



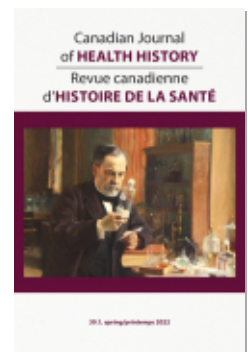
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Medical History Memorialized: The Origins and First Decade
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Medical History Memorialized: The Origins and First Decade of the *Canadian Bulletin of Medical History* / *Bulletin canadien d'histoire de la médecine* (1979–94)

J.T.H. Connor

Abstract. In 1979, the Canadian Society for the History of Medicine, founded in Quebec City, Canada, in 1950, inaugurated its first official organizational organ, *Newsletter/Nouvelles*, which ran for 10 issues in five annual volumes. In 1984, this modest means of institutional communication expanded to become the *Canadian Bulletin of the History of Medicine* / *Bulletin canadien d'histoire de la médecine*, a peer-reviewed journal that continues to the present. Central to the founding and operation of both publications was Kenneth B. Roberts of the Faculty of Medicine, Memorial University of Newfoundland. This discussion outlines the foundation, evolution, and activities of both these periodicals from 1979 to 1994. Their relationship to the growth of both the Canadian Society for the History of Medicine and the field of medical history in Canada are also delineated.

Keywords. *Newsletter/Nouvelles*; *Canadian Society of the History of Medicine*; *Canadian Bulletin of the History of Medicine* / *Bulletin canadien d'histoire de la médecine*; Kenneth B. Roberts; Memorial University of Newfoundland

Résumé. Fondée à Québec en 1950, la Société canadienne d'histoire de la médecine lance en 1979 sa première publication officielle (*Newsletter/Nouvelles*), qui paraît à dix reprises. En 1984, ce modeste moyen de communication institutionnelle a déjà pris une certaine envergure et devient le *Canadian Bulletin of the History of Medicine* / *Bulletin canadien d'histoire de la médecine*, revue à comité de lecture qui existe toujours. Kenneth B. Roberts, de la Faculté de médecine de la Memorial University of Newfoundland, a joué un rôle central dans l'histoire des deux publications, dont nous étudions ici la

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fondation et le fonctionnement de 1979 à 1994. Nous analysons également leur relation avec le développement de la Société canadienne d'histoire de la médecine et, plus généralement, celui du champ de l'histoire de la médecine au Canada.

Mots-clés. Newsletter/Nouvelles, Canadian Society of the History of Medicine, Canadian Bulletin of the History of Medicine / Bulletin canadien d'histoire de la médecine, Kenneth B. Roberts, Memorial University of Newfoundland

Historians are more adept at coming to terms with past events than forecasting future ones, but it is probably safe to predict that *CBMH/BCHM* will celebrate its 40th birthday in 2024 – even if under a new title and a new cover design, as this inaugural issue of the *Canadian Journal of Health History / Revue canadienne d'histoire de la santé* illustrates. Yet even such a straightforward, seemingly incontrovertible statement ought to be nuanced. The first issue of this journal did appear in 1984, but preceding that event was the publication process beginning in 1978–79 of 10 issues in five annual volumes of *Newsletter/Nouvelles: Canadian Society for the History of Medicine*. In their short introduction to the history of the Canadian Society of the History of Medicine / Société canadienne d'histoire de la médecine (CSHM/SCHM), Jackie Duffin and Paul Potter sketched out more about this title. Observing that *Newsletter/Nouvelles* was “meticulously produced” by Kenneth B. Roberts of Memorial University of Newfoundland (MUN), they described further how in addition to including typical Society news items the newsletter also carried illustrations, along with scholarly articles, thus hinting at its proto-journal status. Also under Roberts, they noted, the newsletter transformed into *CBMH/BCHM* in June 1984.¹

Such scant information is helpful but tantalizing, for it prompts many questions of historical interest. First, as I know from analyses of other Canadian societies, the establishment of a formal publication is a major milestone in the evolution of an academic field or scholarly discipline.² Moreover, maintaining even a newsletter, let alone a journal, is a labour-intensive task; it can also be expensive. So, given that the CSHM/SCHM was founded in Quebec in 1950, why did it take over a quarter century for it to undertake the production of any official house organ? Second, how did it come to pass that the island of Newfoundland at the far easternmost point in Canada – the newest province with the then newest and smallest medical school –

became the publication hub for the CSHM/SCHM? And a third related question: Who was Kenneth B. Roberts, and why did he develop into the pioneering driving force behind *Newsletter/Nouvelles* and *CBMH/BCHM*? Finally, did all this publishing activity aid, in the long run, in furthering the study of medical history in Canada, and if so, how?

Answering these fundamental questions ought to add greatly not only to our understanding of the development of the CSHM/SCHM, but also to the field of medical history at large. What follows is based on close reading of *Newsletter/Nouvelles* and also the first decade of issues of *CBMH/BCHM* as primary historical documents. Supplementing this is an analysis of specific archival documents: the correspondence of Kenneth Roberts himself, which have been preserved at MUN. Readers must be aware, however, that while I will deploy objectivity and probity in the ensuing discussion, I was/am a participant in the historical process. In many respects, what follows is my personal “take” on what I recall. The “authorial voice” will switch variously from that of a character involved in the plot to that of an interlocutor observing the action. As a result, text analyzed and events recounted are filtered through my personal experience and memory; in some respects, the following account is akin to a contribution to a volume in the historical Wellcome Witnesses to Twentieth Century Medicine series.

1978–79: Was There Something Special about This Year?

Yes, you bet! It was an exciting year with some really great stuff just accomplished, more in the immediate works, and yet more on the visible horizon. It was a year, Janus-like, that built on the past while clearly looking to the future. To my mind, the one event that crystallized all this was the first “Kingston Conference” held at Queen’s University in the fall of 1978; a sense of what this conference achieved is captured in its published proceedings.³ Discussion of the history of science and technology dominated, but medical history was also well represented, with conference organizers making clear that medicine was fully understood to be embraced under the larger rubric. Bruce Sinclair, then director of the Institute for History and Philosophy of Science and Technology in the University of Toronto, articulated what was tantamount to a mission statement that helped guide a generation of historians. First declaring that “our tasks at this conference are to identify the resources and problems of this challenging new field of study and to know ourselves as coworkers, that we may better understand the important work that lies ahead

of us,” Sinclair continued that the resultant historical writing would reflect the “richness and complexity” of Canada’s technical past.⁴

Representing the fledgling history of medicine community were Jacques Bernier (PhD Paris, and history professor, Université Laval), along with Toby Gelfand (PhD Johns Hopkins, and Hannah Professor, University of Ottawa), Charles Roland (MD Manitoba, and Hannah Professor, McMaster University), and G.R. Paterson (PhD Wisconsin, and first executive director, Hannah Institute, Toronto). Bernier presented on the medical history of 18th- and 19th-century Quebec with an emphasis on its problems and sources, while the others named participated in an extensive workshop session with Gelfand presenting the results of a survey he had conducted concerning the status of history of medicine at Canadian universities, and Roland discussed the range of research opportunities that could emanate from the bibliography of Canadian medical journals that he and Paul Potter (MD CM McGill, MA McMaster, DPhil Kiel, and Hannah Professor, Western) were preparing. Other workshop papers dealt with medical archival and museum research resources, often involving projects sponsored by the Hannah Institute.⁵

The overarching presence of the Hannah Institute at this conference, and the Institute’s subsequent indelible and overarching effects on the field for decades following, demand more detailed explanation. The Hannah Institute for the History of Medicine operated under the corporate auspices of Associated Medical Services (AMS), which had been established in 1937 by Jason A. Hannah (1899–1978), a Queen’s trained physician (MD ’28). Although a practising neuropathologist in Ontario, Hannah founded AMS to provide medical prepayment plans to subscribers in order to ensure that physicians during the Depression years could receive remuneration for services from patients who had signed up. AMS functioned successfully for over 30 years until the introduction of federally funded provincial health care plans in the late 1960s. During this time, the “not-for-profit” AMS amassed a “reserve fund” (i.e., surplus/profit) of over \$12 million, which the Ontario government ruled had to be given to it; or, alternatively, to retain this money, AMS could reorganize as a legally deemed registered charity. Hannah himself was still in total control of AMS and was resistant to change, and also was adversarial toward the company’s board; eventually, some closed-room boardroom shenanigans loosened Hannah’s grip on business affairs. Along the way, the idea to support medical history was floated by several people, and the Institute came to be in the early 1970s. (In the past, I have listened to many an older physician who

claimed it was “his idea,” but proving the exact paternity of the Hannah Institute, notwithstanding Hannah’s own daddy claims, is tangled – sort of like the conceit and plotline of *Mama Mia! The Movie*.)

