BOOKS

Controversial Bethune bio presents warts and all

Assertions of narcissism, criminality and addiction cast a shadow on Dr. Norman Bethune's heroic and humanitarian mystique

Phoenix: The Life of Norman Bethune, by Roderick Stewart and Sharon Stewart, McGill-Queen's University Press, 479 pages, \$39.95

by Shane Neilson

THERE ARE SEVERAL

competing biographies of Dr. Norman Bethune on the market, including a forerunner biography by *Phoenix* author Roderick Stewart himself. So, when a new biography emerges, one asks three basic questions: Is there new original research presented? Are the

opinions and analyses the biographers present plausible, enriching the factual presentation? And, finally, is the damn thing readable?

Stewart, with the help of his wife, Sharon, has made Bethune his life's work. He travelled to Bethune's haunts in Canada, the sites of his jaunts in Spain, and the locations of his barnstorming of China. He's spoken to people who knew Bethune professionally and socially. Though I've read only Stewart's prototype as a comparison, it's hard not to believe he has added significantly to Bethune lore. A look at the extensive references and index is enough to convince me.

Harsh assessment?

There is one aspect to the biography that has led to a controversial reception. In the past, the furthest some biographers have gone is to call Bethune "driven." Stewart goes much





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further: According to Phoenix, Bethune was probably alcoholic. The authors also suggest he sometimes had a cavalier attitude to human life in the operating room, and he was a man-whore, narcissist, embezzler, insurance fraudster and abortionist of his own child.

Regarding the second question, the Stewarts have, almost unavoidably, resorted to psychobiography in *Phoenix*. A complicated, divided, inconsistent and mercurial man such as Bethune can't help but coax his biographers to invite him upon the couch and let him tell them, by means of his own letters, his motivations.

It's usually when the subject is still alive that biographers end up disliking their subjects. In the case of the safely dead, it is pointless for a biographer to bother with the effort should they detest their subject.

I therefore come back to the controversy: There is no basis for an accusation that the Stewarts don't understand Bethune, for they provide enough source material for the reader to understand how unpleasant Bethune could be. But outweighing that is Bethune's other spirit: He was an unquestionably dedicated humanitarian, a principled physician who believed in public health care, a doctor willing-and ultimately made-to die on the front to help the sick.

There are so many calculatedly monstrous statements attributed to Bethune that I cannot, for reasons of space, relate all of them here. But to the woman he loved all his life, he said on their wedding day that he might make her miserable but that he would never make her life boring. Stuff like this makes one realize that all his life Bethune erected a stage and climbed upon it, hoping for the biggest audience possible. He then burned the stage to the ground, not bothering to use the timber for the next, bigger stage he planned to build. I shook my head in amazement, wonder, consternation and frustration more than I had with any biography I'd read. I could only make sense of Bethune's life in terms of see Actions | page 25

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Practice notes

Terms of endearment They handed me the note as I was finishing rounds. It was from the CEO's assistant, Kathy. The hospital had received a letter of complaint—non-medical—about me. The opening paragraph was reassuring: good doctor, excellent explanations, successful surgery, no complications, good result. I read on, fearing that I was coming to a big "However," and there it was, opening the last paragraph.

My failing was that on occasions I had treated the patient in a "condescending and patronizing manner." I checked the signature: Was this from my wife? Not so, it was from an older lady whose uterus I had removed and whose bladder neck I had replaced in the position where it had started its career.

What I had done that had so offended her was to address her as "dear." I made an appointment to see the CEO and then had my secretary ask the patient to come to my office. I know how to handle these situations. Both to the CEO and patient I would use the same technique—assume a sad, remorseful look with a hint of hurt, and apologize and grovel, but being careful not to over-grovel, as that can look insincere.

Two days later I sat in front of Kathy, ready to crawl into the CEO's office. I felt a need to explain. "You see, Kathy, where I am from in the north of England, 'dear' is almost semi-formal and implies a level of concern. Sweetheart, sweetie, sugar, luv or ducks are the terms used when being familiar, but dear is much more gentle and totally without any sexual undertones. It is used vey widely."

"Well, that makes it quite acceptable" Kathy said.

"How so?"

"Because using the word 'dear' is clearly part of your cultural heritage, and in Canada, criticizing a person's cultural heritage is quite unthinkable."

So in I went. I played my sad and remorseful cards, and then trumped them with my cultural heritage card. It worked like a charm.

"How did it go?" Kathy asked, as I passed her desk.

"Very well, thanks to you, honey."—Dr. Michael Moreton was previously an ob/gn in Ottawa and is now the international medical co-ordinator with the Bangkok Hospital group in Thailand.

Actions speak of heroism

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mental illness via a reconciliation of the facts and not just the word of his biographers. I interpreted for myself the fact that the many instances in which Bethune devoted himself to his patients were snatched from grandiosity.

I then forgave the Stewarts their psychologizing, having resorted to it myself. Anyone who aborts his own baby while displaying a remarkable affinity and concern for children, and while purportedly wanting a child of his own desperately, practically begs to be made sense of.

Spanish Civil War

air and by sea as they wind along a narrow road. Bethune witnesses the suffering of these people forced to trek hundreds of kilometres as he passes them on his way to the front:

Near nightfall, still nearly 20 kilometres short of Motril, Bethune suddenly stopped the Renault and told the others that they should forget about trying to find wounded who needed transfusions. He had decided to turn the vehicle around, fill it with children, and drive them to Almeria. As soon as he opened the back doors, the throng of refugees massed around him. Aware that a miraculous opportunity was presenting itself, the mute, suffering

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There is much more that could be said about this book, but I think the most important counter to the argument that the authors are "running Bethune down" that could be made is the following excerpt from Phoenix. This passage comes after a long section in which Bethune creates the world's first mobile transfusion unit from scratch in Spain during the Civil War. He tears through Madrid, does what he can productively and destructively, and then decides to take some of his team and move to the more active zone at Malaga. While driving, he encounters thousands of civilians fleeing Franco's advancing forces, civilians who are being shot at and bombed by

people came to life, shouting, crying, reaching out, begging for a place in the vehicle. Bethune tried to accept only children but was unable to separate them from their mothers; nor was he able to reject two women in the late stages of pregnancy. In a matter of minutes the Renault was crammed with nearly 40 women and children. Bethune slammed the doors. Turning to Sise, he told them to drive the refugees to Almeria as *fast as he could, then return to pick* up him and Worsely. Meanwhile they would join the crowd moving toward Almeria.

The damn thing is indeed readable.

Shane Neilson is a GP in Erin, Ont.

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