When in the mid-1950s, at eighty years of age, Dr James-Edward Ruffier completed his final cross-country cycling adventure, pedalling from Paris to his home on the south coast of France dressed in tweeds and a large Alpine beret, he could look back on a remarkably long and varied career founded on the medical training he received in the 1890s. By that point, Ruffier had chalked up quite an impressive suite of achievements. From the early years of the twentieth century until well after the Second World War, he had run a successful physical culture school in central Paris, and in the 1930s he also managed a natural cure centre in a leafy part of Cannes. He was sufficiently recognised by the Vichy regime in 1940 to be appointed chief doctor at its new national athletic training centre (CNMA), based in the southern coastal town of Antibes. Through these diverse efforts, Ruffier had become a relatively well-known figure in political circles, in the press and in associative life. In the 1950s, in recognition of the wide-ranging contribution to the cause of physical fitness that he had made — always rooted ‘in his capacity as a doctor of medicine’ — he became a Chevalier of the Legion of Honour.

Throughout it all, Ruffier wrote. From the early 1900s he published get-fit guides as well as medical treatises on such subjects as gymnastics and obesity, urging readers to take exercise to lose weight rather than relying on sudation, massage and purgatives. Ruffier moved between a scientific and a popular idiom, but his most successful titles (those republished in multiple editions, some as late as the 1980s) were those aimed directly at an audience of lay punters rather than his fellow physicians. He also contributed articles to the national press, finding a voice in prominent daily newspapers such as Le Figaro and the sportive L’Auto, and in niche publications like Le Cycliste and La Pédale. Most impressively of all, however, Ruffier edited an array of periodical titles, from the short-lived La Petite revue des sciences médicales published before the First World War, to the extraordinarily long-running Physis, the monthly

1 Jean-François Brisson, ‘Le Dr Ruffier: un exemple’, Le Cycliste, Jan-Feb 1965, p. 11.

2 Ruffier worked at the CNMA from Dec. 1940 until July 1941 when he was forcibly retired. For his attempt to be reinstated, see Ruffier to the head of Vichy’s sports commissariat (CGEGS), 14 March and 1 May 1942, ‘Dossier Ruffier’, Archives Nationales (hereafter AN) F44 42.

3 The Légion d’Honneur file for Ruffier held in the Archives Nationales has not survived, but the Grande Chancellerie de la Légion d’Honneur confirmed the award in personal correspondence, 9 Nov 2015.


5 More recent editions were published by the Editions Dangles. See Dr J.-E. Ruffier, Soyons forts! Manuel de culture physique et de gymnastique fondamentale, 123rd ed. (Paris, 1972), re-published as Gymnastique quotidienne: programme journalier de culture physique, d’entretien corporel et de gymnastique fondamentale, (Paris, 1980) with the aid of the Fédération Française de Culture Physique Fondamentale (FFCPF), created in 1980 to popularise Ruffier’s methods. See http://www.gymruffier.com/.

magazine named after the Greek word for nature that appeared between 1919 and 1964 with virtually no hiatus save for the Second World War. Readers could find there a range of technical medical articles about the human organism, but they also encountered social and political critique, poetry, serialised novels and extended autobiographical reflections. Ruffier was still writing on a daily basis in the weeks preceding his death in autumn 1964. These extensive literary efforts have nonetheless gone unremarked by scholars, who have barely noticed Ruffier at all, and then only for his connections to the world of sport and physical exercise. Yet grasping the importance of writing in Ruffier’s career gives us a deeper insight into how the medicalised marketplace around body culture operated in the first few decades of the twentieth century. It is not only that the blurred lines between health maintenance and leisure pursuits in this era opened up opportunities for enterprising physicians like Ruffier, but that figures like him exercised considerable agency in blurring them.

Ruffier was not alone in the medical profession in being such a prolific and imaginative writer. One need only scratch the surface of medical biographies to uncover a surprising number of aspiring littérateurs. Just in terms of French doctors who published novels in this period, one might mention the Nobel Prize-winning physiologist Charles Richet, the socialist feminist psychiatrist Madeleine Pelletier, and the general practitioner turned medical administrator Louis-Ferdinand Céline, whose literary success allowed him to give up the practice of medicine altogether. Dabbling in the literary arts as a medical student or young physician appears to have been commonplace: as illustrious a nineteenth-century physiologist as Claude Bernard, hailed as a pioneer of the scientific method, had apparently considered a literary career ahead of a medical one. Indeed, the honorary president of the Association of the Friends of Doctor J.-E. Ruffier, created in 1956, was the prominent literary author and member of the Académie française Georges Duhamel, who had himself trained as a

7 There was no issue between May 1940 and April 1946. The last issue, no. 350, appeared in October 1964.
8 Ruffier was working on a book about cycling when he died, posthumously published as Pour bien vous porter, faites de la bicyclette by the Fédération Française de Cyclisme (FFC). A.R., Le Cycliste, Sept-Oct 1965, no. 742, p. 218.
physician. Moreover, physicians who produced non-fictional forms of extended prose across the genres of history, memoir, socio-political reflection and advice literature—to say nothing of journalism as a vehicle for such things—are simply too numerous to count.

This form of literary creativity was distinct from the long-lived genre of medical ‘vulgarisation’—dictionaries that communicated orthodox medical knowledge to a lay audience, and the promotion of orthodox health remedies in published self-cure guides. Although such titles continued to appear, by the late nineteenth century they competed more often in the literary marketplace with other genres written by doctors, such as those listed above. The political, professional and cultural environment in which doctors wrote was, after all, being transformed in the belle époque. The advent of a mass press, the renewed parliamentary focus on public health issues, the rise of laboratory medicine and a sharp increase in the number of trained physicians served to boost the social and cultural standing of the medical profession, while also pitting urban doctors against one another in competition for fee-paying clients and hospital posts. Whether seeking fame, fortune or professional advantage, a larger number of medical professionals now sought out a general audience through the medium of the published book. In doing so, many moved beyond strictly medical matters, instead presenting themselves as legitimate voices ready to pronounce on the great challenges of the modern age. Many did not offer remedies for the sick at all, and instead addressed contemporary social concerns in medicalised terms, diagnosing how prostitution, homosexuality or alcoholism, to name but a few alleged social pathologies, were dragging the nation down. Doctors were therefore not averse to using their medical credentials as a licence to preach on issues beyond their technical expertise. As Robert Nye has put it, physicians’ professional training made them ‘credible as scientific mediators between the mysteries of the clinic and the vexing problems of everyday life.’ Still others offered life-style tips for the vaguely dissatisfied or socially ambitious. In this some topics were ripe for the taking—obesity and weight loss, poor mood and the search for happiness, and the quest for youthful beauty; hence, as we shall see, the preponderance of popular texts that addressed diet, exercise, neurasthenia and rejuvenation in this period. In Third Republican France (1870-1940) the ‘physician-writer’ was thus an established figure, if one whose implications for our understanding of the professional subjectivity of doctors, and the relationship between medicine and culture generally has been under-explored by scholars, especially for the post-1914 period.

