HOUSE: I can't.
    AMBER: Why not?
    HOUSE: Because, because it doesn't hurt here. I let it... I don't want to be in pain. I don't want to be miserable. And I don't want him to hate me.
    AMBER: Well, you can't always get what you want (4.16).

Dr. House exits the bus. The significance of this moment underlies not only the entirety of these two episodes but the series as a whole. In a way, it is not only the theme for the
characters or merely an extension to the audience’s life. The theme is also about the connection between *House M.D.* and its audience.

Life is not predictable and in these episodes, that is what the producers of *House M.D.* have embraced. When musing over why Amber has to die and he gets to live, Dr. House says to Amber’s otherworldly visage, “Because life shouldn’t be random. Because lonely, misanthropic drug addicts should die in bus crashes, and young do-gooders in love, who get dragged out of their apartment in the middle of the night, should walk away clean.” In the act of stating this, they have accepted the inescapability of the unpredictable. Many culminating incidents will come together to create an unexpected ending.

As Dr. House’s mind has all of the clues to the mystery that only he perceives, he must unlock the first mystery: who. He knows that he was in a bus crash. He knows that he does not know how he got there in the first place. More importantly, he knows someone is going to die due to a medical problem – something diagnosable. But he does not know who that person is and what prompted him thinking there was a medical problem to be diagnosed.

Every episode of *House M.D.* requires thinking to discover the answer. These episodes are unique because the thinking (in Dr. House’s mind) becomes more obvious to the audience. His thinking becomes concrete to the audience. His ability to think is compromised by his lack of memory. “The shortest distance between here and your memory is straight through your prefrontal cortex. All we have to do is access it” (4.15). This requires a need to stimulate his thinking: medical hypnosis, sensory deprivation, scene reenactments, drug induced, etc. Throughout these visionary moments, Dr. House sees an unknown “Woman in Black.” He knows that she represents something else: “You weren’t on the bus … What do you have to tell me?” When he goes into cardiac arrest he connects symbolic clues together, mixed with
memories, to recall Amber being on the bus with him. He does not know how she got there, why she was there, or why he was on the bus in the first place. He only knows he was on the bus with her. As he comes out of his heart attack:

**HOUSE:** Amber.

**WILSON:** What?

**HOUSE:** Amber. It was Amber. She was on the bus.

**WILSON:** You almost kill yourself, and all we’re getting is drug-induced fantasies.

**HOUSE:** Have you spoken to her?

**WILSON:** She’s probably working. She’s... She’s been on call. [Looks at his watch] I called her... [Starts to realize] She didn’t call... I... I... How could she...

**HOUSE:** I don’t know... Jane Doe #2.

**HADLEY:** Female. Late twenties. Kidney damage. Does Amber have a birthmark on her right shoulder blade?

**HOUSE:** She was on the bus with me. She’s the one who’s dying (4.15).

Ayn Rand describes in her book, *The Virtue of Selfishness*, the process that Dr. House has been putting himself through:

> [Thinking] is an actively sustained process of identifying one’s impressions in conceptual terms, of integrating every event and every observation into a conceptual context, of grasping relationships, differences, similarities in one’s perceptual material and of abstracting them into new concepts, of drawing inferences, of making deductions, of reaching conclusions, of asking new questions and discovering new answers and expanding one’s knowledge into an ever-growing sum. The faculty that directs this process, the faculty that works by means of concepts, is: *reason*. The process is *thinking* (22).

The Woman in Black reminds him, “You believe in reason above all else” (4.15):

Reason is the faculty that identifies and integrates the material provided by man’s senses. It is a faculty that man has to exercise by choice. Thinking is not an automatic function. In any hour and issue of his life, man is free to think or to evade that effort. Thinking requires a state of full, focused awareness. The act of focusing one’s consciousness is volitional. Man can focus his mind to a full, active, purposefully directed awareness of reality (Rand 22).

When Dr. House stimulates his ability to focus on a “directed awareness of reality” he is looking for the relationships, differences, and similarities in his “perceptual material.” He forces himself to see the clues that otherwise, on his normal conscious level, are not accessible. “I know
what’s bugging your subconscious,” says the Woman in Black (4.15). Whether he is hallucinating, having a dream, or shooting electricity into his brain, he is listening for the subconscious patterns as a means for knowing his reality.

When corporate America perceives a problem or has a notion of something, solutions are sought. Like Dr. House, they start listening for the subconscious patterns to know reality. When we come together in a conference room, when we are given a task to solve a problem, or when we talk to a client on the phone, we are asked to use reason and think through some matter of importance often involving a customer. Faulty reasoning and short-term thinking can lead to problems. Much of our time spent in an organization is thinking about problems that were caused by previous reasoning. Problems do not typically arise from nothing.