In many respects, the Institute was uniquely Canadian, but it also emulated, in part, the far more impressive British Wellcome Institute for the History of Medicine. The comprehensive suite of Hannah programs that were developed *eventually* evolved into the envy of medical history scholars across North America, but the path trod was often counterproductive and rocky. The late Michael Bliss (1941–2017) did not mince his words about the Institute’s troubled origins, along with its early days during the formative years of the field of medical history. In this noted historian’s judgment, Jason Hannah was an “opinionated, egotistic, stubborn man . . . whose megalomania almost destroyed [AMS] during its transition to medical history. Hannah stumbled into medical history largely by accident as he was searching for a way of keeping AMS’s funds out of the hands of tax collectors. Then in a pathetic quest for immortality, he seized on the idea of building monuments to himself.” As to the Institute itself, Bliss heaped on more invective: “Partly reflecting its absent-minded, amateurish, and tax-driven entry into the field, the Hannah Institute has yet to come to grips with professional historians’ methods, needs, and aims. . . . The Hannah Institute has outlived Jason Hannah, endured its growing pains, and may do better in the future than it has with its past.”⁷⁶

Notwithstanding such early challenges, by around 1978 the Institute was under full sail, but it was still not plain sailing. All the Hannah Professorships had been filled, and they were now all quartered at Ontario’s five medical schools (in London, Toronto, Hamilton, Kingston, and Ottawa – although at this time they were not fully endowed chairs in perpetuity, so their academic appointments could be precarious, and were more or less at the pleasure of AMS/Hannah); also, the Hannah Professors had held their first collective meeting. Present were the aforementioned Potter, Roland, and Gelfand; also attending were Pauline Mazumdar (MB London, PhD Johns Hopkins, and Hannah Professor, Toronto) and Ruth Hodgkinson (PhD London, and Hannah Professor, Queen’s). Hodgkinson resigned, *perhaps* for health reasons, in 1978 after just under three years on the job. Succeeding her in 1979 was S.E.D. “Sam” Shortt. Shortt was eminently qualified for the position through both his family pedigree and his academic credentials. He was a descendant of Adam Shortt (1859–1931), a Queen’s graduate who became one of Canada’s foremost academics specializing in economic history; he

also was the driving force during the founding years of the country's national archives. Adam Shortt's wife, Elizabeth Smith Shortt (1859–1949), was one of the first cohort of women to graduate in medicine from Queen's in 1884; later she would become powerful in the National Council of Women. Sam Shortt's background in Canadian history (McGill, Carleton, and PhD Queen's) and medicine (MD Western) thus combined the careers of his forebears. His appointment as Hannah Professor, especially as the only pure Canadianist in the group, augured well for the future of the field, as he was eligible for admissions to the camps of both professional history and clinical practice; instead, this turned out to be his undoing.

After five years as a highly productive scholar and an encouraging graduate student mentor, Shortt learned that AMS funding for him would be cancelled. Officially, he “resigned” from his post, but in reality he was the victim of a unilateral and capricious bureaucratic decision that was as dastardly as it was short-sighted. Based on scuttlebutt at the time, the ostensible reason adduced for the decision was that he did not teach medical students about Hippocrates and ancient medicine – *dub!*, newsflash, he was hired as a Canadianist. Although Shortt would be able to continue his successful career at Queen's as a medical practitioner and health policy expert, the field of Canadian medical history lost its most valuable asset at the time. I believe, personally, this decision sent out a message that within the Hannah cultural milieu, medical historians of Canada need not apply. In part, the Queen's imbroglio (which attracted international attention) explains some of Bliss' bitter spleen venting; it also, perhaps more obvious in historical hindsight, set an agenda for the CSHM/SCHM and what would become *CBMH/BCHM* as its official journal: to try to ensure a conscious balance between Canadian and international medical history studies by Canadians, wherever they might be based. Certainly, as the record shows, the bulk of publications in *CBMH/BCHM* and other Canadian history journals, along with monographs, about the medical history of Canada would originate from established history departments across the country by mainstream scholars securely housed in them, the pioneering efforts of McMaster Hannah Professor Chuck Roland notwithstanding. This state of affairs absolutely applied to Canadian/“nationalist” historians of Quebec medicine, who successfully functioned completely outside the Hannah sphere of influence.

But my saga is getting ahead of itself. During the late 1970s, the Hannah Institute also released significant funding for numerous medical history infrastructure projects, which would later include financial support for *CBMH/BCHM*, as will be discussed. Soon

thereafter, graduate scholarships and fellowships, although tenable only under the supervision of a Hannah Professor, became available and were an essential booster for the careers of a subsequent generation of medical historians in Canada. (Full disclosure: I was one of these first successful recipients of Hannah funding as a graduate student.) But in the late 1990s, more closed-room boardroom shenanigans, grounded in board members' self-interest, saw the inauguration of the process of dismantling the Hannah Institute in favour of new medical education enthusiasms, leading to its ultimate effacement.

Yet at the time the Hannah Institute was first blooming, at the risk of sounding too corny, I can attest that there truly was an intellectual buzz in the air. At a highly personal level, it was during the years around 1978–79 that I underwent an academic retooling exercise with the ultimate aim of emerging as an historian of Canadian science and medicine – a decision that had a lot to do with the success and fervour of the Kingston Conferences, which I experienced in person over the years. But at that particular time, I engaged in an intensive regime of study at Western University in London, Ontario, broadly in the history of North American and European medicine and science (with several courses taught by the eminent F.L. “Larry” Holmes, who sojourned at Western for several years before returning to Yale), but including a specific course in the history of science, technology, and medicine (STM) in Canada. I had already earned a BSc degree a couple of years previously at the University of Guelph, which had embraced “elective” survey courses in both the history and the philosophy of science, along with another in the history of medicine. I had also cobbled together a bunch of courses in the history and philosophy of science at York University in Toronto. To be sure, the Canadian STM course at Western was not satisfactory (which had something to do with the idiosyncrasies of its instructor), but the very fact that for the first time students at a major university could be exposed to such a topic was wholly innovative and exciting. It opened up new vistas to those of us who were truly searching for historical opportunities. Several graduate degrees later (MA, MPhil, PhD) from both Western and the University of Waterloo under the collective tutelage of Paul Potter, Wendy Mitchinson (PhD, York, and history professor at the University of Waterloo), Heather MacDougall (PhD, Toronto, and also history professor at the University of Waterloo), Sam Shortt (who also held an adjunct appointment in Waterloo's history department), and Chuck Roland, I became what is now termed an “emerging scholar.”

A decade after taking that Canadian STM course, I ended up teaching it as a junior faculty member back at Western. For several years prior I had been historian/curator/archivist at a small medical museum attached to London's University Hospital, which was the basis for a special grant application to the AMS/Hannah Institute, now under new management, to fund me for five years as a "mini" Hannah Professor at Western, under the mentorship of Paul Potter. The Canadian course, one of several I taught, was far better than the one I had previously studied, which may have been connected to different teaching styles – but the real reason was that in the 10 years that had elapsed, there had been an efflorescence of reading resources in the history of Canadian science, medicine, and technology. A review of my course syllabus ably demonstrates that I and my students now benefited from pioneering monographs and other quality scholarship as appeared in numerous anthologies (of both reprinted and original material), such as S.E.D. Shortt, ed., *Medicine in Canadian Society: Historical Perspectives* (1981); Michael Bliss, *The Discovery of Insulin* (1982); Charles G. Roland, ed., *Health, Disease and Medicine: Essays in Canadian History* (1984); Suzanne Zeller, *Inventing Canada: Early Victorian Science and the Idea of a Transcontinental Nation* (1987); and Wendy Mitchinson and Janice Dickin McGinnis, eds., *Essays in the History of Canadian Medicine* (1988).

These works were just my assigned course texts. Others also appearing in this seminal period that further pointed to the increasingly accessible and sophisticated scholarship on Canadian subjects by Canadians based in institutions across the country included Geoffrey Bilson, *A Darkened House: Cholera in Nineteenth-Century Canada* (1980); Carlotta Hacker, *The Indomitable Lady Doctors* (1984); Angus McLaren and Arlene Tigar McLaren, *The Bedroom and the State: The Changing Perception and Politics of Contraception and Abortion in Canada, 1880–1980* (1986); C. David Naylor, *Private Practice, Public Payment: Canadian Medicine and the Politics of Health Insurance, 1911–1966* (1986); Shortt, *Victorian Lunacy: Richard M. Bucke and the Practice of Late Nineteenth-Century Psychiatry* (1986); Cheryl Krasnick Warsh, *Moments of Unreason: The Practice of Canadian Psychiatry and the Homewood Retreat, 1883–1923* (1986); and Jay Cassel, *The Secret Plague: Venereal Disease in Canada, 1838–1939* (1987). Although several of these projects were in the pipeline before the inaugural Kingston Conference, most of

their originators attended that meeting; certainly, their presence and/or participation validated such works in progress or prospect, or helped incubate and hatch wholly new publication projects. That mainstream Canadian publishing houses such as the University of Toronto Press, McGill-Queen's University Press, and McClelland & Stewart produced and marketed these and future volumes attests to the fact that this budding scholarly field now had legs and was economically viable from a marketing perspective. Similarly, in Quebec, medical history was building a head of steam with the publication of foundational studies such as Sylvio LeBlond, *Médecine et médecins d'autrefois: Pratiques traditionnelles et portraits québécois* (1986); Rénaud Lessard, *Se soigner au Canada aux XVIII^e et XVIII^e siècles* (1989); Jacques Bernier, *La médecine au Québec: Naissance et évolution d'une profession* (1989); and Denis Goulet and André Paradis, *Trois siècles d'histoire médicale au Québec: Chronologie des institutions pratiques (1693–1939)* (1992).

Moreover, the subject matter of all these books demonstrated that Canadian medical historians were clearly looking “beyond the great doctors” and engaging in robust social history that embraced a wide range of complicated, controversial, and consciously Canadian topics. Also noteworthy was that, collectively, these authors were based in institutions across the country – and in the cases of Warsh and Cassel, they represented an even newer generation of scholars, publishing the labours of their recently completed doctoral dissertations in Canada (both under Sam Shortt). Certainly, all these studies were testament to a professionalizing of the field, but they can also be more broadly contextualized because they helped us “to know ourselves” as Canadians, as called for in the famous Symons Report of 1975. Heady times indeed.