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16 Nye, Crime, madness, & politics in modern France, p. xi.
James-Edward Ruffier was trained just as these transformations were taking effect. He soon moved away from general practice altogether to chance his arm in the commercial world of physical culture. Ruffier’s writing, in the context of his own overtly entrepreneurial career, was, as this article will explore, a giant exercise in persuasion. He wrote first and foremost to promote his business, keeping his clients and subscribers hooked but also attempting to reach a wider public with his healthy living advice through a careful cultivation of the national and specialist press. His intention was not to popularise medical orthodoxy; rather he presented himself to his readers as a self-fashioned visionary who understood the deeper human truths that had been overlooked by professional doctors, and who was therefore worthy of their trust.\(^{17}\)

Accordingly, I do not intend to offer an episode in medical popularisation; nor an exploration of the influence of medicine on literature, or vice versa.\(^{18}\) In the first part of the article, I engage the question of how Ruffier’s self-fashioning as a physician-writer was grounded in a medical training that encouraged the conceit that doctors were cultured voices. The second part examines the rhetorical and performative techniques that Ruffier used to construct himself as a professional subject with the right to pronounce on matters beyond his medical training. When seeking to harness popular desires for youth and beauty, for instance, Ruffier was necessarily expressing cultural as well as medical attitudes, and thus asserting his professional authority in quite illegitimate ways. This is even more apparent in his ruminations on eugenics. Finally, I seek to place Ruffier more firmly within the ‘medico-cultural milieu’ of the early twentieth century, and in the process to explore the implications of writing for the status of physicians.\(^{19}\) Ultimately, I aim to shed light on the mechanisms whereby physicians in general extended their measure of cultural authority in the early decades of the new century, becoming trusted voices on topics outside their technical expertise.

### Becoming a physician-writer

Ruffier was typical among the cohorts of medical students at the Paris Faculty of Medicine in the 1890s, not just for his sex and bourgeois class status, but also because he

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\(^{17}\) Occasional references to ‘vulgarisation’ before the First World War generally disappeared soon afterwards. Ruffier described *Portez-vous bien!* as a ‘popularisation of the basic laws of hygiene’ in 1914, and *Soyons forts!* as a ‘small work of popularisation’ in the preface to the 3\(^{\text{rd}}\) ed., 1914, p. vii, but the relaunched *Portez-vous bien!* was not promoted as a ‘journal of popular medicine, popularising the diagnosis and treatment of various diseases’, because that evoked pharmaceutical rather than ‘natural’ remedies. ‘Nouveau titre’, *Portez-vous bien!*, April 1929, pp. 1-2. Nonetheless, after 1945 Ruffier still sometimes admired popularisers (such as Louis Pasteur and Jean Rostand) as excellent communicators. Dr Ruffier, *Traité pratique de gymnastique médicale*, 2\(^{\text{nd}}\) ed. (Paris, 1968), p. 8; ‘Explorations de mon passé’, *Physis*, Dec 1962, pp. 5-10.

\(^{18}\) For scholarly discussions of the relationship between literature and medicine, see Ann La Berge and Mordechai Feingold, (eds.) *French medical culture in the nineteenth century*, (Amsterdam, 1994); Andrea Carlino and Alexandre Wenger, (eds.) *Littérature et médecine: approches et perspectives (XVe-XIXe siècle)*, (Geneva, 2007); Niklas Bender, *La Lutte des paradigmes: la littérature entre histoire, biologie et médecine*, (Amsterdam, 2010).

had shown an aptitude for the arts. The decade brought substantial reform of medical education in France, but any attempt to make the training of physicians more ‘scientific’ did not erode the importance of the literary and oratorical skills demanded of candidates. Far from it. Admission to the Faculties of Medicine continued to require the ‘classical’ baccalaureate, whose content was dominated by philosophy, literature and Latin; even the mathematical component was linked to the classics. Meanwhile, the more science-orientated ‘modern’ baccalaureate, founded in the early 1880s, did not allow entry into the Faculties of Medicine at all, carrying as it did the stigma of technical education—something reserved for the lower middle classes. After 1893, even the requirement for the mathematical strand of the classical bac was dropped, and thereby prospective medical students studied chemistry, physics and natural history in a one-year university programme (the P.C.N.), which served as the prelude to the five-year medical degree.

The new stress on the benefits of scientific research in medical education, most obviously in the field of bacteriology, did reflect the higher status accorded to laboratory-based medicine—as opposed to clinical practice—in the profession as a whole. But arguments about the reform of secondary and higher education in the 1890s reveal just how central to the very meaning of the liberal professions, including medicine was a classical education: only the latter could produce the ‘general culture’ that distinguished the professional from the technician. It was an attitude in which the quest for bourgeois social distinction depended on an opposition between ‘arts’ and ‘science’, so much so that even the equally acculturated white-coated medical scientist could be dismissed as a mere ‘empirical’, not a patch on the intuitively sympathetic, classically attuned clinician for whom rhetorical formalism had provided a method as much as a subject, a way of knowing the world that was in competition with the epistemologies of research-based science. It is presumably this prejudice that led the teachers at Ruffier’s Catholic boarding school in Neuilly to express disdain even for mathematics, which they sneered should be left to the ‘scientists’. Even the dean of the Paris Faculty of Medicine, Paul Brouardel cited literary and philosophical skills (command of Latin, intellectual initiative and critical analysis) as the source of the physician’s professional authority in the outside world. Dr Maurice de Fleury, a specialist in psychiatry and one of the most widely recognised médecins-écrivains of the early twentieth century complained over several decades that doctors used to be

20 In his memoirs and in interwar entries in the Guide Rosenwald, Ruffier claimed to have graduated in 1900 or 1901. ‘Explorations de mon passé’, Physis, Jan. 1960, p. 8. Ruffier’s student dossier does not survive. See AN AJ16 6889, 6893, 6901, 6942 (1898-1901).
25 Darmon, La Vie quotidienne du médecin parisien en 1900, pp. 63, 59.
serious, dignified and scrupulous men devoted to the ‘art of healing’, but today they lacked compassion, flair and what de Fleury called ‘general ideas’; they were incapable of deep thought. What was at stake for such figures was not only the preservation of a certain clinical attitude, of course, but the restriction of the medical profession to the right kind of bourgeois male. For such figures, self-identification as cultured men meant a distancing from more overtly scientific models of knowledge and professionalism.