Previous to House M.D.’s original air date, a great deal of thinking went into the financial sector, predominantly the housing market. In search of certain ideals, banking minds went to work to discover ways to increase money in their vaults. The price of homes was an opportunity for banks to provide what they saw as a win-win scenario. Banks make their money by giving out loans. The more loans they can muster, the more money they end up with in the bank. When financial minds set to thinking through this desire for more capital, they went with the reasoning that if they were able to get more Americans into homes, they would be increasing their loans. This would provide them with their desired income and also produce for customers more opportunity of home ownership. They only needed to determine how to get more people in homes and this meant increasing the potential homebuyer’s ability to receive loans. Thus the creation of sub-prime lending:

Sub-prime lending is a relatively new and rapidly growing segment of the financial market that provides credit to borrowers who, for one of numerous reasons, would generally not be extended credit …One of the major benefits of sub-prime lending is growth in the number of homeowners. Sub-prime lending is also high-cost borrowing for
those seeking and accepting such credit. Sub-prime lending cost has two major aspects: Credit history and down payment requirements. This is in contrast to the prime market, where the borrower’s cost is primarily driven by the down payment providing they have an adequate credit history …. Because poor credit history is often associated with more delinquent payments and defaulted loans, the interest rates for sub-prime loans are generally considerably higher than for prime loans (Erbschloe 1).

Amber dies because of the medication she was taking for influenza. When her kidneys are damaged because of the crash, Amber’s medication is no longer being filtered and therefore becomes toxic to her body. She is poisoned by the very thing that was meant to help.

The short-term prescription for financial influenza was sub-prime lending. Those who desired to obtain home ownership but did not have the upfront down-payments or the credit necessary to get into a home could use sub-prime lending to obtain that possibility. This was started at a time when interest rates on real estate were low, giving borrowers a low monthly payment. Loans become easy to obtain. By the airing of this episode in 2008, the reality of sub-prime lending causing mass foreclosures and economic burdens upon millions of lives was a frightening reality.

“Everyday, Americans turn on their televisions or open their newspapers and cannot escape the endless media coverage of the subprime mortgage crisis” (Santos 285). Interest rates began to grow, and the sub-prime loans were matching those interest rates in monthly costs, but most Americans were not able to keep up with the financial demands of the increasing monthly obligations. “The result has been a policy consensus that lenders in this sector of the mortgage market were out of the control of public authorities, and that a predatory and exploitative bubble of lending was inflated which fed off low interest rates and rapidly rising house prices (Langley 469). Thus, many homeowners went into bankruptcy and defaulted on their loans. In essence, they had been hit by the metaphorical bus.
What is significant in this episode is the producers’ ability to illustrate the way that things were going. In July of 2008, the Housing and Economic Recovery Act of 2008 was made law by President George W. Bush (United States Government). The Act was put in place “in an attempt to stabilize the housing market for the short term” (Santos 329). This is not unlike the attempts made by Dr. Wilson and Dr. House to “freeze” Amber’s decline:

WILSON: Wait, wait, wait! Protective hypothermia.
HOUSE: You want to freeze her? Her heart's not beating.
WILSON: Her heart's already damaged. If you restart it, it'll keep racing, shoot off free radicals, and kill her brain. We ice her down, put her on bypass until you've diagnosed her.
HOUSE: This is not a solution. All you're doing is pressing pause.
WILSON: It gives you more time to find a diagnosis (4.16).

Since the sub-prime loan crisis, banking has undergone huge disruptions. The term “stimulus” has received a new connotation in American vernacular. “The Obama administration has continued to roll out a barrage of fiscal and monetary initiatives to revive the economy and stabilize the banking system” (United States of America 12). At this time, how the economic crises will play out is still unknown. Much of this will have to do with the degree of trauma that the financial system has incurred and the policy response. The ability to think as intensely as Dr. House to discover the mystery woman’s identity will be required by politicians in their search for a cure to the American financial crisis created by sub-prime lending.

Where the previous episode allegorically taught us how to obtain success, these two episodes teach how to cope with failure. First, we must turn inward and discover who needs help without worry of blame – just look for the solution. Second, we must not look for short-term fixes because they do not work.

“In fall of 2008, global economic depression seemed a viable future possibility. As the U.S. stock market went into in free fall and major financial institutions collapsed on an almost
daily basis …. On September 14, 2008, the United States government decided not to rescue the large financial house Lehman Brothers thus forcing it to declare bankruptcy on the following day. The failure of Lehman Brothers was the first event in a series of events that analysts have described as the worst financial crisis since the world depression of the 1930s” (Berezin 335). In the allegory of *House M.D.*, Amber Volakis has become the metaphorical economy. Amber unavoidably dies in the end. Not a very hopeful prognosis. In other words, “you can’t always get what you want” is a commentary on American business, politics and economics.