What happened at a national level regarding medical history events was reflected somewhat in microcosm in St John's, Newfoundland. With the creation of the Faculty of Medicine at MUN in the late 1960s, the country saw created its newest but smallest medical school. Yet even in the early 1970s, there was a medical history presence owing to the activities of Dr. David Parsons (1924–2016), who, although without formal historical training, was identified as a clinical assistant professor in this field (in effect a voluntary, status-only position). I presume that the form of medical history practised was “old school” of the “great doctors” approach, yet it likely conveyed a scholarly sense of professional historical propriety

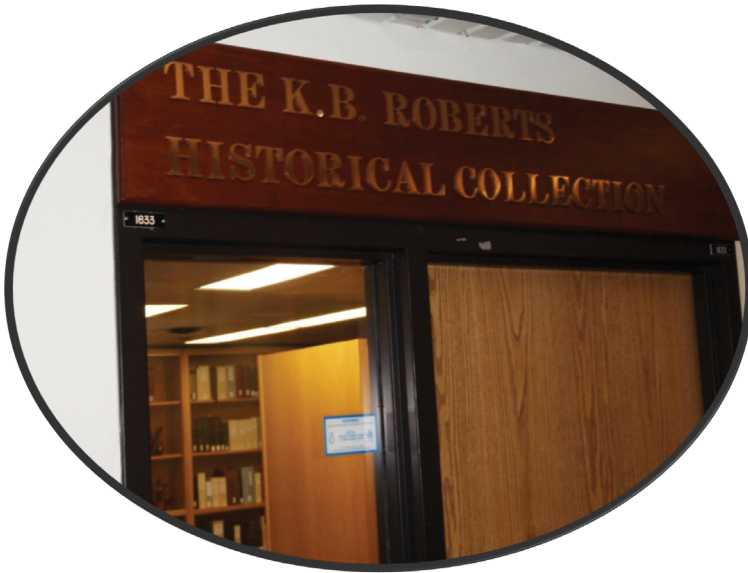


Figure 1: Entrance to the K.B. Roberts Historical Reading Room, Health Sciences Library, Memorial University. Roberts was the founding editor of both the CSHM/SCHM Newsletter and CBMH/BCHM.

(Photograph courtesy of the author)

within the medical school and its students that was not atypical of the era. In 1977, Parsons also helped found the St John's Medical History Society, a group of doctors who met informally at each others' homes, as was the case with similar amateur clubs scattered across the country at the time. In August of the following year, matters certainly solidified with the establishment in the faculty of what was then called the John Clinch Chair of the History of Medicine and Physiology. The inaugural holder was Dr. Kenneth B. Roberts (1923–2012), who had been the second in command of the medical school as associate dean since his appointment in 1967. Roberts was one of a cohort of British physician-researchers credentialed in medicine (King's College, London) and also held a DPhil (Oxford) in physiology under the supervision of Sir Howard Florey, co-discoverer of penicillin; he held the Clinch Chair position until his retirement in 1988. Roberts was a self-effacing, broadly educated, urbane scholar-gentleman. He was also an avid bibliophile who established and built the history of medicine book collection in the Health Sciences Library, a special collection and

reading room that it houses and is now eponymously named (see [Figure 1](#)).⁷ As vice-president (Atlantic) of the CSHM/SCHM, he was connected to the larger, rapidly developing field of history of medicine in Canada. It was because of his efforts, along with his newly allocated position at MUN, that the CSHM/SCHM ventured into publishing with *Newsletter/Nouvelles: Canadian Society for the History of Medicine*.

Reviving and Maintaining “la joyeuse petite flamme”: *Newsletter/Nouvelles: Canadian Society for the History of Medicine, 1979–83*

In the premier issue of *Newsletter/Nouvelles*, Mme. Yolande Bonenfant (1917–2008; a co-founder of the CSHM/SCHM and also its secretary-treasurer for many years) drew attention to various recent successful Society events. To her mind, the CSHM/SCHM was at a positive turning point signalled in great part by the appearance of *Newsletter/Nouvelles*: “C’est pour favoriser ce rapprochement que nous inaugurons ce bulletin. Puisse-t-il ranimer, puis entretenir la joyeuse petite flamme qu’avait allumée notre inoubliable Congrès du mois d’août 1976,”⁸ she enthusiastically wrote. With the appearance of the 10 issues of *Newsletter/Nouvelles*, Bonenfant’s hope was realized.

The format adopted for the publication was 8½” x 11” with each issue averaging about 30 pages (though they ranged from 22 to 42 pages). In many ways it resembled a magazine, with different sections, features, news items, advertisements, and announcements; it was also illustrated with graphics of medical historical interest, all selected by Roberts himself. Occasionally, Roberts also contributed “Editorials,” which were actually brief, focused essays on a particular historical medical personality or event; other “original articles” by Society members were also published. Abstracts of papers presented at the CSHM/SCHM annual meeting were a staple. Beginning in 1982 with the inclusion of a contents page, the *Newsletter/Nouvelles* started to assume a semi-formal role as a proto-journal. Each issue was bound by covers of slightly heavier stock, with the front cover always bearing an engraving of a medieval medical teaching scene with the words “Speculum Medicine.” As of 1981, the covers were coloured (see [Figure 2](#)). While thought went into its design, overall *Newsletter/Nouvelles* had an uneven appearance, which perhaps might be described, unfortunately, as at times a visual hodgepodge.

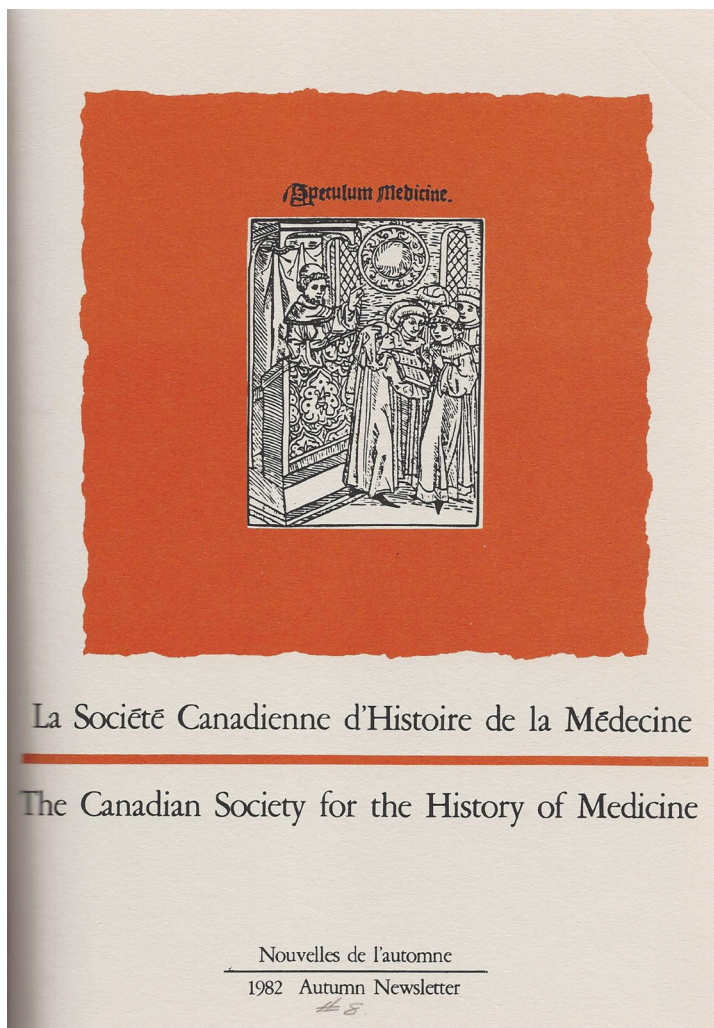


Figure 2: Front cover of *Newsletter/Nouvelles*, depicting a medieval medical teaching scene

(Photograph courtesy of the author)

But regardless of its looks, it served its intended purpose well: it acted as the merry little flame. News of the Society was regularly reported, as were developments in the field of medical history at large and the activities of sister organizations such as the American Association for the History of Medicine (founded in the mid 1920s)⁹ and other international societies, along with the increasingly active

Hannah Institute of the History of Medicine and its programs and personnel. That at this time G.R. “Pat” Paterson (1919–2005) was the executive director of the Hannah Institute and also president of the CSHM/SCHM ensured this last aspect. In fact, the pages of *Newsletter/Nouvelles* ably demonstrate how intertwined were the growth and development of the Society, medical history in Canada, and the Institute – for the most part a beneficial symbiotic relationship. Illustrative was an observation by Paterson in his 1983 presidential report, “Looking Around and Ahead,” that the membership now stood at well over 200, which was almost double the number from only two years earlier: “The Board of Directors at its February 12 meeting credited *Newsletter/Nouvelles* as the major cause of our incredible rate of growth,” he concluded.¹⁰ Amplifying these remarks, Mme. Bonenfant, treasurer and now also membership director for the CSHM/SCHM, reported that numerous libraries had requested subscriptions to *Newsletter/Nouvelles*, and also that as members now spanned every province in Canada as well as some locations in the US, the Society’s official organ had a broad and wide distribution.¹¹

The production, duplication, and distribution of *Newsletter/Nouvelles* all originated from MUN, with presumably some costs being absorbed by that institution, although Society dues and a small operating grant from the Hannah Institute no doubt offset most expenses. Overall, it was an anglophone publication, and nominally bilingual. As far as is known, Roberts was not fluent in French, but given his sound school education in England, he would have probably have had at least a good reading knowledge of it. Nevertheless, he had the collaborative support of several francophone editorial colleagues, for during the life of the newsletter, Roberts availed himself of the assistance of Jean Beaudoin, Sylvio LeBlond (1901–90), and Jacques Bernier, all of whom hailed from the CSHM/SCHM’s birthplace in Quebec City (the first two were physicians, while the third was a trained social historian).

