Taking down statues: reconsidering the legacy of James Marion Sims, "father of gynaecology"

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ABSTRACT

In 2018, demands to remove a statue of James Marion Sims - the inventor of the vaginal speculum and a number of revolutionary surgical techniques - continue a recent trend that has seen a re-evaluation of the legacy of the man known as the "father of gynecology" as well as other historical figures. His innovations, which revolutionized women's surgical care, came as the result of horrific experimentation on slave women. Despite the availability of anaesthetic agents, he used none during his experiments. One of his subjects was operated on thirty times. Beginning in the late 20th century, revisionist historians started to draw attention to his unethical and inhumane experiments and have begun to view him not as a medical pioneer but as an oppressor. However, in textbooks as well as in the academic literature, the medical community continues to hold a predominantly positive and uncritical view of Sims and his experiments. In this paper, a brief history of Sims' surgical experiments and contributions to gynecology is described. His surgical legacy is discussed, and contemporaneous and modern reactions to his experiments are compared. Finally, a brief discussion of the relevance of historical mistreatment on the healthcare of vulnerable populations is provided.

INTRODUCTION

On April 17, 2018, the statue of James Marion Sims (1813 - 1883) was removed from New York City's Central Park, where it had stood for over 120 years.1 This event follows a recent trend in the United States and Canada that has seen the re-evaluation of the legacies of many controversial historical figures. Practicing in the southern United States during the mid-19th century, Sims initially gained fame as a surgical innovator and was applauded by his contemporaries as a forward-thinking inventor. Now considered the "father of gynaecology," Sims is perhaps best known for his invention of the vaginal speculum - an instrument still in use today - as well as a revolutionary procedure to repair vesicovaginal fistulas.² These and other advancements quickly led to Sims' recognition as one of the foremost figures in the field of gynaecology. However, they also came at the horrifying expense of dozens of slave women, on whom Sims experimented with neither consent or the use of anaesthetic agents, which at the time had recently come into use.

Sims' legacy has a long and complicated history. Some of his contemporaries criticized his experiments, but it was not until the second half of the 20th century that revisionist historians began to draw serious attention to his unethical and inhumane experiments.^{2,3}

Many have begun to view him not as a medical pioneer but as an oppressor and this view has made its way into the public mind. The decision to remove his statue was hailed by supporters as long-overdue reconciliation, but it was also criticized by detractors as yet another example of encroachment by left-wing identity politics.¹ While such debates rage in popular media and academic literature, his legacy as the "father of gynaecology" continues to sit comfortably in surgical textbooks and in the collective mind of the medical community.⁴ This refusal to re-examine a difficult and contentious period in medical history has the potential to distance the profession from those it aims to serve.

JAMES MARION SIMS

Sims was born in 1813 in Lancaster County, South Carolina, where his father was a storeowner and later sheriff. He graduated from Jefferson Medical School in Philadelphia in 1835 and began a small practice in his hometown.² Sims initially gained little recognition as a surgeon and it was not until 1840, after moving to Montgomery, Alabama, that he began to be recognized as a skilled surgeon and inventor.² It was there that he first developed his interest in gynaecology, a field that was still in its infancy, after inventing a rudimentary vaginal speculum to facilitate the examination of a patient who was suffering from a prolapsed uterus. This invention allowed him to begin work on a method to surgically repair vesicovaginal fistulas, a devastating condition that typically occurs following prolonged obstructed labour and results in the creation of a passage from the urethra to the vagina. The result is a constant leaking of urine from the vagina, and patients experienced lifelong debilitation. There was no known cure for the condition.

His first patient with this condition was a black slave woman named Anarcha, a 17-year-old girl who was brought to Sims by her slave-owner. Anarcha, along with two other afflicted slave women named Betsy and Lucy, became just three of the women upon whom Sims experimented in his search for a method of treating their condition. They were not given a choice in these experiments as their status as slaves precluded consent.³ The experiments themselves were gruesome: Anarcha was operated upon a total of thirty times before Sims was able to close the fistula. The operations were done without anaesthesia - which had recently been discovered – and required the help of assistants who held the women down on the operating table. After 7 years of horror for these women, Sims finally found a method that worked, using silver suture wire to prevent the infection and tissue breakdown that had caused his previous attempts to fail. He published his results in 1852 to near-universal acclaim.2,3

