The History of Women in Orthopaedic Surgery and their Impact on the Field

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BACKGROUND

**Before 1600**
- The medical field lacked organization at this time and women worked with their husbands or alone in all occupations.

**1600-1800**
- Women's exclusion from medical schools continued due to their lack of professional education.
- Medical education at this time emphasized the musculoskeletal system.
- Bone setters continued to dominate the field despite the lack of professional education.

**1800-1900**
- Orthopaedic surgery became safer, but women continued to be excluded.
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**1900-1970**
- Orthopaedics as a professional specialty formed in 1933.
- Orthopaedic surgery became safer, but women continued to be excluded.
- Bone setters continued to dominate the field despite the lack of professional education.

**1970-Now**
- Following Title IX and the second wave of feminism, women increased in all surgical fields, but orthopaedics fell behind.

RESULTS

A survey was sent to all the members of the Ruth Jackson Orthopaedic Society in 2012, and 250 female orthopaedic surgeons filed it out. These results were derived from that survey data. Over 75% of survey respondents graduated in high school and beyond, compared to about 35% of women in the general population.

- Women finally break into professional medicine.
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METHODS

Data was obtained via the following methods:
- Close reading and analysis of the medical and historical literature.
- Oral history interviews with female orthopaedic surgeons.
- Preliminary survey of female orthopaedic surgeons who are members of the Ruth Jackson Orthopaedic Society.

PURPOSE

The purpose of my study is to document the percentage of women in orthopaedic surgery and determine their contribution to the field.

CONCLUSIONS

Menus have entered orthopaedics more slowly than one would expect in comparison with similar specialties of medicine. A number of barriers have been identified explaining this difference, including the historical exclusion of women to the "old-boys network" that resisted the entrance of women, the lack of exposure to orthopaedic surgery both in medical school and before, the limited number of female mentors and role models already in the field, and the reputation of the field as requiring strength, fostering a jock culture, and requiring an unbalanced lifestyle. Various other factors that facilitated women to overcome these barriers include the influence of strong independent mothers and a prior exposure to sports in high school.

In summary, women have entered orthopaedics more slowly than one would expect in comparison with similar specialties of medicine. A number of barriers have been identified explaining this difference, including the historical exclusion of women to the "old-boys network" that resisted the entrance of women, the lack of exposure to orthopaedic surgery both in medical school and before, the limited number of female mentors and role models already in the field, and the reputation of the field as requiring strength, fostering a jock culture, and requiring an unbalanced lifestyle. Various other factors that facilitated women to overcome these barriers include the influence of strong independent mothers and a prior exposure to sports in high school.

The ability to find a female mentor or role model in the field was the prevailing attitude for a very long time. The belief that orthopaedic surgery requires a degree of strength and stamina beyond the physical abilities of most women is an enduring myth.

"You pick what you love and you make it work for you because the lifestyle can be controlled (…) there are plenty of paths within orthopaedics where you can control your environment a little better." —Michelle James, MD

"I think [the slow recruitment] also has to do with this perception that for orthopaedics you had to be really strong to physically do what was necessary to take care of patients. That was the prevailing attitude for a very long time." —Casey Humbyrd, MD

"Some [residency directors] certainly made me feel that a woman in ortho was a real aberration." —Mary O’Connor, MD

"I believe that my athletic success was instrumental in my being accepted into an orthopaedic residency program. […] I believe my athletic success made me a more comfortable choice for men to accept into an ortho residency." —Mary O’Connor, MD

"The female orthopaedic surgeons might not have been my mentor, but definitely I looked at them and said ‘they are balancing it and they are very successful and they are driven and they have healthy relationships, I can do this too.’ I think having that and seeing that is a big part of being able to make those decisions." —Julia Smart, MD

"I have been told that ‘Women aren’t good surgeons, you’re just an exception.’ —Casey Humbyrd, MD

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