Organ Transplant: *Canadian Bulletin of Medical History / Bulletin canadien d’histoire de la médecine, 1984–86*

Whatever its physical shortcomings, *Newsletter/Nouvelles* as a communication organ was successful. Some time in 1981, all members received a survey regarding their views about the newsletter, which elicited a response from 40% of them – a goodly

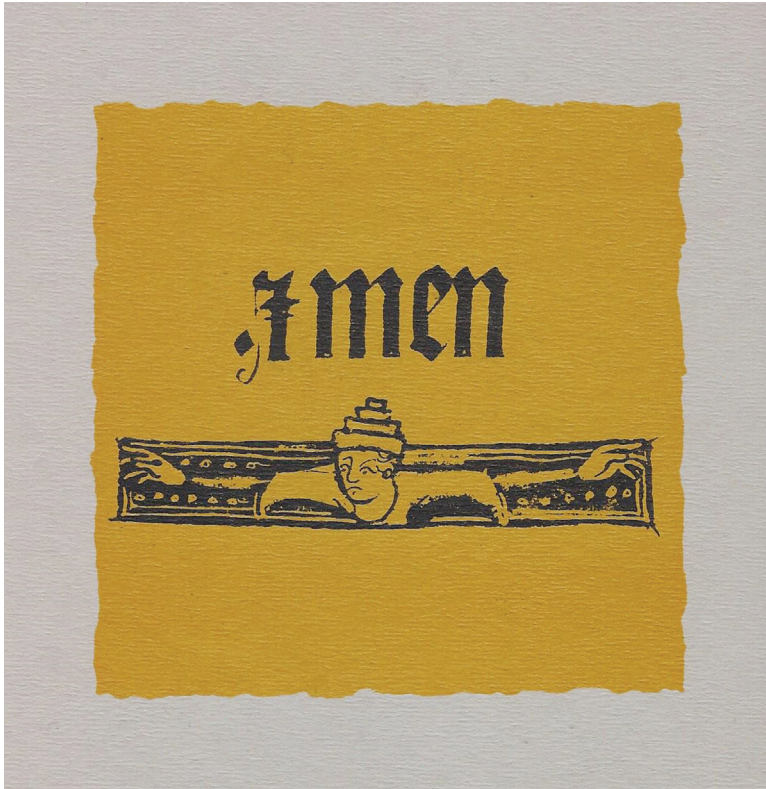


Figure 3: The medieval image selected by Ken Roberts for the back cover to signify the 10th and final issue of *Newsletter/Nouvelles* in 1983
(Photograph courtesy of the author)

number. The results and Roberts' analysis of these responses were not published in *Newsletter/Nouvelles*; rather, his report was distributed as a separate document. Regrettably, no copy of this document seems to have survived for subsequent historical examination. We know from Roberts, however, that "he, as Editor, will benefit greatly by the response which was, on the whole, positive but which included specific suggestions for improvement."¹² More helpful was a report delivered to the CSHM/SCHM executive at its 1983 mid-winter meeting.¹³ Noting that the earlier survey had definitively shown that *Newsletter/Nouvelles* was "generally appreciated," the report nonetheless concluded that its title was now inappropriate for what it had become. The time was now right, it stated further, for a "phased advance to: Bulletin canadien

d’histoire de la médecine/Canadian Bulletin of Medical History,” but this new publication would have to continue the mandate “to serve the interests of both professionals and amateurs in the history of medicine” while also encouraging the submission of refereed, original scholarly articles.¹⁴

It was clear that *Newsletter/Nouvelles* had outgrown its original modest mandate, and that a grander publishing game was afoot with respect to both format and content, suggesting that the audience/readership was similarly growing and becoming more historically inclined. In the “Announcements” section in the 10th (autumn 1983) newsletter, Roberts stated that this would be the last issue.¹⁵ Underscoring this decision was an example of Roberts’ wry humour, as he included an illustration on the issue’s back cover of a medieval character that might have adorned a church wall with the word “Amen” in Black Letter font above it (see [Figure 3](#)). But what was to replace the CSHM/SCHM newsletter? Roberts elaborated at the 1983 annual meeting in Vancouver that the plan was to put the Society’s publication “on a more formal basis” in the guise of the *Canadian Bulletin of Medical History*. Funds had been secured from the Hannah Institute to help defray production expenses; he would remain as editor, and the new journal would still emanate from Memorial University. Explaining the proposal further, while extending a plea to his audience, Roberts was clear that

a venture such as this is possible only when a large number of persons collaborate. Editorial consultants have been sought, a designer has already given advice, access to a (bilingual!) word processor has been granted [*sic*] . . . but none of this has point until we have interesting manuscripts for production. We are now asking you to consider writing for our new *Bulletin*. Pride of place will be given to scholarly papers, which will be passed to colleagues for peer-review in the usual manner. Such publications will be so identified in the *Bulletin*. But the less formal paper is also most welcome and, subject of course to editorial suggestions, will be published as they have been in *Newsletter/Nouvelles*. This will also be the case for Notes, Queries, and Announcements. The *Bulletin* will print illustrations related to medical history.

...

It is the aim of the Society to have a *Bulletin* that will be read profitably by the wide circle of persons in Canada and

elsewhere who share our interest in the history of the people's health.¹⁶

There was nothing controversial as such in Roberts' message, but his careful wording contained information that was of necessity coded. The membership of the CSHM/SCHM had grown, but not just numerically; it had also become a more diverse and heterogeneous group. It was now less of an association of *medical* historians than it was one of medical *historians*. Moreover, while Mme Bonenfant reported that "notre plus grande fierté, c'est de compter dans nos rangs . . . 27 femmes!"¹⁷ she and other long-standing members perhaps did not appreciate the full gendered implications of this statement. Many of the women who now joined the ranks of the CSHM/SCHM were among a cohort of young ambitious academics and graduate students who pursued medical history not only as a scholarly endeavour, but also as a means to challenge the profession of medicine as a bastion of male chauvinism and paternalism. In short, the CSHM/SCHM was evolving into a scholarly and more socially conscious critical group. The inclusion of the phrase "interest in the history of the people's health" as an element of the new journal's mandate underscores this point. This process had been underway for at least five years when in 1978 the Society consciously decided to meet annually in conjunction with the "Learned Societies" (the predecessor of what is now known as the Congress of Social Sciences and Humanities), thus aligning itself and defining a professional identity with other scholarly associations, rather than medical organizations, as it had done in the past. It would be inaccurate to say that due to such changes a schism developed in the CSHM/SCHM, but there arose a tension between so-called "antiquarians"/"amateurs" and "professionals." When Roberts thus introduced the *Bulletin* to members, he tried diligently to appease all as best he could. The new journal was to be a broad church that would embrace all the faithful: it would incorporate all the features of *Newsletter/Nouvelles*, such as "less formal" papers that typically might be written by members of the former group, while also publishing "scholarly" ones, presumably by members of the latter group, for whom "peer-review in the usual manner" was increasingly important.¹⁸ Volume 1, issue 1 of *CBMH/BCHM* arrived on schedule in summer 1984, and in form, format, and content heralded the arrival of a new journal in Canada. Physically,

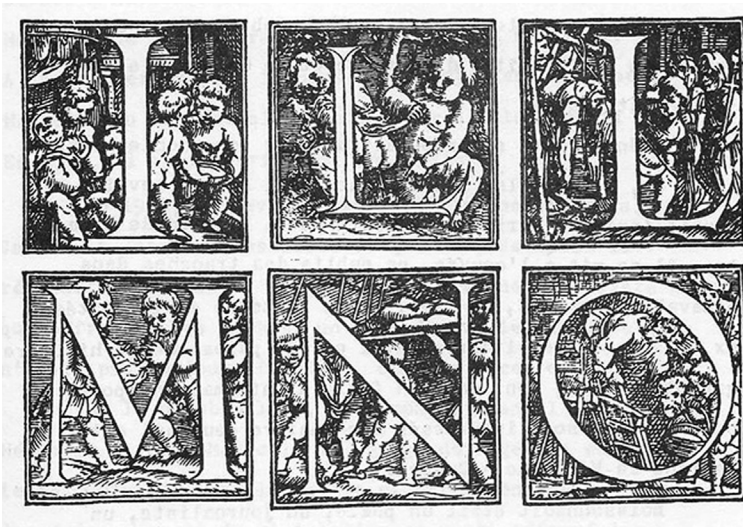


Figure 4: A detail of the ornamental lettering from Vesalius, *De fabrica* (1543) from a *Newsletter/Nouvelles* article by Brian Payton that was likely the inspiration for the design of what would become the front cover of *CBMH/BCHM*
(Photograph courtesy of the author)

its 6" x 9" size was now in line with that of most scholarly journals, which also meant it could literally take its place on a bookshelf beside the likes of more established North American sister periodicals such as the *Bulletin of the History of Medicine* and the *Journal of the History of Medicine and Allied Sciences*, along with British publications such as *Medical History*.

While one may not always be able to judge a publication by its cover, in the case of this journal the cover had a story to tell that related to its subject matter. Perhaps for some of its initial readers the front cover design, incorporating the large upper-case letters *H* and *M* one on top of the other in a Roman typeface, was puzzling (see [Figure 4](#)). On the one hand, a simplistic but reasonable explanation is that the initials stood for both *medical history* and *histoire de la médecine*, which appeared on the cover as the journal's title. On the other hand, I contend that a fuller explanation is more involved and more interesting. One part of the key was the contribution of the Newfoundland artistic designer Sylvia Bendzsa.