**Social Media**

“Black Hole” (Episode 6.16) which first aired on March 15, 2010, is thick with the central theme of façade versus reality. There are three parallel stories happening throughout the episode: 1) the main story of our mystery ailment; 2) Dr. Taub’s relationship with his wife; 3) Dr. Wilson’s search for furniture. The episode revolves around a high school senior, Abby Nash, who suddenly stops breathing and foams bloody, pink saliva from her mouth. The big, long term for her problem is cerebellar schistosomiasis delayed hypersensitivity reaction. The name itself is an elaborate façade which gives its meaning greater ambiguity even in the speaking of it – something that Dr. House does with great aplomb when he reveals it, as if to say, “This is pretentiousness at its finest.” She’s having an allergic reaction to the remains of a parasite that once infected her body.

**Our Mystery Ailment**

At one point in the narrative, Dr. House is in a room meant for studying MRIs, CAT scans and x-rays. All around on the walls are presumably scans of Abby that the team has been studying. On the large table in the middle there is a full-body scan of Abby. Dr. House, through montage, spends a great deal of time in this room while pondering what it is that could be ailing
their teenage patient. Amongst all of the information there is a clue, anticipated to be somewhere, that will lead the team to defy death.

Previous to this moment, Dr. House decides to do an experimental procedure of cognitive pattern recognition. This means six hours of mapping cognitive patterns occurring as the subject watches video. The point is to, essentially, read her mind because they know what her mind is trying to say by the patterns that form. After six hours she is asked to think of something specific and on the screen, albeit somewhat contorted, we see her boyfriend Nick playing baseball. When asked what she is thinking of, it is the same as the image on the screen.

They put Abby into what they call “twilight sedation” and they follow the patterns of her subconscious. The patterns reveal her dreaming about space and about her and an older man (presumably her father) walking with her when she was a younger child. Effectively, her mind is being read. Determining the meaning of the video requires contemplation on the part of Dr. House, in particular.

In his book *The Experience Effect*, Jim Joseph, an experienced marketing manager, reflects upon the nature of marketing teams and what it takes to develop a specific experience for customers. He looks specifically at brand management. And, in order to properly create a brand, he espouses getting to know the customer intimately, “To engage with consumers, we need to fulfill their needs, wants, and desires, both rationally and emotionally” (80). The idea is to know them as nearly as possible on a subconscious level and begin to think as they do. Allegorically, Dr. House is also developing an in-depth understanding of the psyche possessed by his patient – his own customer – in order to establish what it is that she needs. It is not that she can verbalize what it is that she needs, but that her subconscious mind knows better than she does what it is that is necessary for her successful recovery. In Dr. House’s terms, “We know nothing, brain
knows all. You get an ulcer, you don't know it, but the brain increases mucin secretions. It knows what the problem is, knows where the problem is” (6.16). Business organizations frequently advocate determining through close examination who your customers are innately – not by asking them but by observing:

If you can swing it, spend a day with a consumer, … Live with them for a day. See what they go through. Actually witness a mom’s routine as she gets up, drops the kids off at school, commutes to work, makes dinner, tries to relax, and then goes to bed. Watch how she consumes media like television, magazines, direct mail, e-mail, and websites. Log on with her for an hour and see how she spends her time online. Walk in her shoes for a day and observe her as a real person. It will open your eyes … (Joseph 72).

As Dr. House lies on the table, covering her full-body scan, he is metaphorically “walking in her shoes,” trying to see what it is that makes her who she is. All of the illustrations of brains and body surrounding him are not unlike the charts and assumptions which marketers make when looking at their “target markets.” Prying into the subconscious is the metaphorical necessity of marketers. Knowing where the problem lies is equally the ambition of Dr. House’s as it is for marketing teams. This requires understanding the customer as deeply as possible.

Dr. House is willing to go to experimental ends, using technology to heighten his ability to understand his patient: seeing into her mind. Likewise, our ubiquitous social media attempts to see into our minds. Google has analytics that allow marketers to see what people search for in their product category, what words and word combinations are used most often, which have the most amount of “hits” and which are useless. Search engine optimization (SEO) is a business in-and-of-itself. Facebook collects data of their users, their likes and dislikes, their conversations out to the “invisible publics” everywhere. For the right price, a business can understand the subconscious lives of their customers:

There are 600 million users of Facebook worldwide. The last time we checked, half of America is on Facebook, 250 million users access the social network on a
mobile device, and Hollywood made a movie about it. The discussion has shifted from “should we?” to “How do we do this right?” … Within a couple of clicks and less than 30 seconds, you start seeing ideas about what’s working and what’s not (webtrends).