In as much as fin-de-siècle medical students picked up on these tensions, it would have encouraged them to equate literary and philosophical skill with professional superiority. Even if, once inside a Faculty of Medicine, students managed to evade such views, they soon encountered literary and rhetorical tests as well as ‘empirical’ ones. The final-year medical dissertation underscored the importance of narrative skill for budding doctors: it was precisely as a test of literary exposition that the rather insubstantial dissertation element had survived the educational reforms of the 1890s. A much more rigorous test of rhetorical skill, not to mention social confidence was the oral component of the highly competitive concours, the range of specialist examinations that admitted ambitious young doctors to hospital posts after they had graduated. General practice, too, depended on the ability of doctors to perform more than technical medical knowledge. Their bearing, manner and even the décor of their surgeries had to persuade clients of their professional authority. Ruffier learned early on that his clinical success would depend upon an ability to project the right kind of image. Realising that poor patients who did not pay their bills were nonetheless good advertising, he thought that if ‘one displayed knowledge and savoir-faire’, one might come to the attention of potential bourgeois clients. It must have been hard for young physicians to separate medical from cultural competence when equipping themselves for a successful career in general practice.

As it happens, Ruffier’s foray into general practice lasted at most five years. Worn down by the long hours, struggling to build a client base, and frustrated that his patients turned to drugs to solve the ‘everyday miseries of human life’ rather than following his advice about taking exercise, Ruffier jumped ship. Spotting an opportunity to combine his anatomical training with a love of physical activity, he became the medical director of Edmond Desbonnet’s renowned physical culture school in central Paris, examining all pupils at their registration. Ruffier then opened his own school around the corner, premises he managed from 1908 until well into the 1950s.

27 ‘La thèse de doctorat doit-elle être supprimée?’, La Chronique médicale, 1895, in Darmon, La Vie quotidienne du médecin parisien en 1900, pp. 74, 78.
28 In the late nineteenth century, the Assistance publique’s concours for four-year hospital positions had an average 15% success rate. Darmon, ibid., p. 81.
29 Darmon, drawing on fin de siècle medical memoirs in ibid., p. 121.
Equipped with the requisite skills and self-belief developed through his medical training, Ruffier also began to publish, first as a contributor to Desbonnet’s own magazine, La Culture physique, and then as a contributor to the daily sports newspaper L’Auto, an opportunity made possible by a chance encounter with its editor, Henri Desgrange, who became a personal friend. Books followed swiftly, and then editorship both of a medical periodical and the healthy-living magazine Portez-vous bien! (Be healthy!). Mostly Ruffier published under his own name, but on occasion he deployed the pseudonym René Beaumesnil, mostly for the several novels he published, initially in serial form after 1906. Branching out into the commercial world of physical culture thus meant for Ruffier the simultaneous carving out of a literary persona whose authority rested on his medical credentials. By 1909 the doctor had become an author and editor who straddled the worlds of physical culture, medicine, and — via a rejection of drug therapies that was belied by the source of his advertising revenue — natural health (See Figure 1).

![Figure 1](image)

Ruffier in 1909. Agence Meurisse. By permission of the BnF.

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35 La Petite revue des sciences médicales (1907-1914) included articles by other physicians, as did Portez-vous bien! in 1906. When relaunched in 1913-14 it was based at Ruffier’s gym, and Ruffier contributed a greater proportion of the content.

36 The pseudonym was first used for Ruffier’s Considérations sur la culture physique médicale, 1909. The fictional titles are listed in ‘Exploration de mon passé’, Physis, no. 349, Aug-Sept 1964, p. 9, though Ruffier published at least one other, serialised in Portez-vous bien! over several months in 1913.

37 The former director of La Petite Revue des sciences médicales granted Ruffier sole ownership on the condition that his own pharmaceutical products continued to be advertised there for free. ‘Explorations de mon passé’, Physis, May 1962, p. 9.
Writing was an important part of Ruffier’s business model from the start, designed to turn readers into clients for his gym. He had sent copies of *La Petite revue des sciences médicales* free of charge to around 4,000 physicians before 1914, thinking that its mix of medical news, essays and serialised novels would grab their attention, and encourage them to send their clients his way. After the war, Ruffier immediately republished his get-fit guide, *Soyons forts!* (now complete with pull-out wall-chart depicting the exercises he recommended and illustrated with a series of humorous drawings) specifically to attract customers to his physical culture school. His long-running periodical *Physis* (founded in 1919) advertised the gym, and later his cure centre on the south coast, so that readers might be drawn in as ‘curists’ and conversely gym members might buy the books. New editions were made possible only by enough *Physis* subscribers placing pre-orders. Indeed, Ruffier claimed to have funded the acquisition of the Cannes cure centre through the financial contributions of the bourgeois parents of his Paris gym pupils, who were keen to send their children away in the summer months for a sun and air cure.

The fact that so much of Ruffier’s work was self-published should not lead us to dismiss him as a solitary figure howling into the wind. Claiming to have turned down commercial publishing deals early in his career, he made a conscious decision to preserve creative and commercial control. Besides, the articles he published in the mainstream press functioned as free advertising for the rest of his business; it also gave him a national platform for shaping opinions around health and fitness. *Physis* was sufficiently established to be noted by a comprehensive listing of the francophone press in the 1920s. At the same time, it is quite clear that the magazine was a one-man band. Not only were articles by other authors a rarity, but when the publication appeared late on one occasion in 1948, readers were told that it due to Ruffier’s own bad bout of ‘flu. That *Physis* was the creation of a single physician is indeed its most significant and revealing feature, offering insight into the mind and professional practice of a self-styled medical maverick, not least through the great number of autobiographical reminiscences that featured in it from the early 1950s until his death. The memoir material originated in Ruffier’s decision to explain to his readers how and why he moved from medicine to physical culture, but he ranged much more widely, reminiscing about his role in the army’s *service de santé* during the First World War, his

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43 ‘Explorations de mon passé’, *Physis*, Dec 1962, pp. 5-10.