Bendzsa was in the early 1980s a MUN employee who worked as an artist in what was then known as Audio Visual Services

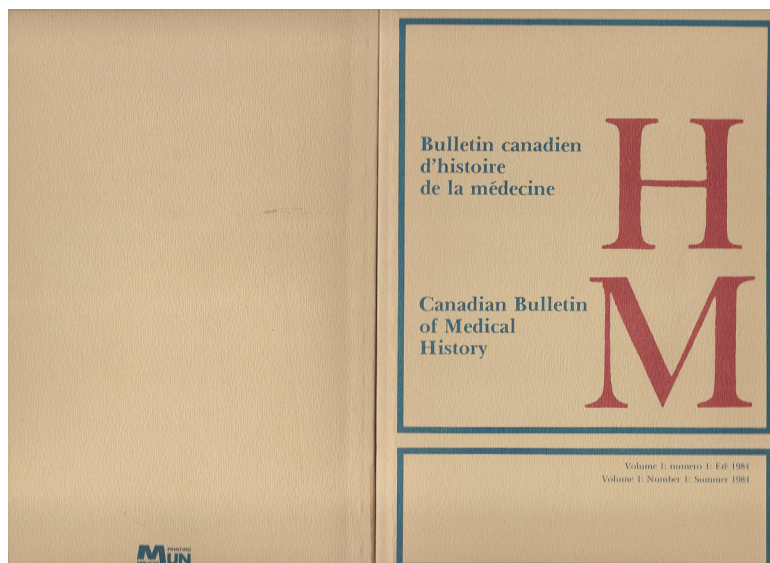


Figure 5: The front and back covers of the first issue of *CBMH/BCHM* (1984), with the new design (right) and (left) the logo of Memorial University's printing services, which produced the first volumes
(Photograph courtesy of the author)

in the Faculty of Medicine (MAVS); previously, she had assisted in the production of *Newsletter/Nouvelles*.¹⁹ Another part was an item published earlier in *Newsletter/Nouvelles* by Brian W. Payton (1930–2014). Payton was another of the cohort of British physician–researchers credentialed in medicine and also holding a PhD, both from the University of London, who helped found the MUN medical school in the early 1970s.²⁰ He was a physiologist, headed MAVS, had a keen sense of humour, was interested in print culture and arts as a first-class hobbyist bookbinder, and also was an avid “amateur” historian of medicine. In April 1980, he published “The Initials from ‘De humani corporis fabrica of Vesalius,’ 1543,” which recounted the use of decorative initial letters that began each chapter or section in the great Vesalian anatomical text. Such lettering was in a Roman upper-case typeface, and was also adorned by *putti* (cherubs) engaged in various medical or surgical procedures. Maybe mischievously, Payton wrote that “perhaps a return to this style of decoration in contemporary scientific texts might brighten the days of present day scholars.”²¹ It is wholly plausible to speculate that Bendzsa

adopted Payton's idea, but stripped it of the industrious *putti* to create the less cluttered motif that was used as the journal cover continuously until 1994. The shift to Roman typeface on the journal from the use of Black Letter on the cover of *Newsletter/Nouvelles* also recapitulated the deliberate transition made by printers of the early 16th century to designate intellectual progressiveness.²² As someone deeply immersed in early modern anatomical treatises and their production, Roberts, too, would have appreciated the artful and knowing internal reference that was signalled through this typography (see [Figure 5](#)).²³

Between the covers, there were other changes. Owing to the use of a stand-alone word processor – then state of the art – pages were now justified on the right-hand side. This technology, although cumbersome by today's technological standards, allowed for easier storage, retrieval, and correction of manuscripts; however, italic letters were still not used, so much of the text remained underlined, resulting in an often clumsy appearance. Reproduction was through MUN printing services, which helped offset expenses, but the new journal was still a considerable expense for the Society (one volume of two issues cost about \$4,000). The new periodical also occasioned organizational editorial changes. Roberts became editor-in-chief, but was assisted by an editorial board that spanned the country: Jacques Bernier (Quebec), Mme Yolande Bonenfant (Quebec), Gerry Hill (Edmonton), Othmar Keel (Montreal), Jane Lewis (St. John's), Wendy Mitchinson (Windsor), John Norris (Vancouver), Charles Roland (who was book review editor; Hamilton), and Barbara Tunis (Ottawa). In every issue he edited, Roberts proffered an invitation to submit manuscripts and other material in either French or English.

This invitational statement, curiously, became greatly expanded, refined, rigorous, and legalistic in 1986 under the rubric of "Information to Authors." The remit of *CBMH/BCHM* was now to welcome manuscripts on "all aspects of the history of medical science and medical practice, the history of the care of the sick and the history of the people's health." Explicit information was relayed about the six categories of item that the journal might publish, and how they would be assessed by members of the editorial board and/or "other knowledgeable persons" – that is, external reviewers whose identities would be kept confidential. Furthermore, the "decision to publish rests solely on the perceived merit of the contribution and its interest to readers. A decision to reject a manuscript is

communicated by the editor-in-chief.” There followed a lengthy passage about copyright – who owned it, who was protected by it – and a statement that authors had to abide by specified conditions. Authors were also now informed that manuscripts were limited to 25 typewritten pages that had to conform to a strict format. Leeway was allowed, however, in the style and note referencing. “Since it is the nature of history of medicine that it may be approached from many directions, manuscripts may be written in a style appropriate *either* to the biomedical sciences *or* to historical and social studies,” readers were told.²⁴

A few of the first issues to roll off the press had some teething problems. Initially, the spine of the journal had no information about the name of the publication, or the volume/issue number and year were omitted or incorrect; one essay published was actually an “inaccurate unproofed version,” prompting an editorial apology and the insertion of a revised offprint in a subsequent issue.²⁵ But these technical glitches disappeared into the background given the wealth of original material that dominated the pages of *CBMH/BCHM*. A new unexpected feature was the “Points de vue / Perspectives” section edited by Jane Lewis. Her name is one lost in the annals of the *CSHM/SCHM*, but in 1984 she was a British visiting scholar to MUN working with Kenneth Roberts; later she would have an illustrious career in health and social policy studies at the London School of Economics, and was elected as a fellow to both the British Academy and the Royal Society of Canada.²⁶ The “Points de vue / Perspectives” section was intended to “provide a forum for readers to express opinions on issues of current concern,” but such “informed commentary” might focus on the historical dimensions of the matter raised.²⁷ Not surprisingly, the first one was written by Lewis concerning the Medicare crisis and the then practice by many Canadian doctors of extra billing.²⁸

Nine other original articles and several book reviews rounded out the first issue, the majority of which were written by doctors. True to the journal’s broad mandate, works that represented the “new social history” also appeared, such as Thomas E. Brown’s study of the origins of the asylum in Upper Canada.²⁹ A hasty prosopographical analysis of the 40 or so authors who contributed to the three volumes that Roberts edited from 1984 to 1986 reveals, however, a trend of declining authorship by established doctors with a concomitant rise in the number of articles written by historical scholars at varying stages of their careers. Illustrative of the trend is the final issue

edited by Roberts, which contained a mixed bag of authors. The fall 1986 *CBMH/BCHM* included not only an essay by the doyen of the history of medicine in Quebec and one of the physician-founders of the CSHM/SCHM, Sylvio LeBlond, but also one by established British Columbia historian John F. Hutchinson. And there were also a contribution by the up-and-coming young professor Wendy Mitchinson; the first *CBMH/BCHM* contribution by an emerging scholar holding a Hannah post-doctoral fellowship at the University of Ottawa, J.M. “Jackie” Duffin; and with one (but not his first in this journal) by J.T.H. Connor, then a doctoral candidate working under Mitchinson. Indisputably, this nascent journal was not only an outlet for the founders of the discipline of medical history in Canada, but also a platform for its future leaders.

The journal’s discernible shift toward the social history of medicine based on the academic background of its authors, however, did not presage the end of the important role played by the Society’s and its journal’s medical founders. In the same year, 1986, Mme. Bonenfant reported how CSHM/SCHM membership was continuing to burgeon. In this year there were 331 members, split almost evenly in thirds across Quebec, Ontario, and the rest of Canada and internationally; many of these members were institutions/libraries, due in no small part to the creation and growth of the Society’s official journal. Yet just as revealing and important was the statistic that wholly two-thirds of the total membership were “disciples d’Esculape.”³⁰ So, doctors may not have written for the journal, but they did subscribe to it and were readers of it. The creation of *CBMH/BCHM* may have changed the field and game somewhat, but the loyal players remained. Of course, some members/readers/subscribers straddled both camps, as practising physicians and professional historians: the prime example was, first, Sam Shortt, then later, Jackie Duffin; others, however, also demand special mention, such as T. “Jock” Murray, Peter Cruse, Ian Carr, and C. Stuart Houston, who were active physicians and surgeons in medical faculties and who did not have history training per se, yet each categorically had a foot in both camps and were regular participants at CSHM/SCHM annual meetings, among other lasting medical history contributions in their respective institutions. Another reason for growth was the indefatigable promotional efforts of Roberts himself, as his correspondence reveals. He had already established exchange arrangements with institutions such as the Israel Institute of the History of Medicine in Jerusalem

based on *Newsletter/Nouvelles*, which would continue with *CBMH/BCHM*. Roberts was also never remiss in sending sample copies of the journal to Canadian and international colleagues and other contacts who he believed would benefit from it – and subscribe and/or contribute.³¹

“To Raise It to a New Higher Level”: *Canadian Bulletin of Medical History / Bulletin canadien d’histoire de la médecine, 1987–94*

Writing to Memorial medical colleague Dr. D. Wallace Ingram in April 1987, Roberts confessed that he was “glad that my eight-year stint with the *Bulletin* and its predecessor is over.” Looking to the future of the journal, he was sure that the “new editor will have the energy to raise it to a new higher level.”³² Roberts was correct. The material published in the summer 1987 issue (volume 4, issue 1) of *CBMH/BCHM* had actually been selected by Roberts himself as his last act, but the journal was now officially under the editorship of Charles G. “Chuck” Roland (1933–2009), McMaster’s Hannah Professor. From the outside, regular subscribers would have noticed little change except that the stock of the cover was now a varnished, semi-gloss finish rather than the previous matte texture. The spine now carried the abbreviation of the journal’s title in both English and French, as well as the volume and issue numbers; the now familiar *H* and *M* motif remained on the front.