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REACTION FROM MEDICAL COMMUNITY

Criticism of Sims' experimental methods began within his lifetime.² In fact, many prominent physicians had serious doubts about the ethics of his experiments and his claims that the experiments were performed on consenting subjects were met with incredulity.² James Simpson, the surgeon best known as being the first to use chloroform as an anaesthetic agent for surgery, snidely remarked that he experimented on pigs rather than humans, and even they were given chloroform.² Murmurs of ethical misconduct followed him after his move to New York. While there, he continued to practice his techniques on marginalized patients, now poor Irish immigrants, at his newly-founded hospital for women.² Despite this early criticism, Sims' paper was overall well-received by the medical community and it launched him to international fame. Famously, his career reached such heights that even the Empress Maria of France became one of his patients. Following his death in 1883, Sims continued to be hailed as an innovative and enlightened surgeon. This began to change during the latter half of the 20th century as academic discussion began to occur regarding his legacy.⁴

However, Sims' legacy remains relatively untarnished within the modern medical community.4 Textbooks almost uniformly portray him as a skilled and revolutionary surgeon and Sims' own perception of his achievements has largely been embraced by the rest of the profession.⁴ Southern physicians frequently publish glowing biographies and reviews of his career and push back against attempts to frame his discoveries in the context of the oppression of slave women in the American South.^{5,6} Sims' insistence that he only performed the experiments out of concern for the women's wellbeing is accepted whole-heartedly by these supporters. Statements such as, "I thought only of relieving the loveliest of God's creation of one of the most loathsome maladies that can possibly befall poor human nature," are accepted as evidence of his benevolence.^{5,7} Arguments that his experiments were unethical are met with resistance. One paper written in defense of Sims states that his decision not to use anaesthesia was simply, "an unfortunate error in clinical judgement."5

It is true that Sims was, in the end, able to cure women of a truly debilitating condition, but it is unlikely that his experiments would ever have occurred had Sims not had access to enslaved patients – his first white patients were unable to tolerate the procedure without anaesthesia.² While it is often remarked that he was a product of a time in which racism and slavery were commonplace, this argument ignores the fact that Sims not only owned slaves but exploited their status in order to obtain experimental subjects without the need for consent.

MEDICAL EXPERIMENTATION IN CANADA

In Canada, we have our own dark history of medical experimentation. Dr Frederick Tisdall, the pediatrician who became famous for inventing the pioneering infant formula Pablum, made his breakthrough while performing nutritional experiments on intentionally malnourished Indigenous children at residential schools in the 1960s. The children were fed a meagre diet that lacked the necessary calories and nutrients required for health. They were then fed various formulations until the researchers

developed a blend that worked best. Fortunately, Tisdall's legacy has not seen the same insistent defense as Sims' has. Physicians and journalists alike have begun to denounce Tisdall following the recent publication of a damning report of his experiments.8 As of July 2018, the website for The Hospital for Sick Children has replaced their glowing biography of Tisdall with a short statement about their concern regarding his experiments and intention to perform a more thorough investigation. Such reconciliation with our unsavory past is vital, both for society and for the medical profession, but it is also just a start.9 Underprivileged populations make up a significant proportion of those accessing healthcare and bear a larger burden of chronic illness and mental health issues.¹⁰ As with the African-American population in the United States, the Indigenous population in Canada has historically been - and in many ways continues to be - underserved by the healthcare system.^{8, 10-12} By refusing to acknowledge past harms, the medical establishment continues to neglect its responsibility to these populations.9 The arguments currently occurring in the United States regarding how best to handle controversial historical figures are thus very relevant to Canada and our own history of injustice towards vulnerable populations.

CONCLUSION

The medical profession has a unique duty to its patients to remember the mistakes of the past and to prevent them from being repeated. The removal of Sims' statue does not erase history. Instead, it represents society's growing reluctance to unquestioningly celebrate a man who performed experiments on enslaved women, regardless of their legality or acceptance at the time. It is without question that Sims made great strides in the advancement of gynecological surgery, and his discoveries have improved the lives of countless women. The techniques and devices he invented should continue to be used if they remain the best tools available. But the means through which he accomplished his advances should be remembered and explicitly denounced, and any celebration of his accomplishments should be nuanced and forthcoming about the horrors inflicted in the name of those advancements.

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