

---

Peter L. Twohig. *Labour in the Laboratory: Medical Laboratory Workers in the Maritimes, 1900-1950*, Montreal, QC, McGill-Queens Univ. Press, 2005. 241pp.

There is an ironic and disquieting timeliness to this study which, although dealing with an earlier period, delineates issues which remain with us to this day. One need only consider recent controversies regarding the validity and availability of medical laboratory results in Newfoundland and problems related to pediatric forensic pathology in Ontario. Recall that the president of the Canadian Association of Pathologists complains of laboratories continuing to produce “a patchwork of inconsistent results.” It is obvious, therefore, that the development of medical laboratories, their staffing, and financial support are of more than academic interest.

Notwithstanding a slightly plodding tone, the volume under consideration provides valuable historical context to these matters. Based on archival sources and interviews it is primarily regional in focus but has strong implications for Canada as a whole.

Drawing on the sociological literature on work, occupations and professions it sketches the initially controversial integration of the laboratory into medical practice at a time when medicine was defined as much as art as science and physicians saw laboratory findings as competing with their clinical diagnoses.

Many of the events recounted are eerily familiar:

- Persistent low salaries led to a shortage of applicants and the problem of unfilled positions. The best qualified workers were difficult to retain because of what one of them called “the lack of a living wage.”
- Connected to this was the hiring of women who had fewer alternate employment opportunities available to them and were easier to relegate to a subordinate, institutional role. At the same time married female workers were frowned upon whereas married males were deemed more responsible.
- There were recurrent disputes over who should be responsible for funding the labs with the government attempting to force universities to assume the expense as part of their instructional role.
- Changing governmental priorities resulted in year-to-year variations in support levels (although one must admit that the great depression was a valid excuse for cutbacks).
- Jurisdictional fights among occupations and institutions interfered with the delivery of services.
- The formation of a professional association of technicians was dismissed by some senior personnel as “just a bunch of girls”.
- There was resistance by doctors to technicians going beyond the simple mechanics of lab procedures and involving themselves in interpretation of the results.

The fact that these issues can be traced to the very beginning of the modern era does not embolden us to anticipate their early resolution. Resistance to dealing with fundamental organizational issues leads, even now, to *ad hoc* solutions such as importation of medical personnel from the third world where

shortages are even more pronounced than in Canada. If women will no longer consent to be underpaid perhaps immigrants will do so as part of the price of entry.

Meanwhile, we should thank Peter Twohig for furnishing us with some of the historical background against which present strains on human resources in medicine stand out clearly.

**William Hanigsberg**  
Dawson College

---