Though there is no representation of this in “Black Hole,” Dr. House has used his team, starting in episode 1.01, to break into clients’ homes to uncover their personal lives. On an allegorical level, the creators of House M.D. are very aware of the current social media trending that occurs. This episode is no exception as it pertains to metaphorical “mind-reading” the customer. It is even more explicit with its use of technology to do so.

In this episode is the representation that we, as human beings, develop façades as much as businesses seek to uncover what is behind those manipulated visages. These façades have fracturing effects that not only cause rifts in our relationships but schisms in our own identities. As much as businesses seek to know who we are on a subconscious level and develop means to fulfill our deepest desires and needs, they also have the very difficult job of wading through our own broken psyches. Abby has the hidden truth that she has slept with Nick’s father, something that she equally desires to tell him to avail herself of the guilt and hides to avoid the shame and possible dissolution of their relationship. Her hallucinatory allergy symbolizes the same dishonesty we produce within ourselves and with others. At one point we see her younger self talking to her current self as a hallucination. In the same scene we see two faces materialize as Nick talks to her – he is himself and his own doppelganger in her delusion.

Again, the face of social media emerges from the allegory: the many faces of that which we produce in multiple forms across multiple platforms are here personified. When we go to Facebook, we have to ask who we are seeing presented. When we go to Twitter, it is the same story. Our blogs and YouTube feeds are also venues for new facades. The features of our identities create a division between reality and presented reality until it is impossible to know for
sure what is real and imagined. For businesses, this is especially disconcerting. From the blog post, “How-To: Build & Manage Your Brand Identity with Social Media”: “There are a host of important considerations, challenges and opportunities in building either your own or your company’s online presence and brand identity via social media. In this post we’ve gathered wide range of resources, advice and tools to help you build and manage your social media brand identity more effectively” (Broitman). The blog post has more than 60 links to other blogs for “resources, advice and tools,” thus demonstrating the demand by businesses to know how to handle perceptions of their brand identity.

The old axiom, “Perception is reality” is considered true regarding the customer and yet it is never reality in the diegesis of House M.D. This is purposeful and the reason that Dr. House exists as he does. As the archetypal trickster, it is his function to rip away the sheets and show the raw nakedness that lies beneath. He is crafted to be blatant about a private matter when he reveals to Nick and Abby’s mother that Nick’s father slept with Abby.

When Dr. House speaks with the father, he’s abrupt: “Only thing is, did you ever have sex with your son's girlfriend?” When the father tries to argue with him, Dr. House responds, “Shut up! See, I can't treat this unless I can confirm it, and the only way she could have been exposed to this parasite is sexually, which means she's gonna die very soon unless you admit that you slept with her.” Nick emerges from Abby’s hospital room, followed by her mother. “Gee, this is bad, because you now have to choose between her living and the truth becoming public. And frankly, given what the truth is, it's a tough call,” says Dr. House (6.16). And Dr. House could not be happier with the incident. He wants the truth to come out. Regardless of its consequences, the creators appear to believe that the only way to remedy our social media schizophrenia is to be open to exactly who we are with everybody. There is no hiding behind the
computer screen. Who we are is determined by what we do. Nick’s father has slept with Nick’s girlfriend. This is what defines him. There is so much that can be said, talked about, manipulated in the world of social media, but a company or an individual cannot escape the truth of what he or she does. This means a kind of social responsibility is required by *House M.D.*, one that calls upon whistleblowers and tricksters to say how things “really are.”

**Dr. Taub’s Relationship: Personal Brand Management**

As business identities become splintered, and the façades organizations build in an effort to “brand” themselves are revealed, the question of trust cannot help but surface:

TAUB: How can you convince someone you're not cheating on them?
FOREMAN: Don't cheat. After a while, they'll catch on.
TAUB: What if I don't want to wait that long?
FOREMAN: Take them with you wherever you go for 24 hours a day. So your wife's a little insecure. Is that so bad? At least you know she still cares.
TAUB: I know she cares. What I want is, for her to be happy. [Foreman looks as though he doesn’t believe him] What? You don't think I want my wife to be happy?
FOREMAN: Sure... As long as it makes you happy (6.16).

