## The history boys - and girls



## James Drife

At my age a doctor is expected to take an interest in medical history, but actually it became my guilty pleasure long before I retired. Whenever I was asked to give a talk on 'The historical perspective' I cheerfully agreed, even before I knew what the conference was about. Unearthing facts about the past was fascinating whether my title was, say, 'Contraception through the ages' or 'The origins of the endoscope', but I'm afraid audiences found the results equally boring. Seasoned conference-goers know all about crocodile dung in Ancient Egypt or candles in 19th-century Vienna, and could only hope that I would get them the wrong way round.

Skimming the surface of history is fine for amateurs, but proper historians dig deep. They become super-specialists and respond to any question with, 'Sorry, that's not my period.' They travel to distant archives, running up laundry bills for the white gloves that are *de rigeur* for handling old manuscripts. Or, better, they research the oral tradition, which is how history has been handed down in many countries, including my native Scotland. When I worked in Edinburgh I used to envy fellow academics whose research involved disappearing into the Highlands for weeks on end to chat with elderly locals over a glass or two of whisky.

Both written and oral routes lead to fascinating stories. For example, the first successful caesarean section in the British Empire was carried out in Cape Town in 1826 by a transvestite. 'James' Barry had begun dressing as a man at the age of ten, three years before graduating MD at Edinburgh. She became an army surgeon and arrived in the Cape in 1816. A prickly character, she was later described by Florence Nightingale as 'the most hardened creature I ever met throughout the army'. Despite being tiny, flamboyantly dressed and with a squeaky voice, she was accepted as an Englishman and was in fact a highly effective reformer. A film is now being made about her life, starring somebody beautiful – which is not historically accurate, but then, it's only a movie.

Speaking of accuracy, Africa's first caesarean section had probably been performed long before Barry arrived, by healers who did not keep written records. The evidence comes from a reputable source, the *Edinburgh Medical Journal* of 1884, which contains an eyewitness account of a successful operation carried out in Uganda. The author, R W Felkin, reported that this was the only country in Central Africa where indigenous healers practised

abdominal section in the hope of saving both mother and child. They employed banana wine as anaesthetic and antiseptic, and Felkin concluded that the technique had clearly been in use for a long time. He also noted that the operation was performed by men.

I was disappointed when I read that. Even a smidgin of gender awareness is enough to make a modern man cringe at the way women were excluded from medicine until recently. Sadly, European universities led the way. In 1220 the University of Paris barred women from medicine. In England, Cambridge University (founded in 1209) did not award any degrees to women until, incredibly, 1947. The antics of my own alma mater, challenged in 1869 by a group known as the 'Edinburgh Seven', make embarrassing reading: the female students had to leave and start their own medical school. Searching the Lancet archive for some common sense I found a lecture from 1892 with the encouraging title 'Sex in education'. I was badly let down. The speaker, a doctor with a knighthood, had personally weighed 1 600 human brains and found that men's are heavier than women's. From this he argued that the sexes should not be educated to the same standard, and he ended with the personal observation that too much schooling damaged an English girl's beauty: 'I would rather they remained ignorant of logarithms than that they lost a jot of it.'

The problem with history is that we look at it with the benefit of hindsight. No matter how hard we try, we cannot understand how any intelligent person could believe in the four humours, or expect to cure fever with venesection, or fail to see that cholera is caused by something in the water. Studying medicine's past is like reading a detective story after taking a sneaky look at the ending. But perhaps the most sobering experience for us ageing amateur historians is when we gather together to discuss advances that occurred during our own lifetime. If there are ten of us we will have eleven different recollections of what happened, and even more explanations of why. What we do know, though, is that any article on history tells you more about the writer than the subject, so our debates are strictly in the oral tradition, with a glass or two of whisky.

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