I was unprepared for the level of hostility that a discussion of the subtle biases inherent in the language, content and process of medical education seems to have provoked among CMAJ readers. Although these readers agree in principle that equality must be upheld, equitable practice is either ridiculed or denounced as a slight to our language or our profession. I am left wondering what a professional belief in equity actually means.

In a tongue-in-cheek manner Dr. Walters seems to be asking whether we really must launder the English language to eradicate all traces of sexism. The aim of the guidelines is not to delete words from the language, but rather to have educators and their students use the meanings behind the words to explore hidden stereotypes and biases. For example, the word hysteria has as its root the Greek word ἥστερα, meaning uterus. Rather than eliminating the word from use, students might have an interesting and useful discussion of whether the term implies that being female is the cause of this psychiatric disorder.

Dr. Cox’s point is well taken and illustrates how stereotypes can be subtly embedded and deeply held. Although at least 10 people read the manuscript before publication, none of us noted the error he spotted. The parallel terminology should read “a 40-year-old man who works as a professional” and “a 23-year-old woman who works as a medical secretary.” All of us hold cultural and social stereotypes that can limit our views and expectations of, and our communication with, others. I hope the concepts outlined in the article have helped some physicians recognize these stereotypes and either minimize them, or at least acknowledge them and their effect on teaching and practice.

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Brave new world of gender-inclusive language

The articles “Attitudes toward the use of gender-inclusive language among residency trainees” (Can Med Assoc J 1997;156:1289-93), by Dr. Gordon H. Guyatt and associates, “Medical curricula for the next millennium: responding to diversity” (Can Med Assoc J 1997;156:1295-6), by Dr. Christiane Kuntz, and “Gender sensitivity in medical curricula” (Can Med Assoc J 1997;156:1297-300), by Barbara Zelek and associates, contain a megadose of Orwellian newspeak. Gender-inclusive language and sensitivity are the mantras of the ’90s. We have reached the stage where an inanimate object replaces a human (oh, sorry — living) being, as when chair replaces chairman. This mongrelization of the English language is all but complete, all in the name of political correctness — a new form of totalitarian suppression of free speech.

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Letters