

National Physicians' Day and "The celebrated abortion trial of Dr Emily Stowe"

National Physicians' Day is recognized annually on the birthday of Dr Emily Jennings (Stowe). Born 1 May 1831, Dr Stowe was a trailblazer—the first woman in Canada to openly establish a medical practice and a founding member of the Canadian Women's Suffrage Association.

Denied entry to medical school in Canada—like all women of her time—she refused to accept the limitations imposed upon her. Instead, she pursued her studies abroad, earning a degree in homeopathic medicine from the New York Medical College for Women in 1867, at the age of 36.

Upon returning to Canada, Dr Stowe established a medical practice in Toronto, despite lacking a formal licence. She quickly gained a strong base, particularly among female patients. However, in 1869, new laws granted the College of Physicians and Surgeons of Ontario exclusive authority to license doctors, requiring applicants to have attended at least one session at an Ontario medical school.¹ Repeatedly denied Canadian medical college registration because of her gender, Dr Stowe was undeterred and continued her practice.

In 1870, she and Jennie Kidd Trout were finally permitted to attend lectures at the Toronto School of Medicine, though their experience was fraught with hostility. Subjected to harassment and humiliation from the male-dominated student body, Dr Stowe ultimately did not complete the oral and written licensure exams required by the college, reportedly unwilling to place her fate in the hands of a prejudiced panel.^{1,2}

Dr Stowe's challenges did not end there. In 1879, she became the target of a criminal charge—attempting to procure an

abortion. "The celebrated abortion trial of Dr. Emily Stowe, Toronto, 1879*" (1991) explores the nuances and complexities of her well-publicized prosecution. The case involved a 19-year-old unmarried domestic servant who had sought Dr Stowe's care in May 1879. Three months later, the young

**As we observe National
Physicians' Day this
year and celebrate 125
years of determination,
I reflect on all of you—
my colleagues.**

woman was found dead. The article's author speculated on Dr Stowe's internal conflict, noting that, while she was a feminist, her stance on abortion remained unclear. Rather than turning the patient away or alerting authorities, she prescribed a mixture of hellebore, cantharides, and myrrh—intended, as she later testified, as a placebo to prevent the young woman from seeking more dangerous alternatives. Expert witness testimony affirmed that the prescription could not have harmed the patient or her fetus.

Despite this, the trial subjected Dr Stowe to intense misogyny. Additionally, the coroner admitted to being intoxicated during the inquest, and he later misplaced all the physical evidence, including the prescription itself. In the end, Dr Stowe was acquitted. Just months later, in 1880, she was granted a medical licence in Ontario—some speculate due to the skill she demonstrated at her trial and support from expert witnesses.² Her eldest daughter, Augusta Stowe-Gullen, carried on her legacy,

becoming the first white woman to graduate from a Canadian medical college, in 1883.

Though we cannot ask Dr Stowe what fueled her resolve and determination, one might speculate that medicine was her true calling. She left behind a stable teaching career to enter a profession that, at the time, offered neither financial security nor social acceptance for women. She endured public scrutiny and sacrificed time with her children, all in pursuit of her passion. Dr Stowe passed away in 1903, but her perseverance laid the foundation for future generations of women in medicine.³

This year, Doctors of BC celebrates 125 years of advocating for and supporting BC doctors to influence the health care system and create positive change for their patients. Looking back also includes acknowledging historical injustices and reaffirming a commitment to learn from the people and actions of the past to shape the future.

As we observe National Physicians' Day this year and celebrate 125 years of determination, I reflect on all of you—my colleagues—and the sacrifices you have made to serve your patients. Your dedication may sometimes go unrecognized, but it is deeply valued. ■

—Caitlin Dunne, MD

References

1. Backhouse CB. The celebrated abortion trial of Dr. Emily Stowe, Toronto, 1879*. CBMH IBCHM 1991; 8:159-187. <https://doi.org/10.3138/cbmh.8.2.159>.
2. Feldberg G. "Jennings, Emily Howard (Stowe)." Dictionary of Canadian biography. Vol 13. Toronto/Laval: University of Toronto/Université Laval, 2003. Accessed 9 March 2025. www.biographi.ca/en/bio/jennings_emily_howard_13E.html.
3. Canadian Medicinal Hall of Fame. Emily Stowe, MD. Accessed 9 March 2025. www.cdnmedhall.ca/laureates/emilystowe.