One common lament in these memoirs is that Ruffier felt himself to be an outsider. Doctors before the First World War failed to recognise the importance of physical exercise and thus ignored him, he complained, refusing to mention him in the medical gazettes or refer clients to his gym.\footnote{47}{Dr J.-E. Ruffier, ’Explorations de mon passé’, \textit{Physis}, Feb 1961, p. 13.}

The Vichy government at first rebuffed him, and only the serendipitous intervention of Colonel Beaupuis secured his position at the CNMA. Once there Ruffier felt stymied in his role as mere monitor and lecturer in anatomy: what he really wanted to do was to transform the students by training them himself.\footnote{48}{Colonel Beaupuis pressed the CGEGS to reinstate Ruffier, 21 March 1942, AN F44 42; J.-E. Ruffier, ’Soixante ans de cyclisme’, \textit{Le Cycliste}, April 1947, pp. 59-60.}

Interviewed in the national press towards the end of the Occupation for a retrospective on physical culture schools, Ruffier went so far as to complain that he had never been consulted by the authorities for his expertise in physical education. The public powers, he said, had been unreasonably wedded for decades to the physical education doctrine of \textit{hébertisme}, which, while seductive in its apparently ‘natural’ method, was not fit for children, whom one could not very well force to work out ‘in snow and rain in all weathers and dressed in their birthday suit’.\footnote{49}{Henry Thétard, ’Quel est le grand cycle des sports et de la santé’, \textit{Le Petit Parisien}, 21 Jan 1944, pp. 1-2. On Georges Hébert, see Jean-Michel Delaplace, \textit{Georges Hébert: sculpteur de corps}, (Paris, 2005).}

Ruffier’s own method was modelled on the more medicalised teachings of Fernand Lagrange (1845-1909), whose works he had discovered while still a medical student.\footnote{50}{’Notes et souvenirs sur l’éducation physique’, \textit{Physis}, Jan-Feb 1952, p. 4.}

The self-styled persuader had failed.

\textbf{Ruffier’s rhetorical and performative strategies}

Whatever we learn about Ruffier’s self-perception as a physician through his writing—a young general practitioner unprepared for the challenges of a gruelling workload and modest pay, the aggrieved outsider, the underappreciated visionary—these autobiographical writings are at once a source of our knowledge about his career and a series of rhetorical strategies for sustaining it through its latter stages. In the memoir material, Ruffier was not only the object of his own scrutiny: his self-depiction was also a carefully chosen subject position. Ruffier presented himself as a born rebel not only in relation to his grudging acceptance by the Vichy state, but as a young man whose passion for cycling distracted him from study so much that his father had practically bribed him to pass his exams, and as a medical student strutting around with an eye-catchingly unruly head of curly hair, bunking off lectures. When reflecting on his military service as part of the ’class of 1895’, Ruffier made a point of emphasising that military discipline had rubbed him the wrong way too.\footnote{51}{’Exploration de mon passe’ in \textit{Physis}, Dec 1958, Feb and April 1959.} Casting himself as a Cassandra figure destined always to tell the truth but never to be believed, Ruffier was trying to
tap into what he hoped were popular suspicions about established medicine while simultaneously fuelling the seemingly ubiquitous desire in this period for personal physical and psychological transformation.\textsuperscript{52} This was certainly how the authors of his obituaries saw him, and it is likely how his readers and clients saw him too.\textsuperscript{53}

A second, related rhetorical strategy was to advertise himself: the doctor was always his own greatest product. In his autobiographical musings, Ruffier echoed the ‘weakling turned strongman’ trope that was a feature of so much physical culture and natural health writing in this period, when he claimed to have cured himself of the ‘obesity’ of his student days through cycling and a morning workout.\textsuperscript{54} He also played this card in the 1940s, presenting himself to the Vichy regime as an excellent physical specimen despite his advanced years, and again in the 1960s when he readily showed off his muscles and sharp mind to sports journalists as proof of his methods.\textsuperscript{55} When, during his stint at chief doctor at the CNMA, Ruffier gave guest lectures about the medical control of physical education to young doctors stationed in a distant youth camp, he insisted—despite considerable protestations on the part of his Vichy employers—on making the 100km return journey by bicycle. The trainee medics apparently looked upon Ruffier as a freak of nature for this feat rather than seeing him as a pedagogue whose message had applicability to their own lives. Ruffier thus routinely presented his exceptional physique as proof that he had found the key to rejuvenation that the rest of the population ignored.\textsuperscript{56}

A third strategy was to stress that his professional authority to train and beautify bodies rested on his credentials as a doctor. Crossing from the world of medicine to that of physical culture in the early 1900s, Ruffier must have known that his medical background would offer an important mark of distinction in a crowded market, not least because Ruffier established his business in a quarter of Paris that was the heart of gym culture in this period. His premises in the rue de la Victoire—known as the Institut Ruffier—were plugged from the beginning as a site of ‘medical’ physical culture rather than merely leisure activities.\textsuperscript{57} He provided a wider range of ‘natural’ health treatments than his competitors, not only orthopaedic gymnastics and hydrotherapy, but massage, UV treatment, and ‘Scottish showers’ of the kind familiar to nineteenth-century thermal spa goers.\textsuperscript{58} In addition, advertisements stressed that Ruffier was the institute’s sole director; that he was always present at it, and that exercises were only executed there if prescribed by him and under his direct supervision.\textsuperscript{59} From the beginning, he also offered medical advice by correspondence, encouraging the

\textsuperscript{54} Souvenirs et voyages à bicyclette, p. 26.
\textsuperscript{55} Pol Mariani, ‘Lettre de Belgique’, \textit{Le Cycliste}, Jan-Feb 1966, no. 744, p. 22.
readership of his magazines to write in with questions about their health, which Ruffier answered in subsequent issues. The members of the natural hygiene society (SHN) that Ruffier created in the mid-1930s were in addition entitled to an annual physical examination conducted by the doctor himself. These medical interventions allowed Ruffier to distinguish himself from his non-physician competitors, whom he sometimes accused of developing ‘excessive musculature’ in their clients just for appearance’s sake. That did not stop him from buying into the cult of beauty himself, of course: Ruffier lectured readers and clients that only ‘weak and ugly people’ would be dissatisfied with the kind of whole body work-out he advocated at his own premises.

This medical expertise was projected to a much wider audience in a long-running series of free public lectures at the Institut Ruffier and local municipal venues, which ran from 1912 to the late 1940s. They were advertised in L’Auto, and after 1919 reproduced in Physis: Ruffier used the periodical to drum up interest among subscribers when attendance fell away in the summer months. Precise figures are elusive, but Ruffier claimed regularly to pack some 250 men and women into his main exercise hall for these occasions. It was important to entertain the public as well as instruct them, and to this end Ruffier crafted his public-speaking performance and included live demonstrations of exercise techniques. On a single occasion in 1913 they featured an amateur strongman contest refereed by the legendary rugby enthusiast Frantz-Reichel (presumably known to Ruffier through his work for L’Auto), a display of rhythmic physical culture accompanied by harp music performed by Mlle B. Hennecart (whom Ruffier employed to teach gym lessons for women and girls), and a show of weightlifting strength by Jean-François Le Breton. As late as 1947, a talk on women’s cycling offered under the auspices of the Parisian ‘tandemist’ society was accompanied by a demonstration of good posture in the saddle and correct peddling given by Mademoiselle Lysiane Herse.