Dr. Taub is in the conundrum that businesses find themselves. First, with all of the explicit understanding of a customer that is possible, businesses also want to create the illusion of intimacy – the one-on-one experience – that comes from knowing so much about an individual. They do not want to appear to be “cheating on” their customers. Dr. Foreman says that sincerity in the relationship, over time, is what is required to mitigate the malady. Wanting the “quick buck” the business does not want to wait that long. They need cash flow and they need it now. The long-term relationship is necessary, but it must have its trust now. Second, is demonstrated by the book called *Customer Satisfaction is Worthless, Customer Loyalty is Priceless: How to Make Them Love You, Keep You Coming Back, and Tell Everyone They Know* (Gitomer). The premise of the book is that merely having customers who “care” (or are merely satisfied) is not what businesses want. Instead, businesses need “loyalty” or for the customer to
be truly happy. Another book’s title takes this idea even further: *Raving Fans: a Revolutionary Approach to Customer Service*. The idea of this book is to create customer service that achieves “miraculous bottom-line results” (Blanchard and Bowles inside cover). In other words, businesses want to make their customers happy: “As long as it makes you [the business] happy.”

Earlier in the episode Dr. Taub has been fighting with his wife, Rachel, about their relationship. Dr. Taub tells Dr. House that he got a flat tire, thus making him late to work. After getting to work, he continues the charade even when he knows Dr. House knows the real reason for his tardiness. Rachel has accused Dr. Taub of never spending time with her. Dr. Hadley says the accusation is about her concerns that if they are not spending time together then he must be spending time with someone else. When Dr. Hadley inquires regarding his lying to Dr. House, “Why are you lying to House? … What's the big deal?” Dr. Taub replies, “If I admit we're fighting, he's gonna want to know what about.” She retorts, “So tell him, or tell him it's none of his business.” “This is easier,” he says (6.16).

The idea is that giving more information only causes more questions. Dr. Taub is trying to control his messages to the public. He shares information with all of his team fellows, but he resists certain parties (Dr. House) to be involved in his personal life. He is aware that his personal brand labels him as a philanderer/adulterer and he knows that for Dr. House to take interest requires him to divulge more than he would like to let on. He is trying to fight the trickster. He is also trying to keep the very thin layer of privacy that he has. This experience symbolizes another aspect of the consumer/business relationship: personal privacy.

With Dr. Taub there is the struggle for personal brand management. He desires to give only specific information to specific individuals. This is like what one would do when choosing privacy settings on Facebook: Public, Friends of Friends, Friends, or Custom (facebook).
With Rachel, Dr. Taub is trying to rewrite his current personal brand. Donna Richardson, the founder of Branding & Marketing YOU (Home Page), has written: “Personal branding focuses on your USP (unique selling proposition), how you position yourself relative to colleagues and competitors and how you are able to ‘package’ yourself in an authentic and noticeable way that makes you stand out” (Rachelson). Through a series of attempts throughout the episode, Dr. Taub is endeavoring to change Rachel’s perception of his “unique selling proposition” with regards to her.

While in a meeting, Dr. House notices Dr. Taub texting his wife: “Your texting does not prove you're faithful. It just proves you know she thinks you're unfaithful. Can't force trust” (6.16). Later, Dr. Taub tries a lunch rendezvous at the hospital, taking her out to the car to have sex:

RACHEL: This is much better than lunch.
TAUB: I agree.
RACHEL: What made you think of this?
TAUB: I missed you.
RACHEL: No, I-I mean this — car, in the parking lot. I just don't like feeling like maybe this isn't the first time you've done this.
TAUB: It's the first. I love you. You know that, right?
RACHEL: Yes.
TAUB: I want you to be able to trust me.
RACHEL: And I want to, but — (6.16)

They are interrupted by Dr. House. Dr. Taub is still trying to change her mind about him. He understands his current brand. He has identified what he wants to be known for. He is attempting to align his communications and actions with the new brand he has determined for himself. He is failing miserably because his current personal brand is too ingrained. In a final effort, near the end of the episode (and learning from Nick who previously attempted the same thing) he asks her to marry him. “We're already married,” says Rachel. “I want to be better at it.” He pulls from his pocket a diamond ring which he proffers to her, putting it on her ring finger.
“She said yes,” he later divulges to Dr. House (6.16). But, it is obvious as Dr. Taub walks away and begins speaking with a blond nurse that Dr. Taub’s personal brand is merely a façade for Rachel. Thus, the writers and producers of the show let us know that personal branding has to be authentic to be worthwhile. Our actions give us away, no matter what perception we may promote with others. Equally, this is true of businesses.

In the world of business in early 2010, two businesses also had to grapple with their brand management: Toyota and BP. On February 3, 2010, Toyota announced that its Prius hybrid model had flaws in its braking system. Previous to this, Toyota had a reputation for excellent quality. This severely put their brand reputation in jeopardy and they have been fighting to gain back that trust ever since. They recalled nine million vehicles (infoplease). BP, later that same year, had an oil rig explosion that killed 11 people and created an oil spill in the Gulf of Mexico. The spill resulted in between 17 and 39 million gallons of oil in the Gulf. “We have committed $14 billion to Gulf Coast response and recovery efforts” (BP www.bp.com).

