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LETTER TO LADIES,

IN FAVOR OF

FEMALE PHYSICIANS

FOR THEIR OWN SEX.

BY SAMUEL GREGORY, A.M., M.D.,
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THIRD EDITION.

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TO THE LADIES.

THESE pages are addressed to you, ladies, because it is your welfare chiefly that they were designed to promote; and upon your influence and aid must depend, in a great measure, the success of the object recommended.

By a candid consideration of the testimony herein presented, you will, it is hoped, be induced to encourage the education of suitable females to share in the duties of the medical profession, especially those that pertain to their own sex.

This course will introduce among the female portion of the community, generally, a better knowledge of the means of preserving and restoring health — a knowledge which their own physical well being, and that of the race, demands that they should possess. By thus extending their intelligence and usefulness, in a sphere so peculiarly appropriate, they will not only enjoy the satisfaction of accomplishing greater good, but will strengthen their claims to honor and esteem.

Every one, who is at all acquainted with this subject, must be aware that great inconvenience and unnecessary suffering, mental and physical, result from confining this knowledge and these qualifications to male physicians, on account of the delicate relations which exist between the sexes, and the proper regard of which is indispensable to the best interests of society.

With a deep conviction of the importance of the object presented in these pages, it is earnestly commended to the favor and support of the intelligent, benevolent, and Christian women of the community, by

THE AUTHOR.

BOSTON, January 1, 1850.

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George 1900 Tuttle, #35

P R E F A C E

TO THE SECOND EDITION.

Great progress has been made in the cause of female medical education within the four years since the date of this letter. Institutions for the purpose have sprung up, and the object has become familiar to the public mind, and a matter of interest throughout the country. The New England Female Medical College, located in this city, and commencing its operations on a limited scale, in 1848, has become known as one of our permanent and important institutions, and, through the legislature, has received the sanction and pecuniary aid of the commonwealth. Many of its graduates are already reaping the rewards of their professional success, and it has become a settled question that the exercise of the healing art is henceforth to be a sphere of employment and usefulness for women.

The author deems it but a just and proper acknowledgment to say, that his confident expectations of the approval and aid of those to whom these pages were addressed have not been disappointed, and that this enterprise has been greatly indebted for its remarkable success to the influence and coöperation of many excellent and intelligent ladies. The written commendations and opinions of female authors and eminent teachers — Mrs. Sigourney, Mrs. Hale, Mrs. Willard, Mrs. Phelps, and others — have gone abroad, and done efficient service in securing public favor for the object; many have contributed pecuniary aid, and prompted others to do so, and the grant of five thousand dollars from the legislature is to be attributed in no small degree to the influence of the thirty or forty of the principal ladies of this city, who sent in their petition in aid of the petition of the directors of the institution.

With such proofs of their interest and influence the author, with renewed confidence, commends to the women of the country the cause of female medical education.

S. G.

Boston, September 12, 1854.

(4)

LETTER TO LADIES.

It is not a recent or hastily formed opinion on the part of the writer that there ought to be a class of females, thoroughly educated and qualified to act as medical advisers and professional attendants, in those departments of practice which relate particularly to their own sex—the daughter, the wife, the mother.

To show upon what grounds his convictions rest and to what credence his opinions may be entitled, it is perhaps necessary, and therefore excusable, to allude to the means he has had for obtaining information upon the subject and the measures that have been adopted to communicate that information to the public. It is the custom, and a very good one, too, for the graduating class in Yale College, whatever may be their prospective professions or pursuits, to receive some lectures from professors in the medical department of the institution. Under these circumstances, in 1840, the author, by the lectures and by reading, made himself somewhat acquainted with the subjects of anatomy and physiology and with the history and the principles of the healing art. From the interest thus acquired in these subjects, he has given to them more or less attention from that time to the present. It struck him as rather singular that the department of the profession termed *midwifery*—a feminine occupation, as its name implies—should be exclusively in the hands of males. But on further research it appeared that it was not so, to the

same extent, in any other country, and that in our own it was an innovation, dating back considerably less than a century, and was, moreover, seriously and strongly objected to by some of the most eminent medical authorities.