Ruffier’s greatest coup was to host a demonstration of the infamous ‘unliftable man’, which took place at his gym on Christmas Eve 1920 (See Figure 2). The eponymous ‘l’homme insoulevable’ was in fact the celebrated American bantam-weight boxer, Johnny Coulon who claimed that by pressing lightly on the carotid artery and the wrist pulse of his opponent, it was impossible for even the strongest man to lift him. The routine was already making news around the world, and Coulon’s star had not yet peaked. After a series of dates in France, he moved on to Switzerland where the

60 ‘La Direction’, Portez-vous bien!, June 1906, no. 1, p. 30. The medical advice included rational gymnastics, a diet rich in dairy products, sleeping with the window open, and the anti-constipation pills marketed by Dr Forges. See Portez-vous bien!, Aug 1906, no. 3, p. 95, and Oct 1906, no. 5, p. 152.
62 Soyons forts!, 1963 and 1914 editions respectively, p. 2 and p. 22.
champion wrestler Maurice Deriaz succeeded in lifting him in Geneva’s Apollo Theatre. Ruffier, in collaboration with the popular press, was complicit in presenting Coulon’s act as a mystery that not even scientific experts could explain. No less eminent figures than Professor Jacques Arsène d’Arsonval of the Collège de France, and the celebrated physiologist and physician-writer Charles Richet, who had apparently summoned Coulon to be investigated at his Institut Métapsychique, had failed to discover the source of his power. Ruffier went to some lengths to invite medical professionals personally to the show, and L’Auto reminded the ‘medical corps’ that it should aim to arrive early because places were limited. In the end, Ruffier complained that only an ‘aggressive crowd of butcher’s assistants and market strongmen’ had turned up, alongside just a handful of ‘sceptical peers’. The only surviving photograph of the event does seem to suggest the socially heterogeneous makeup of the audience, though the press reported that many doctors attended. Hailing Ruffier as an ‘esculape’ (a slang term for a renowned—but also pompous—doctor), the populist Le Petit journal published an interview in which the physician offered his own expert opinion. Ruffier’s answer combined commitment to the empirical method with a refusal to dismiss the kind of magical thinking that no doubt made Coulon’s act so appealing to the public in the first place. All one could do, he said, was to formulate hypotheses that were not in contradiction with the observed facts, and which could then be tested via the scientific method. Ruling out hypnotism, Ruffier surmised that Coulon was able to control his sympathetic and peripheral nervous system in unknown ways. In all of this, it was not only the strongmen who were performing. Dr Ruffier himself was putting on an act, having been cast in the role of scientific mediator by a popular press that played an active part in defining and promoting the spectacle of the ‘unliftable man’. The expert status that such events lent the medical profession and other scientists in the eyes of the general public must have helped Ruffier establish himself as a pedagogue-entertainer whose authority rested on his medical expertise. The episode also underlines the success of Ruffier’s efforts in the early 1920s to expand the audience for his professional performativity far beyond his subscriber and client base. This was not just a question of scale, but of social reach, since L’Auto’s readership encompassed many working-class men and women who could

70 “Je suis insoulevable, mais pas infatigable”.
73 ‘Le Cas de J. Coulon’.
presumably not have afforded to join Ruffier’s gym as clients or to subscribe to his magazines.74

![Figure 2](image)

‘The unliftable man at Dr Ruffier’s. Cadine tries vainly to lift Coulon, 1920’. Agence Meurisse. By permission of the BnF.

The photograph plainly shows the champion weightlifter Ernest Cadine lifting Johnny Coulon. The test was whether Coulon could be lifted again in the correct position. Ruffier appears left of centre, with his hand resting on the shoulder of the small boy.

Perhaps this event gave Ruffier a taste for popular spectacle, because not much later he sought to leverage his scientific expertise further by setting himself up as a judge of physical beauty. No doubt inspired by the new vogue for such things in the USA and France, Ruffier staged his own beauty contest in 1923, but it was ‘the most beautiful man in France’ over the age of forty he sought, rather than the most beautiful young woman.75 Several advertisements were placed in the sports newspaper L’Auto to this effect, producing just over a hundred contestants, the oldest aged 69.76 More than half the entrants lived in central Paris, with the rest fairly evenly split between the Paris suburbs and provincial towns as far flung as Lille, La Rochelle, Besançon, Lyon and Limoges, making its reach genuinely national.77 The point of the contest was of course to advertise the Institut Ruffier among the mature male readership of L’Auto, on which the competition was utterly dependent for publicity. But in choosing to stage a beauty —

74 On the circulation of L’Auto, see Christopher S. Thompson, The Tour de France: a cultural history, (Berkeley, 2008), pp. 21, 42.
77 For the full list of names, domiciles and ages, see L’Auto on 21 Mar, 7 Apr, 12 Apr and 14 Apr 1923.
rather than health—contest, Ruffier was consciously using his credentials as a physician to turn aesthetic questions into medical ones.

This aestheticizing of health was openly admitted by Ruffier. Drawing on his former clinical experience, he stressed that the ‘normal human form’ was a rarity in physicians’ surgeries. Most men let themselves go after the age of forty, leading to ‘the most deplorable physical decrepitude’ that left them ‘outrageously ugly’, a sure sign that poor health was to follow. And it was compounded by the fact that he enlisted the help of the cosmetic surgeon Dr Louis Dartigues, who would go on to play a prominent role in establishing aesthetic surgery as a legitimate medical practice. In a period in which the medical and legal professions shared cultural suspicions about the ethics of operating on healthy bodies, Dartigues argued in its defence. He did so not only by collapsing the distinction between reconstructive and aesthetic surgery (the correction of harelips, for instance, was always about improving looks as well as function), but by declaring ‘ugliness’ a ‘sickness’. It certainly suited Ruffier’s purposes to buy into the idea that a lack of conventional beauty was an indication of disease, just as it suited him to present bodies as plastically malleable. All the finalists undertook regular physical culture, he pointed out, thus preserving their ‘aesthetic shape’ well into middle age.

The judging, too, mixed up aesthetic and medical criteria. In the elimination rounds, where Ruffier was the sole judge, ‘deluded’ entrants with potbellies, high blood pressure, hernias or varicose veins were rejected outright on health grounds. The remaining contestants scored points based on criteria that included chest measurement, blood pressure, lung capacity and bodily harmony, with extra points awarded for every year the men had accrued past their fortieth birthday. Although Ruffier was clearly exercising aesthetic judgement himself here, not least in deploying classical notions of proportion, he went so far as to claim that his contest was a ‘scientific experiment’, a powerful instrument of persuasion in itself by this era. He claimed to be judging ‘uniquely on the figures’ in these early rounds; it was as if the ‘instruments of measurement’ had decided the outcome by themselves. Yet the eventual winners—Adrien Deriaz (43) and Henri Desgrange himself (57)—were chosen on rather obscure aesthetic criteria by a jury that comprised artists and sculptors in addition to Dartigues.