It is not likely that the writers and producers had this in mind when they wrote the episode, but on a subconscious level they are definitely aware of the need for authenticity when portraying messages about ourselves and our organizations. Both of the aforementioned companies were aware of their need to mitigate their messages to the public, seeking to answer only what they had to. Toyota had been battling for a few months previous to this episode with their cars needing recalls for various reasons. AOL Autos (a website dedicated to automobile news and criticism) pointed out that Toyota also tried to keep from the public exact numbers: “Although Toyota hasn't indicated how many incidents led to this particular recall, they did indicate that reports of stuck gas pedals have surfaced in vehicles with no floor mats” (Brennan). The point was to keep specific questions to a minimum.
After the episode, as if the writers were prophetic, another instance of brand management was botched. On May 18, 2010 the BP CEO Tony Hayward said, “I think the environmental impact of this disaster is likely to have been very, very modest” in his interview with Sky News (Milam). Later, he sounds not unlike Dr. Taub when he famously apologized, “We're sorry for the massive disruption it's caused their lives. There's no one who wants this over more than I do. I would like my life back” (CNN Wire Staff). He was unsuccessful in his handling of the media, and therefore his personal brand management. Momentarily, Dr. Taub is successful with Rachel, but not until he had put forward multiple efforts and endured setbacks. Eventually he still divorces in a later season as a result of his façade breaking with too much damage, not unlike the damages BP incurred.

*Dr. Wilson’s Search for Furniture: Identity and Identities*

In this episode, Dr. Wilson and Dr. House are roommates in Dr. Wilson’s condominium. Besides an orange couch and a large, flat-panel television they have no furnishings in their living room. When Dr. Wilson confronts Dr. House about his eating breakfast on the couch, using it as a dining room table, Dr. House retaliates with, “You've never furnished a home.” Dr. Wilson has been married several times and each time his wife has furnished the home. “You are what you sit in. Your friends, your job, your furnishings — it all defines you,” states Dr. House. “Buy some furniture, or admit that you're empty inside” (6.16).

Later, Dr. Wilson has a furniture rental company furnish the living room for him, and Dr. House subsequently discovers this and sends it all back, and the two have a discussion:

WILSON: You told me to buy it.
HOUSE: But you didn't buy it. You rented it. You made one phone call to (reading from a business ad) Economy Furniture Supply — “we get it done so you don't have to.”
WILSON: So what? We had a table, chairs —
HOUSE: But no clue what any of it meant.
WILSON: Fine. I'll hire a decorator.
HOUSE: Perfect. Another woman to tell you who you are.
WILSON: I'll hire a male decorator.
HOUSE: Step inside one furniture store and find one thing you like.
WILSON: I like, not doing this.
HOUSE: One (6.16).

Most would say that being able to answer the question, “what do you want?” is the beginning of making any decision. In other words, the goal comes first. For Dr. House, this means knowing who you are and how what you have reflects who you are. The internet has made our abilities to process this idea of “who we are” and, therefore, “what we want” even more difficult. We are, whether we want it or not, bombarded by advertisements all around us. Sometimes we are not even aware of this phenomenon in our lives.

Industries are branded. Companies are branded. Products are branded. People are branded. We have institutionalized the individual, making them instantly objectified. This objectivation is voluntarily developed. Dr. House is mocking Dr. Wilson for not having branded himself as the world requires: he does not know what any of it means because he does not know who he is. As society requires individuals to fulfill specialties and niches, things become even more complicated by our list of choices available to us. This is illustrated in Dr. Wilson’s futile trip to a furniture store where he experiences many different types of odd seats and tables.

“However well or poorly we determine our goals before making a decision, having set them, we then go through the task of gathering information to evaluate the options,” writes Barry Schwartz in his book titled, The Paradox of Choice (52). What is being simulated with Dr. Wilson is our own experience with the myriad of choices we have all around. As we fight to determine who we are, our own personal brand, the advertisements seek to define who we are too. Dr. Schwartz goes on to say regarding evaluating options:

We talk to friends. We read consumer, investment, or lifestyle magazines. We get recommendations from salespeople. And increasingly, we use the Internet. But more than
anything else, we get information from advertising. The average American sees three thousand ads a day. As advertising professor James Twitchell puts it, “Ads are what we know about the world around us” (53).

If advertisements are what we know about the world around us, then what Dr. House postulates and House M.D. demonstrates is that we are defined by the advertising that we consume. What we know about ourselves is determined by the media we consume. As we become so many different things, we become “empty inside.” Choices become infinitely harder to make. We cannot determine our goals accurately in “a world of expanding, confusing, and conflicting options” and the pressure becomes even more difficult when we are told to choose “one thing [we] like.” When you do not know what you like, you must rely upon others to do that choosing for you. This gives advertising all the more power.

