

and alternative or complementary medicine in order to solve their health care problems.¹ The relationship between these two services, overall, is not friendly and is in some instances hostile. Generally speaking the hostility tends to come from mainstream practitioners who may be cynical, uninformed, or threatened by alternative therapies. Negotiating the relationship between these health care services is a quagmire that too many of us are familiar with. We need both. How long will it take before we live in a world that values and acknowledges the merit of both approaches? De Marco's book is a landmark on the road to this inevitable future.

The information in this book is terrific and a welcome addition to the scarce resources for women's health care on this practical level. It includes the usual sections on reproductive health care such as pregnancy, PMS, menopause, and vaginal infections. Of special note is a section on chlamydia, a symptomless (in women) sexually transmitted disease now reaching epidemic proportions in certain age groups. It also includes the not so usual, stressing the impact of emotional burdens and overwork prevalent in so many women's lives in the 1990s. One hour a day to yourself is her golden rule of mental health. (Ha! Now there's a challenge for working mothers!) Particularly welcome is her attention to grief, outlining the numerous losses (e.g. miscarriage or the loss of a dream) women encounter and require time to process in the face of cultural denial of their importance. Other welcome sections provide otherwise difficult to access information about postpartum thyroid problems, gallbladder problems, fibrocystic breast disease, and lesbian health care.

All of the issues addressed are introduced with careful explanations of how problems develop, what research is available, and the various treatment options, both mainstream and within alternative therapies. With such useful content, however, it is unfortunate that more time was not

spent in organizing the material in a more accessible manner. At times the information about research gets tedious and a good editor could have remedied this easily with a different organization of the same material. On the same note, although this fifth edition of this valuable book is more polished than its predecessors, the formatting is not only unpleasant aesthetically but not conducive to easy reading, with one sentence paragraphs and haphazard spacing.

I have one more small quibble. The beliefs that the book is built on include the statement that "Your body is perfectly constructed for your enjoyment and benefit, whether you decide to have children or not." This is a nice sentiment but as a philosophy requires some fine-tuning. It's just not true. Some of us are born with or acquire deficiencies through a variety of different events, biological or otherwise. We are not all born with perfectly functioning organs and balanced metabolisms. Isn't that the wonder of naturopathy, that, for example, a genetically weak liver can be managed through different remedies and herbs? But this is a minor flaw in an enormously helpful and timely effort. I'm happy to have a copy of this book for my library shelf where it now sits next to the *Boston Women's Health Collective* volumes and Mary Breen's *Taking Care*.

¹Canada Health Monitor, March 18, 1991, cited in Mickelburg, 1991, *The Globe and Mail*, March 19, pp. A1, A6; Government of Quebec, *Reform of the Health and Social Services Network*, unofficial English version, December 7, 1990, pp. 28-29.

THE HYSTERECTOMY HOAX

Stanley West, M.D. with Paula Dranov, Toronto: Doubleday, 1994.

by Jan Clarke

The Hysterectomy Hoax focuses on gynecological and treatment infor-

mation for health conditions often treated surgically with a hysterectomy. The aim of this work is to encourage women to become more informed as patients, specifically to "give you ammunition to defend yourself against hysterectomy." (13) The ammunition provided assumes that when women are informed patients, armed with current gynecological and treatment information, they are able to make medical choices and avoid unnecessary operations like hysterectomies.

Stanley West emphasizes that unnecessary hysterectomies should be avoided because a woman's uterus is neither a nuisance nor a useless organ outside of reproduction. By pointing out that hysterectomy is only an appropriate treatment for cases of uterine cancer, West argues that 90 per cent of hysterectomies in the US are unnecessary. This argument is supported by a critical analysis of hysterectomy surgery as an overpracticed and inadequately questioned surgical procedure. This analysis is based on West's clinical experience as a gynecologist, a critical review of the medical literature, and descriptions of health conditions frequently mistreated by gynecologists.

To demonstrate that options other than hysterectomy surgery are often difficult to find, West draws on his patients' previous experiences with other doctors who promote hysterectomy treatment for a broad spectrum of women's health problems. In West's critique of diverse research and studies in the medical literature, he provides some insightful analyses which go beyond conventional medical explanations to include a degree of social analysis. But while many sources are cited, there are no systematic footnotes or complete references listed to encourage further reading. This omission is a serious oversight in a book that claims to offer women gynecological knowledge as a resource for challenging doctors.