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83 On the rhetoric of scientific experiments, see Roger Cooter and Stephen Pumfrey, ‘Separate spheres and public places: reflections on the history of science popularisation and science in popular culture’, History of Science, xxxii, 1994, p. 244.
the cosmetic surgeon.\textsuperscript{85} In this episode, Ruffier and Dartigues, enabled by the mass press, were putting their medical credentials to good effect in selling their respective cures on the interwar commercial market for youthful, lean muscular beauty. In doing so, and like so many medical scientists in the late nineteenth century, they were taking upon themselves ‘the power to pronounce on the nature of the norm’ in a way that served to extend the cultural authority of doctors in general.\textsuperscript{86}

By the mid-1920s, then, Ruffier had secured a large audience for his pronouncements; he continued to project his work in mainstream print media for decades to come. If the readers of the mass press encountered Ruffier principally as a medically expert showman, his subscribers knew him more intimately as a writer. The multi-genre \textit{Physis} allowed Ruffier something of a playground in this respect, a space in which to construct a literary persona for himself, and not only through the poetry and prose fiction he published there. When returning to his Paris apartment after demobilization in 1919, for instance, Ruffier confessed to the deep pleasure he felt in recovering,

\begin{quote}
‘my desk still laden with my fine writing tools, my library still equipped with my favourite books, the leather armchair as deep as a tomb, in which I felt at home’ \textsuperscript{87}
\end{quote}

Indeed, he seemed keen to press upon his readers at every turn that he was as much a writer as he was anything else. It is difficult to know precisely what reading informed Ruffier’s world view, and the clients at his Paris gym saw only physical exercise texts in the bookshop that Ruffier maintained there.\textsuperscript{88} In \textit{Physis}, however, Ruffier was as likely to refer to the 16\textsuperscript{th}-century essayist Montaigne and the twentieth-century philosopher Henri Bergson as to other specialists in medicine or physical education.\textsuperscript{89} Such references were usually deployed in acts of apparent self-reflection. Looking back in 1949 on ‘this campaign that I have led with all my heart, and with full confidence’, Ruffier seemed almost to apologise that ‘I always had constantly to put myself forward’. ‘In writing of any other kind that would be a great flaw’, he explained, affecting a humility belied by the pomposity of the comparison to come:

\begin{quote}
‘But \textit{Physis} is a work of one man alone who has drawn the precepts that he teaches from his already long life. Long after Montaigne, but like him, he therefore takes the liberty of speaking about himself.’\textsuperscript{90}
\end{quote}

\textsuperscript{85} ‘Le Concours de beauté plastique’, \textit{L’Auto}, 21 Mar and 14 May 1923, p. 2. Desgrange had presumably entered under the initials ‘H.D.’ in order to fend off potential accusations of favouritism.

\textsuperscript{86} Nye, \textit{Crime, madness, & politics in modern France}, p. 48.


\textsuperscript{90} Dr Ruffier, \textit{Physis}, March-April 1949, p. 1.
In the early 1960s, when congratulating himself on having sustained a career built as much on intellectual as on physical activity—as was his ‘disposition’—Ruffier reached for the ideas of Henri Bergson in explaining his own sense of mind-body unity. Ruffier even confessed to his subscribers at the end of his life that had he not found writing novels so difficult he might have had a go at being a man of letters. One wonders how far Ruffier might have been mounting a fourth rhetorical strategy in all of this, presenting his own heightened philosophical and literary sensibility as a mark of the ‘general culture’ that his education had done so much to lionise as an important source of medical professional authority.

If so, it may have been enough to sanction Ruffier’s pronouncements on matters outside his expertise. In Physis, a magazine avowedly devoted to hygiene, Ruffier roamed far beyond any strictly medical engagement with pathology and cure, encompassing musings on such disparate topics as deforestation, philanthropy, and world peace. In May 1946, for instance, a reader would find the (much reiterated) case for taking systematic bodily measurements as a method of medical control in physical education alongside a reflection on the futility of war. In these later years he was more likely than before to ruminate on the ‘human personality’, part of a post-war shift to see the challenges of modern life in psychological rather than moral—or his own favoured organicist—terms. But some of Ruffier’s interwar fixations and vocabulary did survive. He still thought in terms of a ‘surmenage’ (over-taxing of the organs and nervous system caused by over-eating, the stress of intellectual work and sedentarity) that led to widespread neurasthenia. In the 1920s and 1930s, Ruffier had been one of many physical culturists who not only prescribed physical exercise to remedy this problem, but also advocated a form of positive eugenics based on the neo-Lamarckian assumption that acquired characteristics like physical fitness would ‘save’ or ‘improve the race’ because they would be transmitted genetically to subsequent generations. Only those free of such symptoms, he thought, were fit to reproduce: anything else would lead to ‘degeneration’ of the French breeding stock.

Ruffier did not give up this world view easily. The May 1946 issue of Physis included a riposte to the eminent scientist Jean Rostand’s late 1930s work of scientific popularisation, Pensées d’un biologiste. Taking issue with Rostand’s science, Ruffier

93 On the destruction of the forests to serve the need for paper, see ‘Mes Remarques’, Physis, Sept-Oct 1955, p. 1; on philanthropy, see ‘Variétés philosophiques et littéraires’, Physis, Mar 1939, pp. 8-12.
94 Authors of advice columns in popular magazines in the 1950s and 1960s were much more likely than before to frame their responses in psychological than moral terms. Sarah Fishman, From Vichy to the sexual revolution: gender and family life in postwar France, (Oxford and New York, 2017), pp. 114-132.
96 For example, ‘La Beauté humaine’, Portez-vous bien!, Apr 1934, pp. 10-14; Tumblety, Remaking the male body, pp. 44-54.
asserted the importance of environmental factors in shaping the genetic characteristics that were transmitted from one generation to another, thus showing how neo-Lamarckian beliefs died a slow death before the onslaught of Mendelian genetics in twentieth-century France. There was also a residue of his earlier overt support of eugenics. In the late 1950s Ruffier was still celebrating the interwar works of the negative eugenicist Alexis Carrel—another medic who had been arguing beyond his technical expertise in suggesting biological solutions to social and political problems. Ruffier praised Carrel for recognising that modern medicine, with its pharmaceutical interventions, created only ‘artificial health’ by keeping alive those who would in a natural state perish.