Dr. Wilson’s frustration is further complicated by the two sales people he talks with. They give him very little direction in defining himself. The first talks in purely function terms, “It's made of wood, and you eat off it.” The second merely comments on what he is looking at as a definition of who he is: “You're daring … You're not constrained by rules.” But, even in these “definitions” is strong ambiguity. What does it mean to be “daring” or “not constrained by rules”? “Unfortunately, providing consumers with useful decision-making information is not the point of all this advertising” (Schwartz 53-54). Instead, advertisers are trying to sell brands.

What House M.D. is saying is simple. If you cannot determine who you really are, you cannot sift through the multiplicity of available options and make an effective decision. If you strip away all the brands and leave all the choices with little guidance from advertisers, you will inevitably find yourself incapable of making sense of things. You are “empty inside.” This is why Dr. House is more effective at what he does than others. He knows who he is. We require at least one person telling us what to do. “Hire a decorator,” instructs Dr. Cuddy. She goes one step
further by being specific about whom: “Call Beatrice” (6.16). For Dr. Wilson, and vicariously all of American society, it takes someone else telling him where to go to find answers. We are more like Dr. Wilson than Dr. House.

Fractured Identities

Social media has fractured our identities as a society. Management of those identities is difficult and a further strain on “being somebody” in the world. All we know is that we have to be “authentic” to be less a façade and more a reality to those we interact with. The demands we are given for determining who we are, and so many choices to pick from, snares us with the conundrum of ambiguous identity. Institutions, therefore, have the ability to determine who it is that we are through ubiquitous advertising. And, as much as this is true of individuals, it is even more so true of businesses. Organizations and individuals must anchor themselves in a very specific “brand.” Until they do this, it becomes possible for the tricksters in life to do as Dr. House did with Dr. Taub.

Rachel is walking through the grocery store when she receives a text message on her cell phone: “Whatcha doing?” She texts back, “groceries.”

TAUB: What r u wearing?
RACHEL: U don’t want to know.
TAUB: Take off your shirt.
RACHEL: R u nuts?
TAUB: Touch yourself (6.16).

The scene edits to Dr. House texting as if he were Dr. Taub. Dr. Taub’s comparatively diminutive stature puts him out of reach of his cell phone as Dr. House holds it up above his head. “House! It's not funny. I got enough problems already.” Not even looking back at him, Dr. House says, “Trust me. This is gonna help” (6.16). Text messaging and social media are not the same medium, but fundamentally they parallel. Both are a mediated form of communication
where the voice is not present. Both have an identity attached to the façade, but there is no
guarantee that the person on the other end is who they say they are. Such a medium, as text
messaging and social media, allows each of us some degree of ambiguity. These media
momentarily mask our identity, but echo our social schizophrenia.

*House M.D.* hypothesizes that identity is less determined by us and more so decided by
others. A company’s “brand” is only partially their own – the market eventually determines what
a company’s identity. More importantly, we as individuals often have our identities determined
by institutions, whether we know it or not. “When people are uncertain about a course of action,
they tend to look outside themselves and to other people around them to guide their decisions
and actions” (Goldstein, Martin and Cialdini 10). Put succinctly: we are not our own.
Conclusion

We like tricksters. We like to be reminded of who we are without being directly reminded or being reminded directly but through the use of humor. Tricksters remind us of who we are and do it either indirectly or through humor. Dr. House does both. We like Dr. House.

Tricksters also have their time. At some point, certain tricksters become no longer necessary or we have grown tired of them. Dr. House, at the time of this writing, is losing his power as trickster. Not that he is losing his status as trickster archetype, but that the potency of Dr. House’s abilities to point out our societal foibles is waning. It is time for a new trickster.

Seeing *House M.D.* as an allegory of contemporary Western society opens us up to the ability to see more of our world. The beauty of the allegory is that we are not slapped in the face with our condition. Allegory, while allowing us to find meaning, permits us to distance ourselves from the perspective it portrays. But now we are leaving an age and the time of social disruption that *House M.D.* is a reaction to. We are beginning not to need *this* allegory in our lives and we are moving on to other stories, and other allegories. Dr. House has recently made his final bow, with *House M.D.* leaving the weekly television lineup. This does not, however, lessen the importance of *House M.D.* and Dr. House in our lives. Some stories are for specific times and those stories teach us something about ourselves as a Western society and an American culture; a comment on the modern moment. Such is the role of *House M.D.*

When watching a television show there is an exchange between medium and audience. This exchange that occurs is not one way. The production of television in America has an ideological base that is founded upon advanced capitalism. Corporations may influence (even direct) what occurs on the television screen but viewers do not have to buy. It is not unlike window shopping. We experience what we desire to experience. We can turn from the channel or turn off the television whenever we desire; not unlike moving from one storefront to another.
When we do decide to “do business” as patrons of any one television show, we can use that experience according to our own designs. A hammer can be used with nails, spikes, or as a doorstop. Televisual text can be narrative entertainment, an advertisement, or background noise.

