HISTORY OF WOMEN IN SURGERY : AN OVERVIEW

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ABSTRACT

The history of women as medical and surgical practitioners stretches back to at least 3500 B.C. Wall paintings in tombs and temples of ancient Egypt show them performing surgical procedures and there is also evidence that women surgeons were practicing in ancient Sumeria, Babylon, Greece and Rome.

During the middle ages as per a formal decree issued by the church in the twelfth century monks were prohibited from “blood-letting” or performing operations. This effectively relegated wound treatment, bleeding and bone-setting to barbers and women. Women were particularly valued for their skill in obstetrics and midwifery. In this way an overview with regard to the history of women in surgery is presented here in chronological order.

Sushruta (400 A.D.) of Ancient Indian Ayurvedic (“Science of Life”) System of Medicine is universally known as the “Father of Surgery”. “Susruta Samhita” - a comprehensive treatise on various aspects of surgery (between 800 B.C. to 1000 A.D.) contains 186 chapters in section with description of about 1,000 surgical instruments of various types. Surgery was an integral part of Ayurvedic system, but by the middle of the first millennium B.C. the practice of surgery was abandoned by the doctors of the higher priest class because of religious taboos and dogma; it was relegated to the artisan classes of lower social caste, thus diverging from the theoretical and scientific knowledge of the learned doctors.

In the West, Ambroise Pare (1510 - 1590) of France is known as the “Father of Modern Surgery” as we understand today. Surgical contribution of Ancient Chinese Medicine is also of great importance.

The history of women as medical and surgical practitioners stretches back to at least 3500 B.C. Wall paintings in tombs and temples of ancient Egypt show them performing surgical procedures, such as Caesarean section and the removal of cancerous breasts, and there is also evidence that women surgeons were practising in ancient Sumeria, Babylon, Greece and Rome. A Roman medical encyclopaedist, Aulus Cornelius Celsus, around 40 A.D., a notable medical writer of the first century A.D.’tells of women physicians in Rome; later, Galen (c. A.D. 131-201) recounts the activities of several women, including Margareta, an army surgeon.

During the Middle Ages, much of the medical care was carried out by members of religious orders, but a formal decree issued by the church in the twelfth century prohibited monks from “blood-letting” or performing operations. This effectively relegated wound treatment, bleeding and bone-setting (the menial tasks) to barbers and women.

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women. In spite of this and the difficulties which women faced in attempting to obtain a formal education, they continued to practise surgery, often in secret, and were particularly valued for their skill in obstetrics and midwifery. In the fifteenth century laws were passed in France to control the practice of surgery, which resulted in further restrictions on women surgeons, although it was permissible in law for women to inherit and continue their husband’s surgical practice.

In the kingdom of Naples, Italy, between 1273 - 1410 A.D., at least 23 women were licensed by the authorities to practise surgery in their region; a few female surgeons are known from other parts of Europe, where they learned their craft as apprentices to a father or husband, taking over from them when they died.

The early sixteenth century saw the formation of surgeon’s guilds in England, which limited the activities of women still more, although some continued to provide medical treatment for the community. Many of these women were of good social standing and well educated, with a strong sense of public duty. The care of the sick poor was considered to be one of the duties of a “person of quality”, a tradition which continued throughout Tudor (1485 - 1603) and Stuart (1371 - 1688) times. Women who practised surgery still had to face the hostility of their male counterparts, however, and allegations of witchcraft and sorcery were commonplace, although there were some notable exceptions to the prevailing male prejudices. John Aubrey in his “Brief Lives” tells of a “rare shee surgeon,” Mrs. Holder, who treated Charles II for a hand injury. Under her care, the hand was completely healed “to the great griefs of all the Surgeons, who envy and hate her.”

During the eighteenth century the status of the women surgeon declined, as apothecaries; the vast majority of them men, assumed responsibility for the general medical attention which was increasingly demanded by the public. It was not until the nineteenth century that women began to return to the medical profession, but even at this time it was virtually impossible for them to acquire any medical training. There was still prejudice to be overcome, and a few women even went to the extraordinary lengths of pretending to be men, the most famous example being Dr. James Barry (b. 1797), a British army surgeon. Although of small stature and with rather feminine features, she enjoyed a high reputation for many years as a skilful operator, serving at the Battle of Waterloo (1815) and in the Crimean wars (1854 - 1856). The deception was remarkably successful Florence Nightingale in a letter to her sister described her as “the most hardened creature I ever met” - and her identity was only revealed when she died during an epidemic in 1865. The War Department and the medical establishment were so embarrassed by the discovery that the findings were hidden and Dr. Barry was officially buried as a man.