The medico-cultural milieu of interwar France

It is plausible that in building a business portfolio that ranged across gyms, cure centres and writing in multiple genres, Ruffier was following the Tour de France founder Henri Desgrange. As a former lawyer and amateur cyclist turned entrepreneur, editor and novelist, Desgrange may have provided a model for Ruffier, as well as being a mentor and friend. Equally plausible is that in making the professional move from medicine to physical culture, Ruffier was learning from the physicians around him who were also creating hybrid careers involving writing and medical research or clinical practice. Far from being a professional risk in a period when medicine was becoming more avowedly scientific, it appears—in keeping with facets of fin-de-siècle medical training itself—that writing was an available means of establishing the authority of doctors within and outside the profession. If that is the case, it is ironic that just as the rise in the relative status of laboratory researchers as opposed to clinicians was shaking up what professional authority might have meant for physicians in this period, the benefits of rhetorical skill and a literary persona were becoming clearer.

Writing was certainly no bar to elite status in the medical profession. It is easy to point to physician-writers who were members of the elite Academy of Medicine—for instance Charles Richet the physiologist, Maurice de Fleury the psychiatrist, and Maurice Boigey the military doctor and specialist in physical education, all of whose literary output show parallels with that of the grubbing medical entrepreneur Dr James-Edward Ruffier. None of them cultivated a persona as an outsider, nor promoted themselves as physically or mentally transformed through their own methods. What they shared with Ruffier was an investment in similar themes and genres, a tendency to


98 Ruffier, Ce qui guérit par l’exercice, p. 5. He was not alone in post-war France in doing so. See Alain Drouard, Alexis Carrel (1873-1944): de la mémoire à l’histoire, (Paris, 2005), pp. 14, 169, 175.

99 For an overview of Desgrange’s career, see Thompson, The Tour de France, pp. 17-20, 146-9.

100 Richet entered the Academy of Medicine in 1898, de Fleury (as an ‘associé libre’) in 1909, and Boigey as a corresponding member of the hygiene section in 1933. The Academy of Medicine collected the literary works of its members as well as the scientific ones. See the individual dossiers in the Bibliothèque de l’Académie de Médecine [BAM].
root inescapably cultural observations in their medical expertise, and in some instances to deploy similar tropes in doing so, notably the casual use of classical and other literary or philosophical references, the medical case history, and the pseudonym.¹⁰¹

Literary ambition was especially pronounced in the cases of Charles Richet and Maurice de Fleury, who had served as a medical adviser for two of Emile Zola’s novels and was a member of the Académie Française.¹⁰² Despite winning one of that institution’s poetry competitions in 1913 with an anonymous entry about Louis Pasteur, Richet was less successful in gaining entry to the institution as a member, failing on two occasions (1922 and 1926) to do so.¹⁰³ All three found established mainstream presses amenable to their work—Flammarion, Albin Michel, Masson and Tallendier, the latter two specialising in popular medical and scientific titles.¹⁰⁴ The personal correspondence of these medics demonstrates in addition the diligence with which they sought to air their views in the high-circulation daily newspapers of the era.¹⁰⁵ De Fleury contributed articles to the daily newspaper Le Figaro regularly for over thirty years, serving additionally as a president of the association set up early in the century to defend the interests of physicians who published outside the profession.¹⁰⁶

Especially striking is the commitment to advice literature aimed at men and women. Both Maurice de Fleury and Maurice Boigey drew on their extensive clinical practice in producing such volumes, paying particular attention to premature ageing and neurasthenia.¹⁰⁷ Since neurasthenia was notable for being a psychological affliction to which the most ordinary person could fall prey, it allowed specialists in psychiatry like de Fleury a chance to pronounce on the everyday emotional struggles of men and women. In dispensing advice, he alternately reached for characters in Guy de Maupassant stories, a rumination on tears by Madame de Sévigné, and tales about the sad and nervous men who sought help in his clinic.¹⁰⁸ Maurice Boigey’s Le Livre de la cinquantaine was pitched at fifty-somethings who felt that life had let them down or passed them by, and advised on all manner of issues, from diet and sleep, to sexual

¹⁰¹ The second half of an early work on obesity consists mainly of case histories drawn from Ruffier’s gym practice, complete with anatomical drawings and weight charts. Ruffier, Le Traitement de l’obésité par la culture physique, pp. 57ff.


¹⁰⁵ Boigey to the medical journalist Henri Bouquet, 7 Jan 1936, Dossier Boigey, BAM. De Fleury contributed articles to his medical Encyclopédie Hachette.

¹⁰⁶ The Association professionnelle des journalistes médicaux français (APJMF); Michel Dupont, Dictionnaire historique des médecins, (Paris, 1999), p. 249.

¹⁰⁷ For example, Maurice de Fleury, Quelques conseils pour vivre vieux, (Paris, 1926 [orig. 1907]) and Maurice Boigey, Le Livre de la cinquantaine (petite pharmacie du corps et de l’âme sans beaucoup de remèdes), (Paris, 1928).

¹⁰⁸ Maurice de Fleury, L’Angoisse humaine, (Paris, 1925), pp. 13, 15, 20. The work self-consciously rejected the didactic prose style of conventional medics in order to reach a lay audience.
expression and (for women) the right kind of hair dye to cover greys. In offering guidance, Boigey cited Montaigne, Pascal and Diderot; evoked the lives of his own patients, colleagues and servants; and concluded the work with several dozen pages of maxims by the likes of Seneca, La Rochefoucauld, Jean-Jacques Rousseau as well as Boigey himself.109

Another shared theme, at least for Charles Richet and Maurice Boigey, was eugenics. Boigey’s treatise on femininity, Sylvie, published in the early 1920s, was not only replete with gendered assumptions about women’s obligations to beauty and motherhood, but also presented the author’s eugenicist views in literary form.110 Several passages were recycled verbatim from Boigey’s early 1920s lectures at the Ecole de Joinville, and from his intended magnus opus, L’Élevage humain (human breeding) whose first volume appeared in 1917. Leonard Darwin’s 1912 eugenics congress in London is described favourably in both texts, the same ambivalence expressed towards the sterilization programmes of various American states, and the same attacks made on the honeymoon (Boigey thought that an overly strenuous honeymoon led to the first child of otherwise healthy couples being an ‘idiot’).111 Looked at in this light, Sylvie becomes something of a template for Boigey’s entire interwar oeuvre, as well as an attempt to penetrate a new literary market with ideas about the potential of the right kind of physical exercise to safeguard the hereditary legacy of the French. Charles Richet, in addition to publishing several pacifist works, was a co-founder just before the First World War of the French eugenics society, alongside the renowned obstetrician and elected deputy Adolphe Pinard. He defended his views in several books published in the interwar years, including a treatise on human breeding, and a cry of alarm about the so-called racial swamping of the French through intermarriage with the ‘less pure blood’ of ‘Asiatics’ and black Africans, which in his view would lead to biological degeneration.112

