

(or general contractor, subcontractor) were dependent on the architect's ideas as expressed in drawings.

While the rise of the architect in Saint John emerged as the primary research theme, there were a number of important sub-themes. The level of stylistic and technological maturity shown by local architects was confirmed in comparison with similar efforts in other parts of Canada, especially during the second and third quarters of the nineteenth century. In addition, the relationship between the architect and engineer was examined as these became separate but complementary professions after

1850. Attention was also given to the development of the builder from house carpenter or mason to that of general contractor by the 1870s. Finally, the "art architect" phase of the same period was described as this intertwined with the creation of a new city following the Great Fire of 1877 and a very active fine arts scene. Like the architect's advance within the construction industry, these themes gained visual and material expression, directly or indirectly, through the medium of the architectural drawing and were expressed, it is hoped, in the selections made for the exhibition and its accompanying catalogue.

**Wendy Mitchinson,
*The Nature of Their Bodies:
Women and Their Doctors in Victorian Canada***

FELICITY POPE

Mitchinson, Wendy. *The Nature of Their Bodies: Women and Their Doctors in Victorian Canada*. Toronto: University of Toronto Press, 1991. 474 pp., 12 illus. Paper \$22.95, ISBN 0-8020-6840-5. Cloth \$60, ISBN 0-8020-5901-5.

Wendy Mitchinson teaches history at the University of Waterloo. Her many articles and a co-edited volume, *Essays in the History of Canadian Medicine* (McClelland & Stewart, Toronto, 1988) preceded this full-length study, whose importance lies in its broad sweep. Mitchinson boldly decides to cover the entire field of women's health issues remarking that "since there is little Canadian research in this field I decided that an overview would be more useful in stimulating research" (p. 9). Following her belief that "medicine and culture go hand in hand" this study focuses on "the way in which sex and gender determined the treatment women received in mid to late nineteenth-century English-speaking Canada" (p. 8).

Mitchinson's writing is based on an impressive command of the journal literature, medical texts and archival material including doctors' case books and hospital records. Her generous use of the latter (albeit with patients' names changed) gives an immediacy to a densely written text: "Ruby Granger, aged thirty-two, entered on 2 July of that year suffering from an ovarian cyst. It had been taped two weeks previously

and one-and-a-half buckets of liquid removed ... They finally discharged Ruby on 19 September – unimproved" (p. 262).

The first two chapters provide the context for the rest of the book. Mitchinson shows how doctor's attitudes reflected and reinforced the popular ideology of the "otherness" and the "frailty of women," who by their nature were defined in terms of their bodies, particularly their reproductive organs. She argues that the medical and popular perceptions of women's "frailty" were based on prejudice, not reality, since "women in almost all walks of life worked hard, revealing great strength and stamina" (p. 58). She describes the changing state of medical practice and its increasing status throughout the century as medicine, by aligning itself with science, increased its authority over matters not formerly within the medical realm, such as women's fashion and exercise. "Doctors were becoming the 'priests of the body.' As such they oversaw almost all aspects of a woman's life" (p. 76).

In the next three chapters dealing with menstruation, women's sexuality and birth control, Mitchinson shows how the doctors' cultural attitudes and medical ideology affected their management of these issues. We learn that doctors opposed birth control "as unnatural and representing women's rejection of motherhood" (p. 126). This view accorded

with the public perception reflected in laws prohibiting both the sale of contraceptives and the provision of birth control information. However, the evidence provided by fertility rates shows that Canadians were indeed limiting their family size and "ironically, so were physicians, since they were among the groups with the smallest families in Canada" (p. 149) though whether this resulted from using the devices Mitchinson lists is uncertain.

The real strength of the book lies in the next six chapters dealing with childbirth, gynæcology and insanity. In two chapters Mitchinson describes how doctors displaced midwives as the birth attendant of choice, by offering "an alternative portrayed as safe and scientific," and she argues that by their intervention "physicians, not patients, were defining the meaning of childbirth." Her use of hospital records in these and the following chapters provides the basis for original investigation into the development of operative obstetrics and gynæcological surgery in Canada and the role of the hospital as the changing site of medical activity. Ironically, given her argument that doctors' attitudes about women's "frailty" ignored reality, the cases she cites of women suffering birth injuries and debilitating gynæcological disorders and her remark that "One woman in five who married and started a family did not survive to the end of her child-bearing years" (p. 229) go some way to explain doctors' perceptions of women as being especially vulnerable to ill health.

In common with other historians, Mitchinson argues that technology enabled gynæcology and operative obstetrics to develop as medical specialities; suggesting the importance of technology are two photographs of mid-nineteenth century instruments immediately following the preface. Her discussion of the doctors' own criticism of their peers' apparent overuse of instruments and the rationale accompanying increased surgical intervention provides a valuable interpretive context for material culture specialists. However, not being an historian of technology, she is unable to set the development of this instrumentation within a wider context where we find in the nineteenth century that not only women's bodies but men's too were being "invaded" and "visualized." But she perceptively recognizes the results of

increased intervention and use of instruments: a changing patient-doctor relationship, more power to specialists, increasing use of the hospital. She skillfully delineates the complexity of medical practice and attitudes that add considerably to our understanding of practice at this time.

In the last two chapters dealing with the experiences of insane women, Mitchinson is most clearly able to show how their medical treatment was influenced by their doctors' cultural attitudes to women. Insanity affects both men and women but women were supposed to be more susceptible because of the "close relationship that was thought to exist between a woman's reproductive system and her mind" (p. 310). She describes how R. M. Bucke at the London Asylum was able to institute gynæcological surgery such as hysterectomy and ovariectomy to cure insanity, despite opposition from his more conservative peers, and dubious success.

By implication Mitchinson aligns herself with those historians who strive for a balanced approach to the history of women patients and their male doctors, remarking "doctors themselves were among the most vocal critics of the medical treatment of women. In fact it would be difficult to criticize the medical profession in any way that some of its members had not already done" (p. 361). She gives a sense of a profession scrambling to establish its role, of professional rivalry, of men ignorant yet willing to pontificate, of practice both experimental and swayed by fashion. However, if doctors are not the villains, women are certainly the heroes "who despite severe ailments, carried on with their daily responsibilities because they simply had no alternative" (p. 363). These glimpses into the reality of women's actual health problems together with the analysis of what medical treatment actually consisted of would also be of great value to museologists responsible for interpreting the lives of nineteenth-century women in our living history sites.

This study, which is a welcome addition to historiography of Canadian medical history, will undoubtedly stimulate further research and be referred to as the standard work on the subject for many years.