Editorial
Mirth Control for the Medical Computer

Are we not ourselves creating our successors in the supremacy of the earth? Daily adding to the beauty and delicacy of the organization, daily giving them (the machines) greater skill and supplying more and more of the self-regulating, self-acting power which would be better than any intellect?

Who is asking this question? An office clerk worried about being replaced by electronic machinery? A business executive apprehensive about being downgraded by automation? A physician uptight because of the diagnostic potential of computers? No, this question antedates the computer by more than half a century. It is quoted from the chapter “The Book of Machines” in Samuel Butler’s Erewhon, written in the year 1900.

Impressed, as we may be, by the predictive quality of Butler’s satire, we are less fearful of machines as potential “successors in the supremacy of the earth” than we are of the ominous implications for medicine in a small hardly noticeable footnote in Erewhon that reads “I am also informed, that almost all machines have their own tricks and idiosyncracies; that they know their drivers and keepers; and that they will play pranks upon a stranger.”

When a computer lapses into humorous play, as it is sometimes made to do, does it affect those with whom it interacts? Describing a specially designed program in which patients are able to talk during a computer-based interview, Slack and Slack1 state, “We have tried to have computer inter-viewing of all types be as much fun as possible for the subjects. We believe that the humor and personal touches do help people to interact with the machine.”

But what type of humor (sick?) has the computer in store for the sick? Programmed, no doubt, by professional gag men, political speechwriters, and night club entertainers, will it be safeguarded against such gems as “Doctors bury their mistakes,” or “About the diagnosis they disagree, but how unanimous about the fee”?

We are especially concerned about humor of a more sophisticated variety that may be in the cards for the readouts of computer-physician dialogues. What if in the course of an automated consultation the machine surprises us with a quotation from Voltaire: “Doctors are men who prescribe medicines of which they know little to cure diseases of which they know less in human beings of whom they know nothing”?

The resourceful humorist ex machina may even quote Diderot: “The best doctor is the one you run for and can’t find.” The erudition displayed in this readout may surprise us, but not the disappearance of the “best doctor.” Obviously, he has gone underground to escape from this stereotyped brand (is there any other?) of “medical” humor which pursues him to the remotest mountain retreats and desert outposts.

There is much to be said for the moratorium on automated medical mirth.

S.V.