No matter what occurs in the televisual diegesis we still have the choice of what we want to do with it. If it is a conduit for corporations to push their ideology, we can choose to experience it as such. Or, we can experience the text for its humor, drama, or otherwise. The business of television is like any other business: an exchange of trust.

Television creators, writers, and producers trust us with their content. They trust the network with their content. They trust that their work will be portrayed in a light that meets their desires. They trust that there is an audience for their work. They trust that someone will enjoy (at some level) what it is they have to express.

Television watchers trust televisual work to be worthwhile. They are shopping for something that they can put their trust in. We like to be a part of something, “fans” of shows, characters, styles, genres, etc. When we watch something, taking a half hour to an hour of our time to watch, we want to be engaged on a pleasurable level. For some, *House M.D.* is exactly that hedonic level. For others, it is not. Audiences watch for that which has value to them. They buy-in to the potential manipulation of their minds and desires, or they do not. When they do, they are exchanging their trust with that specific programming. “Never trust doctors” (1.13). We have been asked to trust *House M.D.* and there has been an audience that has trusted it.

On Mercurius’ first day of life, he stole his brother’s (Apollo) cattle. Apollo was furious and took him to their father, Jupiter. Jupiter judged the infant as guilty and ruled that Mercurius would need to return his brother’s cattle. As this judgment was passed, Mercurius took out his
lyre and began to play. Apollo was so enchanted by the lyre that he allowed Mercurius to keep the cattle. Mercurius gave Apollo the lyre and the two became friends.

Many have trusted *House M.D.* Remember: the ultimate trickster is not Dr. House but *House M.D.* the television show. The show exemplifies Lewis Hydes’ description: “Trickster is the mythic embodiment of ambiguity and ambivalence, doubleness and duplicity, contradiction and paradox” (7). Like the story of Mercurius stealing Apollo’s cattle, we are presented with a paradox. *House M.D.* reveals to us the baser nature of who we are, while enchanting us with its “music.” Equally, it shows us the more divine in us while stealing away our societal pretenses.

The core of *House M.D.* is its assertion that current Western civilization lives in a perpetual state of dissonance: we desire to have the rawness of emotion but we can only handle this rawness when we combine it with intellect, even if that intellect lies to us. The early twenty-first century has been a time of cultural disruption and moral, ethical ambiguity. We have been in wars throughout the first decade. American politics have had numerous scandals and there are presidential candidates that keep shifting their platforms. Technology is developing so rapidly that we can hardly keep up. Economies are collapsing. While messages abound about success and individualism our contemporary circumstances can be overwhelming. The existential reality presented by *House M.D.* is that we are Ironically ruled by institutions while alternately living according to our phenomenological perspective.

The moral and ethical ambiguity is manifested in the elimination of right or wrong and replaced by the composition of choices and consequences. All diseases have a reason. Some reasons are in the patient’s control. Others are thrust upon them by circumstance or others in their lives. For the show, Dr. House is tasked with teasing out the choices and circumstances behind the consequences evident in the symptoms. As Dr. House once said, “in this universe,
effect follows cause. I've complained about it, but – ” (2.05). When the moral and ethical dilemmas are presented, there is no answer given because no answer is required in a world devoid of right and wrong. Everything is relative to the individual who sees according to their perspective.

As an audience, we are left to learn that the disease of dissonance we share is not about right and wrong. House M.D. is asking us to consider the choices and circumstances that have led us to the cultural disruption in the first place; the consequences or symptoms of our societal disease. As trickster, House M.D. allegorically strips down the structure of Western society and makes bare our paradoxes and contradictions. Beneath the façade there is pandemonium. In this, House M.D. gives a prophecy of the way things are going. A great paradox: we begin with the lies of fiction and find in House M.D. the truth about ourselves. “Everybody does stupid things; it shouldn't cost them everything they want in life” (1.12).

Sadly, Dr. Gregory House must leave us on our own. We must diagnose for ourselves what has been causing this disease and, more importantly, we need to prescribe our own treatment. This means that we must overcome the rawness of our own emotions through the use of our intellect. Are we willing to take the necessary medication or will we continue to feed our addictions rather than cope with reality? We must let go of our selfish motives. As long as we are seeking our own self-interest we will never truly be free.

Like the philosopher Jagger once said, “You can’t always get what you want” (1.01).
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