

Book Reviews

JOHN PEEL, *William Blair-Bell—father and founder*, London, Royal College of Obstetricians and Gynaecologists, 1986, 8vo, pp. iii, 89, illus., £6.00 + £1 postage.

It has been said that Blair-Bell (1871-1936) was the greatest gynaecologist of this century: that he laid the foundations of modern gynaecology, raising it from a branch of general surgery to a separate and important new discipline. His admirers stress his flair for research, his skill as a teacher as well as a surgeon, and his administrative ability. Most of all, they remind us that he was mainly responsible for the foundation of the College of Obstetricians and Gynaecologists in 1929. None who knew Blair-Bell denied that he could be difficult, but many said his achievements outweighed his failings. To Lord Dawson, he was "A loveable torchbearer who never forgot—or allowed anyone else to forget—that he was bearing the torch."

The son of a general practitioner, Blair-Bell showed a flair for research and writing scientific papers while still a medical student. His career began in general practice in Wallasey, and he was appointed Assistant Consulting Gynaecologist to the Liverpool Infirmary in 1905 at the age of thirty-four, when he began a lifetime of quarrelling with anyone who dared to disagree with him. He was banned from the University Department of Obstetrics and Gynaecology in Liverpool until he was himself appointed to the Chair in 1921. Turning up at the department a day early, he was greeted by the still incumbent Professor Briggs: "Bell, you are an abortion, you are here before your time." Blair-Bell's greatest talent was triumphing over his enemies.

His early researches were concerned with gynaecological endocrinology, but in 1921 he began his controversial work on the use of lead in the treatment of uterine cancer. His biographer credits him with the introduction of the concept of chemotherapy for cancer; but the best that can be said of this research is that a less opinionated man would have abandoned the treatment long before Blair-Bell did. There was an incident in 1926 which seems to typify Blair-Bell's character. A new maternity hospital had just been completed in Liverpool in which the delivery and first-stage rooms, and indeed much of the rest of the hospital, was designed by Blair-Bell himself. When it was finished, it was found that the ground floor was several feet above street level and the entrance was up seven or eight steps. Blair-Bell instantly said this was unsuitable for pregnant women and that he would never set foot in the hospital. He never did, but he succeeded in raising money from a shipping family to build a new gynaecological suite in the Royal Infirmary which no one else was allowed to use. On the tiles of the operating theatre walls there were philosophical exhortations from Greek philosophers.

With the establishment of the College of Obstetricians and Gynaecologists, Blair-Bell, one feels, was in his element, fighting the Royal Colleges of Physicians and Surgeons, whose opposition was both formidable and outrageous. They opposed not only the formation of a separate college, but also, when they lost that battle, the College's right to establish separate examinations and qualifications in obstetrics and gynaecology. It was a remarkable repetition of the shabby behaviour of the Royal Colleges in the first half of the nineteenth century when they opposed the rise of the general practitioner. As a provincial man who distrusted and despised the London medical establishment, Blair-Bell found all his prejudices justified. But in the end he succeeded in his primary aim, that of creating a core of specialist gynaecologists (and, incidentally, of keeping out the general practitioners with an interest in both subjects) who held the Membership or Fellowship of his College.

Blair-Bell quarrelled with those of his supporters who tried to improve relationships between all three medical colleges. He regarded them as half-hearted, and his inability to delegate led to the Treasurer writing a letter of resignation in which he accused Blair-Bell of having "an eerie facility for writing letters which are apt to give offence, you believe what you say and do must be right, and that anyone who differs from you must be wrong . . . it is impossible for you and I, because of these failings, both to serve with credit for the benefit of the College on the Executive Committee. Without realising it you wish to be Treasurer, and perhaps Secretary as well as President." There could scarcely be a more damning letter.

Some have said that a less aggressive and tenacious man would have failed. It is a common mistake to confuse aggression with strength, and it remains an open question whether another man whose strength was combined with a reasonable approach to his colleagues and a less over-bearing temperament would not have been just as successful. Blair-Bell became the first President of what

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he regarded as his College, and took great delight in the ceremonial aspects of the presidency. He designed the coat of arms, and the President's gown in which his portrait was painted by J. B. Souter in 1932. There, robed and stern, he stares down, daring anyone to cross swords with him. When his term as President came to an end he refused to hand over the gown to his successor. He kept it and was buried with it, if not in it.

In 1934, after Blair-Bell had relinquished all official connexions with the College, he wrote its history, and attached to it some extraordinary instructions: that it should be published "not sooner than fifteen years after my death and not until after the death of the last surviving member of the Finance and Executive Committee". The history opens with: "The soul's awakening is not a sudden blinding revelation of a ray of sunshine bursting through the clouds, it is the slowly reached realisation of the truth: it is the harvest that follows the sowing of the seed." The conditions imposed were unnecessary; the "history" is unpublishable. Sir John Peel, leaning over to be fair, admits it is "rather tedious reading, and would never have been regarded by Blair-Bell himself as in a suitable condition for publication."

Here, then, was a man who achieved much through energy, and monstrously tenacious ambition; a man who was regarded by his junior staff not with affection but respect mixed with awe and fear. Those who found him likeable seem to have been colleagues who toed the line or those too senior to be quarrelled with. He found his friends amongst the members of the gynaecological visiting society that he created. His home life was, to say the least, mysterious. He married his cousin Florence in 1898. There were no children and for the next thirty years until her death in 1929, "she remained a shadowy figure". None of the Blair-Bell's colleagues ever met her, not even those who worked most closely with him. There were rumours that she occupied a separate part of the house, that she suffered from mental illness. Certainly, in her final illness she was nursed in part of the house which had no connexion with the part occupied by Blair-Bell. After her death, as if in expiation, Blair-Bell endowed a lectureship in her name, named a house after her which he presented to the College of Obstetricians and Gynaecologists, and arranged for her portrait to be hung in the house. The portrait was painted posthumously from an old photograph.

A biography of the founder of an institution, published by that institution, and written by a former President could easily have been a standard exercise in hagiography. Sir John Peel is to be congratulated for producing a full and balanced account of this disturbingly complex, odd, difficult, and successful gynaecologist.

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PIERRE GUILLAUME, *Du désespoir au salut: les tuberculeux aux 19e et 20e siècles*, Paris, Aubier, 1986, 8vo, pp. 376, Fr. 175.00 (paperback).

Pulmonary tuberculosis has a long history, but has been little considered by modern historians. Pierre Guillaume's elegantly written, highly readable and perceptive study makes a welcome addition to this sparse literature. In recent years, medical history has turned increasingly towards the patient, yet (as Irvine Loudon has remarked) insights into the experience of illness in the past are rare. Guillaume gives us just this for tuberculosis. Contrary to popular modern myth, tuberculosis was not a gentle or romantic killer: it was terrible, and it was feared and concealed. The agonies of the poor were hidden in hospitals like the Paris Hôtel-Dieu, of whose records Guillaume makes dramatic use, while contemporary convention demanded that the educated and wealthy continued to participate fully in life, despite advanced illness. Guillaume reveals all the desperation and the terror of the tuberculosis victim, the full horror of night sweats and insomnia, the constant fear of haemoptysis, the pitiable and sordid decline of the body towards dissolution. This evocation of the mental and physical state of tuberculosis is a major achievement of creative writing, and a triumph over the bare clinical descriptions with which previous writers have been content.