

Letters

To the Editor:

I am appalled at the superficial, pandering, and pro-feminist character of the review by Robert Carle, a theology professor at The King's College. ("America's First Female Doctors Changed the Practice of Medicine," Fall 2021.)

First, I note that a new book about the Blackwells apparently needs to appear about every ten years, published in 1982 (ref.1), 1993 (ref.2), 2013 (ref.3) and now appears the present volume in 2021 (ref.4).

From the standpoint of medical history, I shudder at the frank, basically politico-economic falsehoods uttered by Prof. Carle.

He claims as fact that "[h]ealers who focused on long-term care—monks, nuns, and village midwives—were replaced by doctors fixated on dramatic short-term cures for which they could charge hefty fees. As doctoring became commercialized, women were excluded from the ranks of the guild." Well, most diseases before the discovery and invention of antibiotics in the twentieth century were short-term "recover or die." Short-term cures are cures!

Until fairly recent times, even through and since the Industrial Revolution, most women were housewives, and one of their tasks was (and is) to bear children and raise them. But, according to Carle, the Blackwell daughters learned through the death of their father that "a husband was no guarantee of security." No Blackwell daughter married. It is odd that as a professor of theology, Carle should ignore Genesis 2:24, highly applicable in the Blackwell era as well as today: "Therefore a man leaves his father and his mother and clings to his wife, and they become one flesh." One does not marry for a guarantee of security!

Carle states that in her first book, Elizabeth Blackwell "made the case that hygiene and exercise, rather than pharmacology and surgery, were the true guardians of good health." I submit that pharmacology and surgery are not to be deprecated as less important. That was rather retrogressive thinking.

Today's version of the Blackwells is that diet, exercise, and abstinence from bad habits (marijuana and alcohol are exempt) are the keys. But what about cancers, heart diseases, strokes (our three main killers), and even COVID? Jim Fixx, who popularized jogging, died of a heart attack while jogging at age 52. So genes play a role.

Elizabeth Blackwell is (worshipfully?) quoted by Prof. Carle that “when the low system of coarse and violent drugging shall give place to a more spiritual practice, better adapted to our delicate and wonderful living organism,” and Carle then observes, “The entry of women into the medical profession would help bring about this revolution.”

There is much ignorance of the history of medicine in this review.

Prof. Carle writes, “The Blackwells’ Infirmary contrasted sharply with the unheated and overcrowded wards of city hospitals, where doctors rotated through surgeries, childbirths, and morgues without washing their hands.” I suggest he view the noted painting by Thomas Eakins, “The Gross Clinic” of 1875, which shows no use of antisepsis. And recall that “city” hospitals were political creations or, more commonly, institutions of charitable organizations, dependent in both cases on their sources of funds.

Medicine makes incremental progress. Ignaz Semmelweis started the use of chlorinated lime on his hands in 1847 in Hungary, but he was deemed a quack even though his death rate in childbirth plummeted with this practice.

Louis Pasteur came up with the germ theory in the 1860s, and it was put into practice by Joseph Lister (think “Listerine”!) in 1865. Lister’s methods were rejected by the Dr. Gross of the Eakins painting in 1876, and he was a very prominent medical educator, thus the painting.

Yes, the Blackwell sisters did good work in their time, but to represent them as healthcare pioneers is to be ignorant of medical history, a flaw that Prof. Carle’s apparent feminism does not excuse.

K. Thomas Noell

M.D., F.A.C.P.

Lafayette, LA

Robert Carle responds:

I have several points I’d like to make in response to K. Thomas Noell’s letter on my review in the fall 2021 issue of *AQ*:

1. The Blackwell sisters had no objection to the use of surgery or pharmaceuticals in some contexts. Both of the Blackwell sisters performed surgeries and prescribed drugs. The Blackwell sisters did, however, object to the overuse of surgeries and violent pharmaceuticals when the natural process of healing (i.e., diet and exercise) could lead to more productive

results.

2. Many of the “cures” used in the nineteenth century—bloodletting, calomel, pukeweed, mustard plaster, and turpentine—were worse than diseases.
3. Elizabeth Blackwell’s decision not to marry had nothing to do with ideology. She had to go to work as a teenager to support her widowed mother and her younger siblings. Neither Elizabeth nor Emily had any animus against women who married and had children. In fact, they devoted their lives to serving such women. The Blackwell sisters did not consider themselves to be feminists. They opposed women’s suffrage.
4. The contrast between the clean, inviting, “homelike” atmosphere of the Blackwells’ New York Infirmary for the indigent and the ghoulish wards of city hospitals was reported in the *New York Times* in 1857 in an article entitled, “What the Lady Doctors are Doing.”
5. I believe that the Blackwell sisters were healthcare pioneers. They helped change for the better the practice of medicine in the nineteenth century. Many of the insights of the Blackwell sisters are just as relevant today as they were in their time.

Robert Carle

The King’s College

New York, New York

To the Editor:

Allow me to compliment you on the most recent issue of *Academic Questions* (Winter 2021), and particularly on the poetry section. The grouping of work by Walt Whitman, Wilfred Owen, and the contemporary poet and scholar Catharine Brosman on war was most effective. I was especially struck by Professor Brosman’s artistic treatment of the events of 1914. Its mood, it seems to me, is darker than Whitman’s work and the contemplation of the larger purpose, if any, served by war is more similar to Owen’s. Still, while Owen’s message may be one simply of despair, Brosman’s work, while deeply critical of the statesmen of 1914, still retains a capacity for moral judgment and an ability to make distinctions among the belligerents that Owen’s work disdains. In that sense her poem seems even deeper than either of the two poems with which it is grouped. One can see why Professor Brosman (a former colleague of mine)

had the honor of appearing with two of the twentieth century's most celebrated poets in the English language.

David Clinton
Professor of Political Science
Baylor University
Waco, Texas