In 1845 the writer prepared a small work at the request of his brother, George Gregory, by whom it was published, on the unfavorable tendencies and results of some of the existing customs, among them the employment of men in the duties in question. The next year the same publisher, who is an indefatigable promoter of this enterprise, published another pamphlet exclusively upon this subject, entitled "Facts for Married Men." These two publications, being extensively circulated, served to enlighten and convince many and prepare the way for further effort. Accordingly, in July, 1847, the writer commenced preparing a work which should more fully present the question. He also in the following month, in this city, commenced advocating the subject of female medical education in public lectures to gentlemen, and separately to ladies. The work mentioned, the present title of which is "Female Midwifery Advocated," was published in the following January; since which time twenty thousand copies have been put in circulation.

This, with numerous lectures in various cities and towns, and the aid of many of the public journals, (for which the writer here expresses his heartfelt thanks,) has to some extent introduced the subject to public attention.

The demand thereby created for professional women required, of course, that something should be done towards providing a school for their instruction. A number of women were found to form a class; and, with the expenditure of much time and effort, a physician of suitable qualifications and of approved standing in the profession was engaged as lecturer; and the first term commenced November 1, 1848, and continued three months. The second commenced in April following. Twenty women have been instructed; and they have attended above three hundred cases of midwifery, and with the most satisfactory success.

A tenfold larger number of women might have been collected into the classes and instructed but for the want of the means to make the subject known to the public, to furnish the lecture room, and to carry forward the enterprise generally. In fact, to accomplish what has been done has required pretty much the entire sacrifice of the author's time and labor for the past two and a half years. But the way is in some measure prepared; a demand has been created; and, if a thousand women were this moment qualified, they would receive a cordial welcome and liberal encouragement in the cities and towns of New England alone.

Such is the increasing reluctance to call on gentlemen for these services that danger may be apprehended from trusting to ignorant and incompetent women if others are not provided. The following incident will serve as a specimen of the feeling that exists:—

The wife of a young gentleman, a member of one of the prominent families in this city, being about to be confined some months since, was unwilling to employ a man to wait upon her, and she feared that she should give offence to some of the medical friends by employing one of the professional midwives. In these embarrassing circumstances she asked her nurse if she would not officiate, so that it might appear accidental. The nurse shook her head, and said she would not dare to; she had, to be sure, been with physicians a good many times on these occasions, and, *having been caught* in two or three instances, she had had to manage alone; "but," said she, "that was vastly different from *taking* the responsibility." "Well," replied the heroic young woman, in a position infinitely more serious to her than was General Jackson's to him when he uttered a like expression,— "well," replied she to the nurse, calling her by name, "if you will stand by me, and do as well as you can, *I will take the responsibility.*" She did; and all resulted fortunately. The husband called on one of the medical friends and said to him, "Well, doctor, we have an heir at our house. The affair came off rather suddenly, and I believe is pretty much over;

but the folks would like to have you call in and see them, if you please." The physician called, and, having made proper inquiries, expressed his gratification, addressed the nurse by his own title, and took leave by saying, "All right: good morning, doctor."

Now, without any implied reflection upon those who do not take such responsibilities as this lady did, it must be allowed that she exhibited a most lovely and admirable trait of character; and any physician who should not be better pleased with it than with a *fee* ought not to call himself a medical *gentleman*.

One more example, from many others that have come to the knowledge of the writer. A slight and delicate young woman, in Augusta, Maine, whose friends thought from this circumstance that she must have a medical man attend on the occasion of her confinement, resolutely refused to consent, and said "*No*" to all their entreaties and fearful prognostics; and finally, to put an end to their unreasonable urgency, she very emphatically said to them, "If you bring a man into this room, and I have strength, when he comes in at one door I shall go out at the other." They then, of course, desisted; and she was carried safely through her trials by the matron, who gave me the fact. There is a promise in the good book — "She shall be saved in childbearing if she continue in faith, and charity, and holiness, with sobriety."

The Bible only declares, "In *sorrow* shalt thou bring forth children." This torture of modest sensibilities is a wicked and superfluous infliction, for which no sanction can be found in the examples or precepts of Scripture; no, nor in the customs of any nation of heathendom. It is neither Christian, pagan, nor human.