Like Ruffier, Charles Richet and Maurice de Fleury also wrote for a time under a pseudonym—‘Charles Épheyre’ in Richet’s case (to honour the friend with whom he co-wrote a volume of poetry published in 1879), and ‘Horace Bianchon’ (so-named after a doctor character in a Balzac novel) in de Fleury’s.113 The fact that they did so was widely known by the 1890s, and in that respect, pseudonyms may be interpreted less as a form of secrecy, than as the self-conscious adoption of a literary persona.114 Given that the obituaries of such elite physician-writers made a virtue of their literary achievements,  

110 Stewart, For Health and beauty, pp. 9, 166. Stewart points out that the book contains the ‘moralizing vision of women’ found in Jean-Jacques Rousseau’s Emile (orig. 1762). Since Ruffier sold Boigey’s books in his gym, it is likely that he was aware of these attitudes.
and reminded the public of these pseudonym identities suggests that far from detracting from their standing as ‘men of science’, the publication of literary works, however unorthodox their content in terms of medicine served to heighten rather than to erode their professional esteem. Indeed, when Charles Richet died in 1935, medical obituaries stressed that his greatness arose indistinguishably from his qualities as a scientific ‘expert’ [savant] and from his imagination as a poet. The obituaries for Maurice de Fleury in the medical press in 1931 recorded his contributions to the daily newspaper Le Figaro over three or more decades as a mark of the physician’s esteem. De Fleury was also admired for his personal art collection and as an emotionally astute ‘educator’, a compassionate commentator on human suffering who reached out beyond the profession, and ‘dedicated himself to the task...of enlightening opinion about mental problems’. Maurice Boigey, who died in 1952, received similar treatment, fondly remembered as a ‘lettré’ with a ‘delicately expressive’ face reminiscent of Henri IV, deeply engaged in studying the ‘nature of man’, and communicating his wisdom in the medical rubric he wrote for the popular press. The fact that Boigey had set up a ‘Club du Faubourg’ in the town of Vittel where he worked as a spa physician so that local elites could discuss sociology, arts, literature, and law testified further to his intellectual ‘culture’. Even if one attributes this celebration of literary success to the genre of obituaries itself—that is, to the tendency of their authors to eulogise the deceased as well-rounded individuals—it remains the case that what such sources provide is evidence not only that it was literary skill that produced that well-roundedness, but also that the idea of the physician as a cultured figure had considerable purchase within the profession and beyond. If that was so, we must not underestimate the collective literary efforts of medical doctors in achieving that status.

Conclusion
James-Erward Ruffier emerges from his own oeuvre and from the testimonials of others as a broad, physically fit, fluent and clubbable individual. He had chutzpah and was a risk-taker. His declarations of marginal status are belied by his skill in networking (in the worlds of amateur cycling, journalism, and even medicine itself), and by the state recognition he received in the 1940s and 1950s. Ruffier was first and foremost a medical entrepreneur, albeit one operating outside the conventional practice of medicine: his extensive business empire in natural health extends the meaning of the term ‘medical marketplace’ for our understanding of the physician’s world in the early to mid-

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twentieth century. Furthermore, Ruffier secured his professional reputation across several decades in large part through an incessant and varied programme of writing. When seeking redeployment through the Vichy regime’s CGEGS after his forcible retirement, it was his prose, rather than his technical knowledge or clinical experience that Ruffier presented as proof of his expertise in the sphere of physical exercise: ‘I have acquired a certain notoriety as a writer and journalist, especially concerning youth matters, and that by my articles, books, lectures, I have proven my worth in this genre of activity’. 

Ruffier understood well that publishing was a vehicle for achieving wider social influence as well as commercial success, however much the two elements were entwined. He delighted in his regular column in the daily sports newspaper L’Auto precisely because it would—or so he hoped—make his name known all over the country. If Ruffier’s writing was a form of popularisation, it was not because it transmitted a body of orthodox medical knowledge to a wider public, but in the sense that it shared among the widest possible audience an undeniably culturally inflected understanding of the human body and mind, which in turn is likely to have shaped how men and women in early to mid-twentieth-century France thought and felt about their bodies and their selves. In this, Ruffier was one among many trained physicians in this period who reached out beyond their immediate client base or research position to offer medicalised solutions to men and women who were not so much ill as dissatisfied with the look and feel of their own flesh. That this kind of thinking was culturally rather than strictly medically produced did not prevent it from being widespread. Indeed, it seems likely that the deep resonance of such views created a positive feedback loop between the lay punter and the trained doctor. Ruffier certainly tried to medicalise his readers and clients—to encourage them to see their low mood, fatigue, apparent aesthetic flaws and general life dissatisfaction as a pathology so that they would buy what he, the ‘doctor’ was selling—and I have argued that presenting himself as a particular kind of professional subject was likely to have been important in helping him achieve that goal.

Ruffier could not boast the elite medical status of physician-writers like Charles Richet, Maurice de Fleur or Maurice Boigey. He lacked their formal recognition, and his career was forged only around the edges of conventional medicine; in literary terms it was even more marginal. Yet such cases show that Ruffier was not alone in the tenacity with which he used writing to raise his profile, and these other contemporary examples, if they taught him anything, must have impressed upon him that doing so was a fully respectable endeavour for a trained medical doctor, indeed one that might boost, rather than detract from his professional authority. He would have known that the obituaries of the most eminent medical researchers frequently praised the deceased

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120 Ruffier to the head of CGEGS, 1 May 1942, AN F44 42.
for their literary abilities as well as their scientific ones: such accolades, rhetorical gestures in themselves, were probably intended as ‘proof’ not only of physicians’ bourgeois refinement but of their genius.

However important formal medical knowledge was in the claims made in such figures’ published popular works, it was not unusual for physician-writers to seek influence in areas beyond their medical expertise. This was perhaps most commonly the case in the realm of beauty, gender roles, and the choice of marriage partner but it extended to the treatment of immigration and national security too. These medical littérateurs pronounced loudly in public on such matters as women’s decorative function, and the potential of eugenicist solutions to the biological ‘degeneration’ of the French ‘race’. It is not just that such claims emanated from the same kind of social and cultural assumptions—as well as political preferences—that marked the thinking of sections of the lay public; it is that these figures proceeded (at least rhetorically) from the assumption that it was their medical expertise that granted them the authority to speak in the first place. Given the way that the literary production of physicians was routinely recognised by newspaper editors, publishers and the Academy of Medicine alike, writing appears to have been an important mechanism for extending physicians’ cultural influence in this period, and thus for embedding the cultural authority of doctors in general, even—maybe especially—when they were arguing beyond their spheres of technical expertise.