Oct. 5, 1999
Table of Contents

Number of roles for female MDs mushrooming as century draws to close

Barbara Sibbald

In one short century, Canada's female doctors have gone from fighting for admission to medical school to caring for the country's astronauts. This remarkable progress was celebrated recently by the Federation of Medical Women of Canada (FMWC) as it marked its 75th anniversary during its annual meeting in Ottawa last month.

The meeting featured a range of speakers — Canada's first female dean of medicine, a crusader against teen pregnancy and an aerospace physician — who provided proof of the progress female doctors have made. Meanwhile, the FMWC's examination of one of the century's most celebrated female physicians provided a valuable historical backdrop for the recent advances.

Three speakers discussed the life and career of Dr. Maude Abbott (1869-1940), an FMWC cofounder who achieved equality not by legislation but through performance. The world-famous pediatric cardiologist and pathologist ranked with the likes of Sir William Osler because of her work at McGill. In addition to her seminal publication, *The Atlas of Congenital Heart Disease* (1936), which listed a classification of cardiac disease based on 1000 cases, Abbott published more than 100 scientific articles and edited the *Bulletin of Pathology* from 1908 to 1936.

It was during a CMA garden party in 1924 that Abbott and 6 other women decided to form the FMWC. The following year, 65 women took part; this year there were 200 participants.

Abbott stamp?

The FMWC thinks Abbott deserves more recognition and has asked Canada Post to issue a stamp in her honour. "She was a pioneer for us in realizing our accomplishments," explained Dr. Carol Guzmán, a CMA past president who recently retired as the association's associate secretary general.

Dr. Carolyn Bennett, a Toronto MP, credits women with introducing this century's most important changes in health care, including the shift from physician-focused health care to a multidisciplinary approach and from hospital-based to community-based care. She said women should not underestimate their strength. "Let's get on with the fight."

Guzmán said the newest challenge lies in the different practice patterns of women with children. "Will women be blamed for the shortfall [of physicians]?" she asked. She said the FMWC should develop strategies for coping with women's different practice patterns.

More than a dozen physicians spoke about some of the new roles becoming available to women doctors. Dr. Karen Breeck, a major in the Canadian Forces, talked about the peculiar challenges of caring for well people in abnormal environments, including extreme temperatures in Northern Canada and the tropics, on submarines and ships, and in space. Drug side effects can take on new importance in some of these situations. Viagra, for instance, can impair a man's ability to see blue, and this could be "critical in the cockpit."

Breeck left the military for a year to work in Northern Ontario, but missed the "excitement, the challenge and change and being on salary." She returned to set up a space medicine operation and spent time at the National Aeronautics and Space Administration in the US. On the international space station, she will provide ground-based medical care for Canadian astronauts. "Space changes every system of your body, and we know very little about it," she said.

Teen pregnancy

Dr. Christine Davies, a family physician from Saint John, NB, set up a First Steps program to prevent teen pregnancies, whose rate is double the provincial average in her region. She emphasized that men must take responsibility for the problem. She said two-thirds of teen moms are impregnated by men older than 20. "We're talking about adult exploitation."

The Canadian Criminal Code states that vaginal intercourse is legal at age 14, anal intercourse at 18. "We need to give women the same protection men have against exploitation." She is lobbying to raise the age of consent.

Dr. Elizabeth Hall-Findlay, one of Canada's few female plastic surgeons, dispelled some of the myths surrounding this type of surgery and discussed its growing acceptance. She argued that most breast-related plastic surgery, such as implants and reductions, aren't done to please men. "Women do it so they feel better about themselves," she said. "It's about patient choice." Many of the other types of plastic surgery have both a reconstructive and cosmetic impact. Eyelid surgery, for instance, often improves patients' vision.

Barbara Sibbald is CMAI's Associate Editor, News and Features.