## On becoming the first woman urologist in Canada

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I am a woman urologist. I won't deny that I say that with some pride. We are still a rare, if increasing, breed, particularly in North America and most especially in Canada. At the last count there were 11 in North America, 1 of these in Canada. The getting there for all of us wasn't always easy, and the position, once attained, isn't always readily accepted by others in the specialty. I have, in fact, even come to consider myself somewhat of a freak — the odd one out.

It all started out quite innocently. My medical school training took place at the University of Toronto from 1963 to 1969. In those days, "girls" were a minority in university, especially in the professional courses. After the first couple of years of training, the novelty had worn off as far as our classmates were concerned, and most of the time we were treated as just another one of the fellows. In fact, there were times when our male classmates stood up for us rather admirably, particularly in the clinical years. I can recall little, if any, overt harassment from our teachers and professors (99% of whom were men, of course). There was, however, an almost continuous undercurrent of male attitudes and mild prejudices, suggesting we were not accepting our destined role in life.

My interest in urology started, as I have said, quite innocently. Through a chance series of events, I was assigned to 2 weeks of urology training in fourth-year medical school — this was before clinical clerkships, thank goodness, because at that time I had a 2-year old son to look after — and I fell madly in love with the field.

It was exciting. Kidney transplants were going full steam ahead—like one of those television shows with people running, ambulances roaring around with screaming sirens and flashing lights, special airplane flights and big white boxes with dramatic lettering:

HUMAN KIDNEY FOR TRANSPLANT-ATION — HANDLE WITH CARE. And then there was the whole world of endoscopy — arcane, with never a ureteral orifice in sight and everything fuzzy pink. But surgeons were actually doing operations through that cystoscopy thing, so obviously it was possible to learn to see something. I was fascinated.

Before making a final decision on my career, I took the recommended course and used my first rotation as a junior intern (this was before straight internships) to learn more about this specialty, which had somehow managed to stay so well under cover in medical school. This was at the Toronto General Hospital. Everyone treated me well,



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from the orderlies to the staffmen. No special treatment or consideration was accorded to me because of my sex. In fact, the only recognition of the fact that I was a woman was that everyone was pleased that I took such an interest in their specialty. I was definitely hooked so I applied for acceptance to the postgraduate surgical training program in urology at the University of Toronto.

Interviews followed, and I was asked only two questions that my fellow male applicants weren't: Do you intend to get married? (I already was), and Do you intend to have children? (I already had). At no time was I given the impression that my sex might be detrimental to my acceptance.

After acceptance, I went through the usual urology training program: 1 year junior residency in urology, 1 year basic sciences (biochemistry and dialysis unit, in my case), 1 year general surgery and 2 years senior residency in urology, all in different hospitals in Toronto. It's a tough training program, and none of us worked less than one night in two, with a very heavy daytime workload as well. At no time during my training did I feel that I was being discriminated against because I was a woman. There were, however, some minor annoying problems — annoying because they were consistent and predictable, and minor because I do not think they were meant to be harassing or discriminatory. For instance, I was not allowed to be tired or short-tempered; that was always felt to be due to my hormonal state.

I must emphasize that at no time did this interfere with my actual training. My duties and responsibilities at all times paralleled those of my male colleagues. I can only state that my training and the whole-hearted support I received both from my superiors and those training with me were excellent and prepared me as fully as possible to become a practising urologist.

They also prepared me for some of the problems, again fairly minor, I was to encounter in my private practice. Being the only woman attending a conference no longer bothers me, even when someone invariably asks me what segment of the press I'm with, or whose secretary I am. I'm used to going to professionally-related social functions and being asked whose wife I am.

After all, these men (and women) have centuries of conditioning to contend with. They will inevitably have problems coping with situations outside their experience as I have had, and will probably continue to have as long as I am a freak. Did I say freak? Nonsense—just a wee bit different—maybe a wee bit of a pioneer.