But turning to the pages inside – *wow!* Everything was different; the editorial handover was not just a personnel change, but signalled a new era and, in effect, a *CBMH/BCHM* that was indeed on a “new higher level.” In hindsight, Roland’s appointment as Roberts’ editorial successor was all but preordained. Since the early 1960s, soon after his graduation from medical school in Manitoba, Roland had published on numerous aspects of the history of medicine in Canada. Later, he had become the primary editor of the *Journal of the American Medical Association*. He had also been chair of the Department of Biomedical Communications at the renowned Mayo Clinic in Rochester, Minnesota; along the way, too, president of the American Medical Writers Association. He had also helped draft the new constitution for the CSHM/SCHM; worked as member of the Society’s committee on publications, which had recommended the creation of *CBMH/BCHM*; and then became the journal’s English book review editor. As a Hannah Professor, he enjoyed a stable academic platform with administrative support,

along with the protected time to devote to editing.³³ And by the time he assumed the editorship of *CBMH/BCHM*, the archival guide to the history of medical journals in Canada had, as noted earlier, been published,³⁴ as had his pioneering bibliography of secondary sources in the history of Canadian medicine.³⁵

In his debut editorial, published in English and translated into French, “New Face, New Editor,” Roland was clear about the metamorphosis process.³⁶ Although he did not actually employ the simile of a caterpillar turning into a butterfly, he certainly implied it. Roland opined accurately, but perhaps a bit uncharitably, that previously under Roberts *CBMH/BCHM* had been in its “home-grown stage,” in which all aspects of its publication had come from the editor’s “back pocket.” Now, however, was a new stage of “increased professionalism.” Central to this was the role of Wilfrid Laurier University Press (WLUP) in Waterloo, Ontario, as publisher of the journal. Roland and WLUP already had a good working relationship due to their previous collaboration on the publication of his complicated bibliography, so the selection of this medium-sized university press was sensible. The new *CBMH/BCHM* was now completely typeset, with full justification of lines; fonts and point sizes were carefully selected and systematic. Layout of pages was clean and followed a format that was typical for an academic journal. Copyright of original material was now assigned, appropriately, to the CSHM/SCHM, not personally to the editor, as had been the case in the past.

Roland’s message also made clear to readers that the new catchword implicit in the journal’s production was to be *consistency*. Regardless of whether an article was written in French or English, spelling was to be uniform and strict rules of punctuation were to be adhered to. Overall, these editorial processes would “avoid altering an author’s message,” but there was “much virtue in promoting common standards.” In addition to the voice of the new editor-in-chief, one also senses that of the university press here. The production department of WLUP was under the direction of Doreen Armbruster (as seen in [Figure 6](#)), who, as I recall it, ran a tight, no-nonsense ship (her name, coincidentally, is German for a crossbow archer).³⁷ She, no doubt in agreement with Roland, also prompted a much more significant shift toward “consistency.” From here on, all authors had to conform to a strict style guide for articles, which would be enforced by publication staff in order to “achieve that patina of consistent format and appearance that does much to



Figure 6: Doreen Armbruster, production manager at Wilfrid Laurier University Press, Waterloo, Ontario, was instrumental in establishing a new professional appearance and publishing standards for *CBMH/BCHM* in its new guise beginning in 1987

(Photograph courtesy of Wilfrid Laurier University Press.)

give a journal a professional appearance.” Clarity and conciseness in language were also to be policed, but Roland conceded that he would not provide any “arbitrary definition of those words.” “The field of the history of medicine is one of prodigious size and scope,” he continued. “No aspect of that field is excluded here as a matter of policy. We particularly hope to become the repository of much first-rank scholarship in Canadian medical history, in both French and English, but this avowal should discourage no one from submitting a manuscript that falls outside that rubric. Our desire is for excellence first. Nationalism will come, at the highest, second.”³⁸ Notwithstanding Roland’s remarks, *CBMH/BCHM* remains the

only professional medical history journal that regularly publishes work in English and French – perhaps an enduring nationalistic gesture?

On the face of it, such lofty sentiments about style and scope, along with journalistic professionalism, were seemingly innocuous and incontrovertible. Yet they, along with the new directions contained in the revised and rewritten “Information to Authors,” which demanded that a humanities referencing and notation style be adhered to,³⁹ further boosted the CSHM/SCHM along a trajectory it had been on since 1978, but from which there now was apparently no turning back. As already noted, in that year the Society had begun to meet in conjunction with the “Learned Societies” as an historical/humanities group, but in its early publications Roberts had always kept the door open for work that was overtly medical in content and/or style/format. Almost a decade later, this organization and its official organ now renounced their clinical/“amateur” origins, as evidenced in its “new face.”

Roland introduced other editorial innovations during his tenure. Scholars from across Canada were selected to sit on an editorial board for a fixed term; Heather MacDougall became book review editor, later to be joined by Georges Desrosiers (an especially dedicated and historically minded physician in the department of social and preventive medicine, Université de Montréal) as French book review editor; and the names of *CBMH/BCHM* referees were published annually. In 1988, the first newly named Paterson Lecture was published (in the previous year, “Pat” Paterson, former CSHM/SCHM president, had retired as the first executive director of the Hannah Institute). Articles continued to be published in French and English, but the latter predominated; authors were mostly Canadian, but the subject matter of their articles was becoming increasingly international. Physicians contributed occasionally, but overwhelmingly *CBMH/BCHM* had become the domain of university-based scholars in the humanities and social sciences. When Roland took charge of the journal, CSHM/SCHM membership was at an all-time high, with 350 persons fully paid up, but curiously, this number then declined and averaged 270 annually.⁴⁰ A breakdown of the professional backgrounds of the membership is unavailable, but perhaps the process of scholarification (!) of *CBMH/BCHM* hastened the coup de grâce for “amateur” and/or medical members.

The transition to a new editorial team based at Western University, headed by Paul Potter and myself, took place with few formalities in

1990. Potter and I originally planned to split duties as needed. The official address for *CBMH/BCHM* was the Department of History of Medicine and Science at Western, but in reality ground zero for operations was the domestic dining room table of myself and Jennifer J. Connor (PhD Western, and Hannah and SSHRC post-doctoral fellow), as we increasingly shouldered the work of the production process (the latter Connor would officially be recognized as a co-editor after Potter stepped down from the role).⁴¹ Organizational changes undertaken by us included the creation of an editorial board consisting of the co-editors, book review editors, and Othmar Keel (professor of history, Université de Montréal), along with an advisory committee composed of representative scholars from across the country. Later, the advisory committee expanded to include invited members from Britain, the US, the Netherlands, Germany, and France. Our hope was that the presence of international scholars might increase awareness of the journal outside Canada.⁴² I don't know if that turned out to be the case, but at the very least it was good window dressing! Nonetheless, I would note that the editorial organizational structure then introduced more or less obtains to the present.

It was the second issue of 1990 under the masthead of the new co-editors that displayed their wave of innovations. In addition to regular offerings such as longer articles and book reviews, new sections for different configurations of articles were instituted, which included "Case History," "Methods and Issues," "Artifacts and Archives," and "Correspondence." The first three of this group were to take the form of briefer, more focused studies while still adhering to the journal's scholarly standards. The reasoning behind all this was manifold. First, it was done to create some new headings to make the journal more interesting and varied for readers; second, in so doing, other important branches of medical history, such as museum studies and document analysis, could be recognized; and, finally, there was the hope that these shorter contributions might entice physicians and other professionals, along with graduate students, to consider submitting to *CBMH/BCHM*. Generally speaking, I would say that the plan demonstrated some success, for we soon published work on medical instruments, paleography and diplomatics, exhibit design, historic sites, breast cancer, and scurvy – most of which might have been rejected in the past not because they were inferior, but because there was no suitable rubric to embrace them. Moreover, the authors of these pieces reflected collectively the targeted demographic. Over the years, many of these publication

sections were abandoned, but even in the latest/last issue of *CBMH/BCHM*, “Methods and Issues” has survived.

The last of the new sections introduced at this time was “Correspondence.” Although an innovation, it was a modified reincarnation of the “Points de vue / Perspectives” section initiated by Roberts and Lewis in 1984. While they had offered a standing invitation for any reader to submit his/her thoughts on a particular topic of current concern, I extended a personal “ask” to selected readers to comment on a specific issue, with the understanding that their responses would be published. The genesis of this was a guest editorial by Dr. William Spaulding (1922–93), which had been inherited from Chuck Roland. Spaulding had been associate dean of medicine at the University of Toronto before being invited to a similar position in 1966 at the newly established medical school of McMaster University; his 1991 book on the “invention” of the new form of medical education at this Hamilton institution, along with numerous other medical history publications in *CBMH/BCHM* and other key medical history roles, singled him out as a paragon of the physician/“amateur” historian.⁴³ In his editorial, Spaulding lamented the lack of involvement by Canadian university presses in publishing medical history. To his mind, this was a “striking illustration of the current weakness of university presses and one reason why few worthwhile books on Canadian medical history are published.” He realized that behind this perceived situation was the “big question” of who would pay to produce such works. In answer, he dangled the proposition that “designated money from outside sources . . . [such as] foundations, granting agencies, and individual donors” might be a solution.⁴⁴

I picked up on this challenge and wrote to the directors of all major university presses in Canada, asking them if they would like to respond. To my amazement, *CBMH/BCHM* received replies from Wilfrid Laurier, Alberta, Toronto, Calgary, and British Columbia university presses. Presses generally shared Spaulding’s concerns, but there were also points of contention; however, all letters were serious, thoughtful, helpful, informational, and respectful.⁴⁵ Encouraged by this experience, I repeated the process in 1991, when I now invited selected *CBMH/BCHM* subscribers and a few other international medical historians to express their views on the evolution and accomplishments of medical history in Canada. We received about a dozen responses, including one from the late, great Roy Porter, who graciously replied to my invitation.

As before, there was a range of opinion, but all scholars who replied were as thoughtful as the press directors had been.⁴⁶ Now emboldened, I undertook a third go, this time asking 40 medical historians from across Canada at various stages of their careers – ranging from graduate students, to emerging scholars, to fully established professors – to comment on the need for additional reference tools, more synthetic or survey texts, and the role of round tables or symposia to debate such matters. With an almost 50% response rate, there was a diverse range of opinion, some of which was emphatically negative, but otherwise this group was generally in agreement over the need for these changes.⁴⁷

I choose to dwell on the “Correspondence” section of *CBMH/BCHM* during the early 1990s, for to me it highlights an otherwise overlooked aspect of this periodical. Collectively, the many printed pages from many significant people and their informed opinions are an amazing snapshot or “360” of the medical history field in Canada at a particular moment. Anyone who ever contemplates writing an intellectual history of this subject *must* engage with this rich primary source and digest its information. Of course, during these years the journal continued to publish much other material, and thus remained a repository for good scholarship and the outcomes of original research on Canadian and international topics. In addition, a particular milestone was achieving Social Sciences and Humanities Research Council funding under its Aid to Scholarly Journals program. This application would not have been successful without the informed and avid contributions of Jennifer J. Connor. Not only did this bring extra financial resources to the CSHM/SCHM, but it was a great accolade for *CBMH/BCHM* in that it was now independently recognized nationally, as a result of external peer review, as a periodical of repute (but admittedly, the grant application was a great deal of work). In 1994, a cosmetic change to the cover signalled a conclusion to the journal’s first decade of publication; the new colour scheme and template remained with minor modifications for quite some time after.