While a thorough description of women's reproductive system explains gynecological terms and physiological processes, West should take

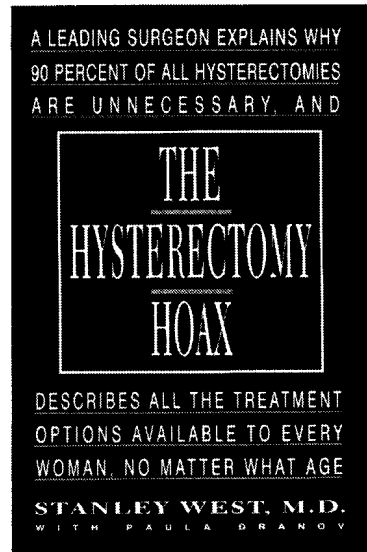
advice he gives to other doctors and only discuss his own area of expertise. He may be an expert in reproductive endocrinology and give fair descriptions of women's physiology, but his interpretation of women's development and sexuality is both patronizing and sexist. Particularly disturbing is his unsubstantiated pet theory of "phantom orgasms" in women after hysterectomies, in which he directly links women's sexual pleasure to the presence of a uterus. At this point, I longed for the balanced anti-sexist treatment of women's health issues so familiar in publications that are sparked by the women's health movement.

The main agenda of *The Hysterectomy Hoax* is to question the use of hysterectomies, particularly for treatment of uterine fibroid conditions. After describing all the variations of uterine fibroids a woman may suffer from, West describes myomectomy surgery in detail. Since this is a procedure which leaves the uterus intact, West claims that in most cases myomectomy is the best alternative to hysterectomy. As a persuasive gynecologist, however, Stanley West never loses sight of promoting his specific expertise in myomectomy as a surgical procedure of choice, supposedly far more effective than hysterectomy for removal of uterine fibroids.

West does note that myomectomy is seldom the operation of choice for gynecologists. He partially accounts for this situation by identifying complications which can occur in myomectomy surgery, particularly due to inadequate technical expertise for conducting this relatively risky procedure. Interestingly, he also suggests that the main deterrent for gynecologists is the increased time in surgery for a myomectomy, for less financial reimbursement than a hysterectomy. Worth noting, however, is that while myomectomy may be available in the US, it is not necessarily an alternative to hysterectomy which is routinely available to women in Canada.

Further discussion of other

gynecological conditions—such as endometriosis and ovarian cysts, which are frequently treated by unnecessary hysterectomies—broadens the clinical information beyond the emphasis of fibroid conditions and myomectomy treatment. As a useful resource for women as patients, many of the chapters which describe specific health conditions and alternative treatments also include a list of



questions to ask doctors. The inclusion of a substantial glossary of terms with clear descriptions also helps to demystify the technical jargon of the book and the doctor's office. Unfortunately, a discussion of women's usual subordination in the conventional doctor-patient relationship is only briefly included as a final chapter.

While *The Hysterectomy Hoax* gives some clear technical information of gynecological conditions and treatments, the medical authority of Dr. West is always evident, as is his tendency towards sexist interpretations of women's bodies and their lives. Also, the persistent promotion of myomectomy surgery often obscures other valuable information about women's health issues. Nonetheless, *The Hysterectomy Hoax* does provide ample ammunition for women to challenge the notion that a hysterectomy is an inevitable solution to many gynecological problems. Undoubtedly, the demystification of this com-

mon misunderstanding about women's health is long overdue.

EARTH MUSE: FEMINISM, NATURE AND ART

Carol Bigwood. Philadelphia:
Temple University Press, 1993.

By Karen Birkemeyer

To say the least, this is a humbly written book that embraces some very big ideas. A potent articulation of art and non-fiction, Carol Bigwood's *Earth Muse* deconstructs and reconstructs the question of "woman," the "feminine" and "nature" utilizing the insights of existential phenomenology. *Earth Muse*, therefore, is important and ground-breaking (no pun intended): there are not many scholars who combine feminist theory with this field of philosophy, recasting it with a perspective it currently lacks. *Earth Muse* not only yields such a connection, but applies it to the current debate surrounding the joint oppression and sometimes joint celebration of women and nature. Thus, Bigwood provides a voice for phenomenology (thereby bringing it to a wider audience), further transforms feminism in the process, and loosely lays out a framework which deessentializes and thus enlivens the highly contentious claims of ecofeminists.

Chapter One, "Is 'Woman' Dead?" investigates the concept of "feminine presencing" as a means of subverting the phallogentrism of Western Being. For the most part, the focus of this section is on understanding the post-structuralist advocacy of gender proliferation as useful and cautionary in displacing the compulsory heterosexuality of western metaphys-