Men and Women in Medicine

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Sister Elinor Gardner, O.P. (2017) opens her article, “The Woman Physician as Antidote to the Ills of Modern Medicine,” with the question, “Is medicine a feminine profession, or is there a feminine way of practicing medicine, distinct from a corresponding masculine way?”

She then quickly and effectively dismisses the contemporary notion that it is “sexist to isolate masculine and feminine aspects of a profession.” She goes on to demonstrate that there is much of distinctive value that women, by virtue of their maternal nature, can bring to the profession of medicine and to many other professions.

She points out that modern medicine, like the modern age in general, “has allowed man’s drive for knowledge and dominion to develop without check, so that mankind might become ‘the lords and masters of nature,’ as Descartes put it, and most especially the lords and masters of the human body itself. The original vocation of medicine, however, is not so much to become the lord of nature as nature’s minister. The physician is more handmaid than master” (Gardner 2018, 400). Well put, indeed!

My only cavil with Sister Elinor is that she seems to contrast femininity not with masculinity but with modernism. Men also can bring the gifts of compassion and personal attention to the bedside, and I have seen many do it. Some women physicians, on the other hand, are not immune to the mechanistic approach to patient care.

My father and teacher in medicine, Dr. Gregory White, used to say that all women are called to be mothers and all men are called to be fathers. This is not to reject the vocation of celibacy, least of all

the beautiful vocation of consecrated life, but to affirm the essential maternal nature of women and the paternal nature of men. Sister Elinor points out that medicine, to be true to its vocation, must obey nature, not dominate it. This approach, urged upon us by the late Dr. Herbert Ratner, longtime leader of the Catholic Medical Association, is applicable to all physicians, male and female. (It also helps to be obedient to the Church, whose teachings can guard us in many ways from harming our patients.)

I have recently retired from forty-three years of family medical practice. Hundreds of families have humbled and honored me by choosing me to care for them and to attend more than two thousand births. In trying to be a servant of nature rather than its master, and by loving and praying for my patients (the rosary can be a great antidote to the temptation to intervene unnecessarily in a slow labor), I have been able to form deep personal bonds with many patients over the years. I have lacked many maternal qualities, but perhaps not all the paternal ones.

To answer Sister Elinor’s double-barreled opening question, (1) it can be, and (2) yes; and each has its strengths and weaknesses.

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Reference

- Gardner, Elinor. 2017. “The Woman Physician as Antidote to the Ills of Modern Medicine.” *Linacre Quarterly* 84, no. 4 (November): 393–402.