Bilan et perspectives

A review of the content and activities of *CBMH/BCHM* over the 10-year period of this study can be done conveniently by analysis of the so far only cumulative index for the journal, prepared by Martina Hardwick and published in 1983. Hardwick, then working on her

doctorate in history at Queen's, had worked with me previously on several medical history projects while she was a graduate student at Western. Her exhaustive index was prepared not only by author, author-title, and book review, but also by subject; within the last category, she also evaluated the relative number of contributions under each heading. Based on the results of her efforts (in addition to the contents of volume 10, which appeared the following year), several scholarly trends become apparent. Contributions were topically and geographically wide-ranging, reflecting Roland's insistence that the journal's mandate was desirous of "excellence first. Nationalism will come, at the highest, second." Yet it is clear that there was, when all was said and done, a not unexpectedly Canadianist bent to the entire venture. But even under that broad rubric, other embedded patterns emerge, with concentrations on French medical history, hospitals, medical teaching, and vaccination. But it was the subjects of psychiatry/asylums/insanity and women (as patients, physicians, and nurses) that surpassed all others.⁴⁸ And with issue 1 of volume 10 devoted to the history of nursing (which was the first time that *CBMH/BCHM* published a theme issue with guest editors – a tradition that would continue), along with issue 2 of that same volume focusing on mental health and psychiatry, these two trends were consolidated. In these respects, *CBMH/BCHM* reflected scholarly imperatives of the time, while simultaneously, along with its like-minded periodicals, driving them. In a phrase, the journal had become, and would continue to be, relevant to the field of history of medicine writ large. Concomitantly, the journal's preponderance of articles on topics such as psychiatry and women, which typically had a critical historiographical bias, resulted in the ironic outcome that *CBMH/BCHM* repeatedly breached the walls of the citadel of medicine from whence it had been spawned. The over 100 book and essay reviews published in the journal over this decade, although often discounted in some academic circles as of less importance than original articles, must also be acknowledged as a scholarly service to authors, librarians, and colleagues.

In my opinion, over the years *CBMH/BCHM* has always punched above its weight, which is a good thing overall but could easily have become problematic. Historical analyses of life cycles of journals demonstrate that periodicals become moribund owing primarily to three causes. First, material for publication dries up due to a host of circumstances, such that the publication starves and goes into rapid decline. Fortunately, this has never been the case with *CBMH/*

BCHM, nor does it seem likely to happen given the fairly vibrant nature of the field in Canada and beyond, as well as the fact that its scholars are scattered across various and numerous academic departments in which they, for the most part, are entrenched and secure. I say that in comparison to the very early days of medical history in Canada, when its practitioners might be cast as “hobbyists” in schools of medicine where there was no commitment of succession of like-minded faculty. Second, scholarly journal editing is intensive work and, typically, is performed on a wholly voluntary basis; thus “burnout” of those in charge can occur. Unlike many major medical journals, *CBMH/BCHM* offers no salary or stipend; the many, many folks who have undertaken the editorship of the journal have done so without any expectation of monetary compensation. And so far, there has not been a shortage of good people to sign on for the task. Although collective agreements and promotions and tenure committees may recognize such service work, there is no guaranteed standard for gauging and rewarding the effort involved.

A negative imbalance between journal revenue and production costs is a final explanation for death. Rarely does a small academic journal survive without subsidizing. Subsidies may come in two general forms. “In-kind” subsidies involve host universities, actively or passively, providing assistance through absorbing the costs of secretarial/personnel support, mailing costs, and those of other miscellaneous stationery supplies; providing free use of telephones and other equipment; and so on. Certainly, in the early years of *CBMH/BCHM*, before the advent of PCs, email, the Internet, and the World Wide Web (yes, amazingly, things were accomplished before the arrival of such technologies!), Memorial University initially did all of these; later, so would McMaster University, along with the then University of Western Ontario. Later, other institutions would similarly assist in kind. The subsidy that can really mean the difference between life and death, however, is a hard financial one. Although *CBMH/BCHM* was successful in winning SSHRC funding, then the most likely form of journal subsidy in Canada, from the outset it was also well backed through grants from the Hannah Institute. On the one hand, the allocation of such funds was consistent with its government-mandated obligation, while on the other hand, the process was greatly facilitated by its three executive directors. As has been noted, the first, “Pat” Paterson, was also simultaneously CSHM/SCHM president; his successor, Dr. Robert A. “Bob” Macbeth (1920–2014),⁴⁹ also became its

secretary-treasurer; while I, the third and final person to hold that office, was a *CBMH/BCHM* co-editor. Collectively, we were a direct and unfiltered pipeline through the Institute to its parent board of directors at AMS. The journal continued to receive financial assistance from AMS, without which even now, although there have been sporadic interruptions along the way, it would have great difficulty in continuing to operate at its current level.

And of *CBMH/BCHM* in prospect? As noted at the outset, historians should not perhaps be trusted when prognosticating. That the journal has for a few years now been part of the stable of journals published by UTP surely augurs well. The marketing clout of this, Canada's oldest and largest academic publisher, is not to be underestimated, That the journal remains national, and consciously international, in the scope of its content bodes well, as does its evolving editorship, which has embraced incumbents, over the years to the present, from an island on the easternmost limit of Canada to one on the other, westernmost, coast, and points in between: central Canada, the Prairies, and Quebec. Perhaps in the years ahead the print version may become a thing of the past if *CBMH/BCHM* goes wholly online, as has, for example, the *Journal of the History of Medicine and Allied Sciences*, with no doubt more to follow – understandable, but also disappointing, as for those of us who have been directly involved in journal production there is something satisfying about holding a newly printed issue in one's hands while thumbing and smelling the freshly inked pages (no matter the many inevitable headaches and frustrations along the way, although invisible to readers, to get to that point). The year 1984 is of iconic status due to George Orwell, but it should be remembered, perhaps less grandiosely, also as the birth year of *CBMH/BCHM*, so Happy 40th when it arrives (albeit now in its new livery and guise).

Acknowledgements

I am grateful to the editors of this journal for their encouragement during the writing of this discussion. Their prompts to be more revelatory and personal have, I hope, made it more interesting to readers and more of a useful contribution. However, this account was not commissioned, nor should it be considered in any way as “official” with respect to the CSHM/SCHM. The opinions and interpretations expressed are entirely my own based on personal recollections or experiences at the time, and/or documents as cited.

Notes

1. Jacalyn Duffin and Paul Potter, "History of the Canadian Society for the History of Medicine," *Canadian Bulletin of Medical History / Bulletin canadien d'histoire de la médecine* [CBMH/BCHM] 17, no. 1 (2000): 287–308. The publisher's website for CBMH/BCHM has uploaded an incomplete run of the *Newsletter/Nouvelles*, with only issues 1–3 available; see "Canadian Bulletin of Medical History," UTP Journals, accessed 15 February 2022, <https://utpjournals.press/loi/cbmh?expanded=vcbmh-Newsletter>.
2. For studies of societies and the evolution of their "in-house" journals, see J.T.H. Connor, "Of Butterfly Nets and Beetle Bottles: The Entomological Society of Canada, 1863–1960," *HSTC Bulletin* 6, no. 3 (1982): 151–71; J.T.H. Connor, "To Promote the Cause of Science: George Lawson and the Botanical Society of Canada, 1860–1863," *Scientia Canadensis* 10, no. 1 (1986): 3–33; and J.T.H. Connor, "Bibliographic Ghostbusting: The Evanescent Life and Spirited Times of the *Canadian Journal of Homoeopathy* (1856–57)," *Scientia Canadensis* 43, no. 1 (2021): 30–50.
3. Richard A. Jarrell and Norman R. Ball, eds., *Science, Technology, and Canadian History / Les Sciences, la technologie et l'histoire canadienne: The First Conference on the Study of the History of Canadian Science and Technology / Premier Congrès sur l'histoire des sciences et de la technologie canadienne* (Waterloo, ON: Wilfrid Laurier University Press, 1980).
4. Jarrell and Ball, *Science, Technology, and Canadian History*, xiii.
5. Jarrell and Ball, 37–44, 199–211.
6. Michael Bliss, review of *Associated Medical Services, Incorporated: A History*, by John B. Neilson and G.R. Paterson, *Medical History* 33, no. 1 (1989): 137–38. Bliss' review, no matter how harsh, was not inaccurate; see Neilson and Paterson, *Associated Medical Services, Incorporated: A History* (Erin, ON: Boston Mills Press, 1987), which is a celebratory and somewhat self-serving account. Also helpful in reconstructing the history of the Institute during its early days is "Jason A. Hannah and the Hannah Chairs for the History of Medicine," *Bulletin of the History of Medicine* 52, no. 1 (1978): 125–27. For anyone interested in digging further into the history of AMS / the Hannah Institute, see "Associated Medical Services Incorporated Records, Manuscript Collection 152: Finding Aid," Thomas Fisher Rare Book Library (website), accessed 15 February 2022, https://fisher.library.utoronto.ca/sites/default/public/finding_aids/amscoll152.pdf. But see also Thomas Fisher Rare Book Library, University of Toronto, Associated Medical Services Incorporated Papers, MS COLL 00466 2B Annex, accessed 15 February 2022, [CJHH/RCHS 39.1 2022](https://discoverarchives.library.utoronto.ca/index.php/associated-

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[medical-services-incorporated-papers-00466](#) – assuming you are granted permission.

