Not just a pretty face
Making the body beautiful: a cultural history of aesthetic surgery
Sander L. Gilman
Princeton University Press, Princeton, NJ; 1999

I read Sander L. Gilman’s *Making the Body Beautiful* for the first time on a five-hour flight from Toronto to Vancouver to attend the annual meeting of the Canadian Society of Aesthetic Plastic Surgery. It is a wonderful book, and I couldn’t wait to read it again. You need to read it twice to put everything in perspective. Drawing on expertise in Germanic studies, comparative literature and psychiatry, Gilman provides a comprehensive cultural history of aesthetic surgery. He is as comfortable discussing Nietzsche, Yeats and Darwin as he is the fathers of plastic surgery or the nasal anatomy of Bill Clinton.

Gilman opens the book with the statement that “in a world in which we are judged by how we appear, the belief that we can change our appearance is liberating.” Central to his thesis is the concept of “passing.” Aesthetic surgery can allow a person to “pass” in a desired social group. It changes not only the present but also the future, “overrides the genetic code,” and has been used on every conceivable part of the body.

“Passing” depends on many factors, including historical context, age and sex, and racial or ethnic issues. In earlier times, fat was perceived in some cultures as a positive sign of prosperity. By contrast, by the end of the 19th century it was usually perceived negatively, as a sign of poor health. Today the young and the old want to “pass” as slim and fit, and older people want to “pass” as younger.

“Passing” is often culture dependent. Breast size is cited as a classic example. Breast reduction has become commonplace among upper-middle-class Brazilian families to distinguish their daughters from the lower classes. “Brazilian breast reductions” are often given to young women as “sweet-sixteen” birthday presents, enabling them to “pass” as members of a more erotic cohort and find appropriate mates. By contrast, Argentinian women, who have the highest rates of silicone implantation in the world, are much more likely to pursue breast augmentation, fulfilling the “Spanish fantasy” of the large-breasted woman as the icon of the erotic. By comparison, standards of breast beauty in Europe shifted between the 19th and 20th centuries. Smaller breasts became associated with a new erotic image, enabling a woman to “pass” into the age of the “New Woman.”

Gilman’s many references to racial difference may seem somewhat provocative. Taken in context, however, they serve to emphasize the cultural determinants of aesthetic norms. Gilman relates that Israel has become the aesthetic surgery capital of the Middle
Food for the soul

Doctors afield
Edited by Mary G. McCrea Curnen, Howard Spiro and Deborah St. James
Yale University, New Haven, CT; 1999
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Nourishment and renewal are the themes of *Doctors Afield*. The stories in this book are told by an eclectic group of physicians who have excelled in the visual arts, music, literature, aeronautics, the spiritual life, government, academia, collecting, and fun and games. The least among the stories are merely informative and the best are masterfully written with powerful messages. Almost all are autobiographical, which gives them relevance and helps the reader see the interplay between medicine and the contributor’s parallel endeavour.

There are two biographical sketches that don’t fit the model: those of Carlo Levi and Gertrude Stein. Levi practised medicine, under duress, for only a short period long after his graduation. Stein failed obstetrics in her final year at Johns Hopkins and never graduated. Some people should never go into medicine, but this is not the book’s message. Thus I would have much preferred that those spots be given to a couple of star physician–writers who could reflect on medicine and creativity. That would have maintained the central theme and provided a much better counterpoint. So, the field in *Doctors Afield* is a little spotty, but there are some very fertile patches.

Eli Newberger is a pediatrician who does weekly sessions on the tuba with the New Black Eagle Jazz Band. He tells us about creative inspiration, the magic of improvisation and its prospect of mistakes. Mistakes in medicine can destroy lives, but in jazz improvisation they become a platform for new ideas and redemption. Eli’s music has the power to transport him into a state that is not, “strictly speaking, a conscious process.” We learn that the joy and release of his music enables him to deal in his professional life with issues such as child abuse and family violence.

In “A Prescription for Poetry,” internist Rafael Campo provides a window on specific medical problems versus much larger, more complex societal problems. While trying to concentrate on radiographs of a battered woman’s facial fractures he finds instead that he hears the soft, impatient tapping of her husband’s foot outside in the emergency room. “Poetry is there when the last of our gizmos and gadgets fail us; ... it helps us gauge that which cannot be assayed in the blood, to see what cannot be imagined.”

In “The Singing Endocrinologist,” Alice Levine tells us that early in her