Unlike Barry, Elizabeth Blackwell (1821 - 1910), an English woman, refused to accept the advice of her tutor to don male clothing in order to obtain a medical qualification: “It was to my mind a moral crusade on which I had entered, a course of justice and common sense.” And, indeed, after entering the Geneva College of Medicine in New York, she gained her M.D. in 1849. This paved the way for many more American women to gain admittance to medical schools there, some of which, like the Female Medical College of Pennsylvania, were founded specifically for women.

Meanwhile, the situation in England was not so easy and, when Blackwell visited London in the 1850’s she found that there was still tremendous opposition to the idea of medical training for women. Her courage
and tenacity had, however, inspired a whole
generation of women, who began to demand
access to the mind of medical education
enjoyed for so long by men. One of these
women, Elizabeth Garrett (1836 - 1917) had
heard Blackwell lecture in London in 1859,
and this had influenced her decision to pursue
a career in medicine. In spite of hostility,
both from her mother and the medical
establishment, she became a Licentiate of the
Society of Apothecaries in 1865, after her
father threatened the Society with a lawsuit
if it refused to examine her. She thus became
the first woman L.S.A. entered on the
Medical Register. The first modern woman
doctor in India was Kadambini Ganguly
(M.B.B.S., 1880) trained at the Medical
College, Calcutta (Established 1835 - this
author’s Alma Mater, as well). She later on
continued her further medical education in
Edinburgh and practised obstetric and
gynaecological surgery in Calcutta.

Following this landmark victory for
women, the Society of Apothecaries, and
later the British Medical Association, re-
rewrote their regulations in an attempt to bar
any further female examination candidates.
But pressure for reform was now coming
from many areas. One notable campaigner
was Sophia Lolita Jex-Blake (1840 - 1912)
whose struggles were of great value in
forming and influencing public opinion. In
1874 she founded the London School of
Medicine for Women, while still actively
lobbying for a change in the law. Even now
there were still influential pockets of
resistance, including the Board of Examiners
of the Royal College of Surgeons of England
who, in January 1876, chose to resign rather
than allow three women (including Jex-
Blake) to sit the diploma in midwifery.
Eventually, parliamentary legislation in 1876
opened up medical and university education
to women, and empowered all medical
examining bodies to examine women candidates.

By 1894, the situation for women had
improved so much that the British Medical
Journal commented: “It is almost as easy
at this moment for a woman to get a complete
medical education in England, Scotland or
Ireland as it is for a man.” While this was
certainly an exaggeration, it is also true that
more women were entering the medical
profession than ever before, and by the end
of the nineteenth century virtually all British
universities were open to women for training
and education in medicine.

Eleanor Davies-Colley became the first
woman FRCS Eng. by examination, in
1911. The daughter of a surgeon, she had
trained at the London School of Medicine
and in 1907 was appointed House Surgeon
at the New Hospital for Women. Highly
regarded by both colleagues and students, her
distinguished career spanned thirty years,
during which time she held several senior
appointments.

In 1919 there were only four women
Fellows of the Royal College of Surgeons of
England; by 1990, this number had risen to
320, still just five per cent of the total number
of Fellows worldwide. Many more women
doctors are now trained as surgeons in
various surgical specialities all over the
globe. Still male domination is predominant.
While some might argue that the under-
representation of women in the surgical
specialties is attributable to lingering
prejudices and stereotypical roles of the
sexes, the true reasons may be more complex
than this, and have at least as much to do
with career structures and the allocation of
time and responsibilities which render other
specialties more attractive for women.
REFERENCES

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शल्यचिकित्सा में औरतों का इतिहास - एक विचार
- सिसिर के. मजुम्दार

चिकित्स के क्षेत्र में एवं शल्यचिकित्सा के क्षेत्र में औरतों का इतिहास कम से कम ईसा पूर्व 3500 वर्ष पुराना है। प्राचीन मिस्र देश के मंदिरों एवं मकबरों की दीवारों पर प्राप्त चित्रणों में उन्हें शल्यचिकित्सा करते हुए दिखाया गया है। इसके अतिरिक्त ऐसे भी प्रमाण मिले हैं जिस से कि यह पता चलता है कि प्राचीन सुमेरिया, बेबिलोन, यूनान तथा रोम आदि देशों में भी औरतें शल्यचिकित्सा करती थीं। इस प्रकार यहां पर शल्यचिकित्सा के क्षेत्र में औरतों के इतिहास के विषय में कालानुक्रमिक रूप में एक विचार प्रस्तुत किया गया है।