An epic voyage

It was on an epic CME Paul Gauguin cruise through the Cook Islands in 2014 where I first came across a very interesting posse of people—a cluster of the *BCMJ*-ers. A few years later, I happily joined the diverse and incredibly wise *BCMJ* Editorial Board. Now, after almost a decade of memories, learnings, and camaraderie, and being one of the senior members of the group, I have decided to retire from the Editorial Board, and I've been reflecting on the positive impact that being involved with the *BCMJ* has had on my role as a family physician.

Being an Editorial Board member allowed me to help spread the knowledge that comes to us in many forms: clinical articles, letters, blog posts, student-written articles, essays, artwork, news, obituaries, advertisements, the occasional haiku, and some very interesting rants. As physicians, we are scholars and lifelong learners, and we use this knowledge to educate our patients.

It also made me a better communicator. I recently attended a celebration of life for one of my cherished patients, and I learned more about her in that 1 hour than I had in the 12 years I had known her. I was shocked by this revelation, but then I felt inspired to do better. I now end most of my patient interactions by asking my patients to share an anecdote about themselves. This type of information gathering deepens my relationships with my patients and plays an important role in providing effective and informed health care decisions in the future.

It gave me the opportunity to take in more stimulating reads and explore my creative writing skills. Unfortunately, a lot of my work as a family physician is spent writing sick notes, filling out disability forms, and reviewing endless reports. This time *should* be spent caring for, diagnosing, and treating patients. As a side note, it appears we are finally seeing the end of routine sick notes. We need to continue to advocate for

eliminating the endless administrative burden that is placed on primary care providers, as this is a possible deterrent in recruiting new family physicians.

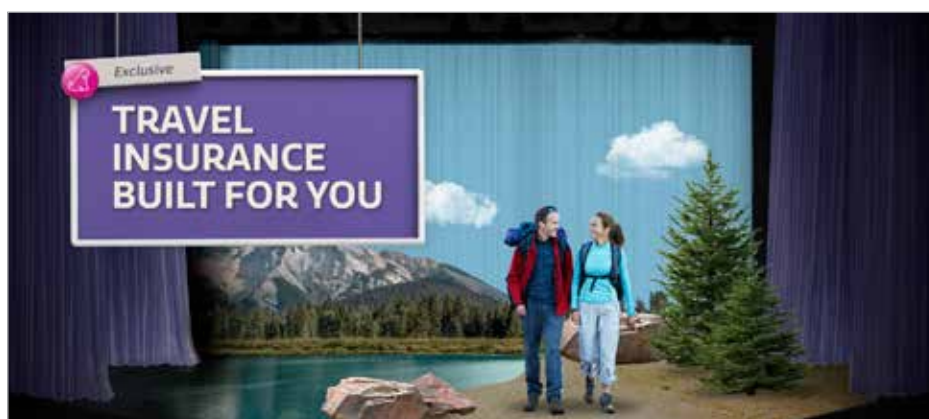
The camaraderie of the *BCMJ* group has encouraged my collaboration with health professionals in my community.

The camaraderie of the *BCMJ* group has also encouraged my collaboration with health professionals in my community. As a solo family physician, I had inadvertently isolated myself from my colleagues. Now I am a regular attendee at many of the events organized by our department of family practice, our division of family practice, and our

medical staff association in Kamloops. I am excited to be engaging in an Indigenous cultural safety and humility day of learning with my peers. I am also going to be throwing stones in a doctors versus medical residents curling match in Kamloops, where the residents will be led by a Scotties Tournament of Hearts All-Star! I think focusing on team building and delivering effective team-based care is one of the solutions to our primary care crisis.

I feel honored and thankful to have had this epic experience, and I will maintain the many skills and tools I acquired to advocate for the future of primary care. I also look forward to picking up the monthly *BCMJ* and cruising through the uplifting and well-crafted articles and stories. ■

—Jeevyn K. Chahal, MD



With MEDOC® you can enjoy an unlimited number of trips¹ during the policy year, including coverage for COVID-19 related medical costs during your trip for up to \$10 million.

Contact Johnson today.

1.855.473.8029

Or visit Johnson.ca/MEDOC

JOHNSON 

Johnson Insurance is a tradename of Johnson Inc. ("JI"), a licensed insurance intermediary, and operates as Johnson Insurance Services in British Columbia and Johnson Inc. in Manitoba. MEDOC® is a Registered Trademark of JI. MEDOC® Travel Insurance is underwritten by Royal & Sun Alliance Insurance Company of Canada ("RSA") and administered by JI. Valid provincial or territorial health plan coverage required. Travel Assistance provided by Global Excel Management Inc. JI and RSA share common ownership. ¹Maximum duration of 17 or 35 consecutive days applies to each trip outside of Canada, depending on your plan selection.