7. On Parsons, see “Dr. W. David Parsons: Obituary and Death Notice,” InMemoriam, accessed 15 February 2022, <http://www.inmemoriam.ca/view-announcement-552560-dr-w-david-parsons.html>. On Roberts, see Joan Sullivan, “Medical Educator Ken Roberts Had a Broad Vision,” *Globe and Mail*, 2 January 2013, <https://www.theglobeandmail.com/news/national/medical-educator-ken-roberts-had-a-broad-vision/article6883469/>; “Faculty and Staff,” The Early Days of the Medical School at Memorial University of Newfoundland (website), accessed 15 February 2022, https://www.med.mun.ca/earlydays/pages/06Faculty_and_Staff/01faculty_and_staff.html; Greg Walsh and Stephanie Harlick, eds., “A Guide to the Dr. Kenneth B. Roberts Fonds,” Memorial University of Newfoundland, Health Sciences Library (website), last modified 19 April 2004, <https://www.med.mun.ca/hslarchive/COLL003.pdf>; and Kenneth B. Roberts, interview with Doug Brophy, *Brophy’s Corner*, CBC, 1980, <https://collections.mun.ca/digital/collection/founders/id/3169>. It is worth highlighting here the formation and activities of amateur medical history clubs, for they are underappreciated drivers of medical history, especially if associated, no matter how tenuously, with faculty at medical schools. The prime example of this phenomenon is Toronto; see Peter Kopplin and Irving Rosen, eds., *Making History: Toronto Medical Historical Club, 1924–2018* (Durham, NC: Lulu.com, 2021), along with my review of this book in *Ontario History* (forthcoming).
8. Yolande Bonenfant, “Message de la secrétaire,” *Newsletter/Nouvelles*, no. 1 (1979): 4. On Bonenfant, see Sylvio LeBlond, *Médecine et médecins d’autrefois: Pratiques traditionnelles et portraits québécois* (Quebec: Presses de l’Université Laval, 1986), xi.
9. G.R. Paterson, “Looking Around and Ahead,” *Newsletter/Nouvelles*, no. 9 (1983): 22.
10. See Genevieve Miller, “The Missing Seal, or Highlights of the First Half Century of the American Association for the History of Medicine,” *Bulletin of the History of Medicine* 50, no. 1 (1976): 93–121. Earlier stirrings by doctors to pursue medical history were also found within what would become the Medical Library Association; see Jennifer Connor, *Guardians of Medical Knowledge: The Genesis of the Medical Library Association* (Lanham, MD: Scarecrow Press, 2000), 106–7.
11. Yolande Bonenfant, “General meeting 1982: Rapport du membership 1981–82,” *Newsletter/Nouvelles*, no. 9 (1983): 27.
12. “CSHM Newsletter Survey Committee,” *Newsletter/Nouvelles*, no. 9 (1983): 28–29.

13. “Future of Newsletter/Nouvelles,” *Newsletter/Nouvelles*, no. 9 (1983): 31–32.
14. “Future of Newsletter/Nouvelles,” 31.
15. [K.B. Roberts], “Newsletter/Nouvelles Becomes a Bulletin,” *Newsletter/Nouvelles*, no. 10 (1983): 32.
16. “Future of Newsletter/Nouvelles.”
17. Bonenfant, “General meeting 1982,” 27.
18. S.E.D. Shortt, “Antiquarians and Amateurs: Reflections on the Writing of Medical History in Canada,” in S.E.D. Shortt, ed., *Medicine in Canadian Society: Historical Perspectives* (Montreal: McGill-Queen’s University Press, 1981), 1–17.
19. On Bendzsa, see “Sylvia Bendzsa,” Heritage Newfoundland & Labrador, last modified July 2013, <https://www.heritage.nf.ca/articles/arts/sylvia-bendzsa.php>.
20. Payton was one of the men (and they were all males) who were recruited by the inaugural dean, Ian Rusted; see Sasha Mullally and David Wright, *Foreign Practices: Immigrant Doctors and the History of Canadian Medicare* (Montreal: McGill-Queen’s University Press, 2020), 117–18; and “Biographical Sketch: Dr. Brian Payton,” *The Early Days of the Medical School at Memorial University of Newfoundland* (website), accessed 15 February 2022, https://www.med.mun.ca/earlydays/pages/01story/07payton_bio.html.
21. B.W. Payton, “The Initials from ‘De humani corporis fabrica of Vesalius,’ 1543,” *Newsletter/Nouvelles*, no. 3 (1980): 14–15.
22. Lucien Febvre and Henri-Jean Martin, *The Coming of the Book: The Impact of Printing, 1450–1800* (London: Verso, 1990), 80–83.
23. See K.B. Roberts and J.D.W. Tomlinson, *The Fabric of the Body: European Traditions of Anatomical Illustration* (Oxford: Clarendon Press, 1992); and Mimi Cazort, Monique Kornell, and K.B. Roberts, *The Ingenious Machine of Nature: Four Centuries of Art and Anatomy* (Ottawa: National Gallery of Canada, 1996).
24. [K.B. Roberts], “Information to Authors,” *CBMH/BCHM* 3, no. 2 (1986): 309–10; emphasis in original.
25. [K.B. Roberts], “Bulletin,” *CBMH/BCHM* 1, no. 2 (1984): 133.
26. On Lewis, see “Professor Jane Lewis,” London School of Economics and Political Science, accessed 15 February 2022, <https://www.lse.ac.uk/social-policy/people/Emeritus/Professor-Jane-Lewis>.
27. “Points de vue / Perspectives,” *CBMH/BCHM* 1, no. 1 (1984): 115.
28. Jane Lewis, “Perspectives: On the Medicare Crisis,” *CBMH/BCHM* 1, no. 1 (1984): 115–25.
29. Thomas E. Brown, “The Origins of the Asylum in Upper Canada, 1830–1839: Towards an Interpretation,” *CBMH/BCHM* 1, no. 1 (1984): 27–58.
30. Bonenfant, “General meeting 1982,” 27.

31. Memorial University of Newfoundland, Faculty of Medicine, Health Sciences Library, Founders' Archive [Founders' Archive], K.B. Roberts Fonds, Collection 003, 1.0 Correspondence, 1977–89, various letters. I would like to thank Melissa Hefford, archivist, for her assistance in retrieving this fonds even when the library/archives were officially closed due to COVID-19 restrictions.
32. Founders' Archive, K.B. Roberts fonds, Collection 003, 1.0 Correspondence, 1977–89, Roberts to Ingram, 7 April 1987.
33. On Roland, see Wendy Mitchinson, "Tribute to Charles Roland," *CBMH/BCHM* 17, no. 1 (2000): 23–24; and Paul Potter, "Charles Gordon Roland (January 25, 1933 Winnipeg–June 9, 2009, Burlington, Ontario): A Personal Reminiscence," *CBMH/BCHM* 26, no. 2 (2009): 575–76.
34. Charles G. Roland and Paul Potter, eds., *An Annotated Bibliography of Canadian Medical Periodicals, 1826–1975* (Toronto: Hannah Institute for the History of Medicine, 1979).
35. Charles G. Roland, ed., *Secondary Sources in the History of Canadian Medicine: A Bibliography* (Toronto: Hannah Institute for the History of Medicine / Wilfrid Laurier University Press, 1984).
36. Charles G. Roland, "New Face, New Editor," *CBMH/BCHM* 4, no. 1 (1987): 3–6.
37. Armbruster gives a good overview of the changing and often clumsy print technologies employed over the 1980s and later, which embraced the days of *CBMH/BCHM* at WLUP; see Doreen Armbruster, "A University Press Comes into Being," in Harold Remus, ed., *I Remember Laurier: Reflections by Retirees on Life at WLU* (Waterloo, ON: Wilfrid Laurier University Press, 2011), 80–85.
38. Roland, "New Face, New Editor," 4.
39. "Information for Authors," *CBMH/BCHM* 4, no. 1 (1987): 95.
40. Duffin and Potter, "History of the Canadian Society for the History of Medicine," 290.
41. Duffin and Potter, 303.
42. See *CBMH/BCHM* 10, no. 2 (1993), inside front cover.
43. See Charles G. Roland, "Obituary: William Bray Spaulding, 1922–1933," *CBMH/BCHM* 10, no. 1 (1993): 157–58; and William B. Spaulding, *Revitalizing Medical Education: McMaster Medical School, the Early Years, 1965–1974* (Hamilton, ON: B.C. Decker, 1991). A selection of his papers is available at "Dr. William B. Spaulding Subfonds," McMaster University, History of Medicine & Medical Humanities (website), accessed 15 February 2022, <https://medhumanities.mcmaster.ca/docs/default-source/directory-pdfs/dr-william-b-spaulding-subfonds.pdf?sfvrsn=0>.
44. William B. Spaulding, "How Can University Presses Publish Canadian Medical History?," *CBMH/BCHM* 7, no. 1 (1990): 5–7.

45. "Correspondence: Canadian University Presses and the Publishing of History of Medicine, *CBMH/BCHM* 7, no. 2 (1990): 121–30.
46. "Correspondence: Medical History in Canada: Some Assessments and Suggestions," *CBMH/BCHM* 8, no. 1 (1991): 3–17.
47. "Correspondence," *CBMH/BCHM* 10, no. 2 (1993): 167–83.
48. Martina Hardwick, "Cumulative 10-Year Index to the *Canadian Bulletin of Medical History / Bulletin canadien d'histoire de la médecine*," *CBMH/BCHM* 11, no. 2 (1994): 437–63.
49. On Macbeth, see "Robert Macbeth," *Globe and Mail*, 25 June 2014, <https://www.legacy.com/obituaries/theglobeandmail/obituary.aspx?n=robert-macbeth&pid=189972778>.