A book has been published on the women of the Bible; but it omits to mention some of them who are worthy of great commendation. The names of two of these are Shiphrah and Puah, who Dr. Clarke, the commentator, thinks were the instructors and superintendents of the "Hebrew midwives" generally. Pharaoh, it will be remembered, commanded them

to destroy the male children at birth. It could have been very easily done, when the faint spark of life is almost ready to go out of itself unless cherished into a flame. Possibly, if the attendants had been *men*, less sympathizing, courageous, and conscientious, they would have been terrified into obedience to the barbarous mandate; "but the midwives feared God, and did not as the king of Egypt commanded them, but saved the men children alive. Therefore God dealt well with the midwives, and the people multiplied and waxed very mighty."

Noble examples of true women, who rarely quail when duty and humanity call them to face danger; who have not only *fortitude* to *endure*, but *efficiency* to *act*, when occasion demands. These were women of the Bible, whose profession it would be most becoming and honorable for some of the Bible women of America to follow.

There is no other country in the world where females are so dependent upon the opposite sex for assistance on these occasions as in our own. Even the women of China, so low in the social scale, have the honor of managing these affairs. The women of ancient Greece enjoyed a like exemption from the meddlesome interference of the lords of creation. The Romans would not have been more startled to see Lucina, the patron goddess of childbearing women, haranguing the assembled gods or launching the thunderbolts of Jove than they would have been to see his majesty presiding in the puerperal chamber.

Let us now attend to the testimony of an eminent medical author, who speaks from great knowledge and experience, and who cannot be supposed to present any other than the most candid and truthful statements.

TESTIMONY OF DR. MEIGS, *of Philadelphia*. — Within two years past, two large works — "Females and their Diseases," and "Obstetrics" — have appeared from the pen of Charles D. Meigs, M. D., professor of Midwifery and the Diseases of Women and Children in the Jefferson Medical College at Philadelphia.

Though Dr. Meigs may not have intended to encourage the

medical education of females for the departments that come under his professorship, he has incidentally furnished proof of the urgent necessity of such a course, and has admitted its practicability by the high commendation he has bestowed upon foreign medical ladies of acknowledged eminence as authors and practitioners. His work on Females, &c., is in the form of a series of letters to his class after they had left the institution, and is written in so intelligible and interesting a style that females themselves might get the knowledge directly from its pages instead of obtaining it through the young gentlemen to whom it is addressed.

In his second letter, comprising "General Remarks on Conduct," the professor writes as follows:—

"The relations between the sexes are of so delicate a character that the duties of a medical practitioner are necessarily more difficult when he comes to take charge of a patient laboring under any one of the great host of female complaints than when he is called upon to treat the more general disorders, such as fevers, inflammations, the exanthemata, &c. So great, indeed, is the embarrassment arising from fastidiousness on the part either of the female herself, or of the practitioner, or both, that I am persuaded that much of the ill success of treatment may be justly traced thereto.

"It is to be confessed that a very general opinion exists as to the difficulty of effectually curing many of the diseases of women; and it is mortifying as it is true, that we see the cases of these disorders going the whole round of the profession, in any village, town, or city, and falling at last into the hands of the quack; either ending in some surprising cure, or leading the victim, by gradual lapses of health and strength, down to the grave, the last refuge of the incurable, or rather the uncured. I say uncured, for it is a very clear and well-known truth, that many of these cases are, in their beginning, of light or trifling importance.

"All these evils of medical practice spring not, in the main, from any want of competency in medicines or in medical men, but from the delicacy of the relations existing between

the sexes, and, in a good degree, from a want of information among the population in general as to the import, and meaning, and tendency of disorders manifested by a certain train of symptoms.

“ It is perhaps best, upon the whole, that this great degree of modesty should exist even to the extent of putting a bar to researches, without which no very clear and understandable notions can be obtained of the sexual disorders. I confess I am proud to say that in this country generally, certainly in many parts of it, there are women who prefer to suffer the extremity of danger and pain rather than waive those scruples of delicacy which prevent their maladies from being fully explored. I say it is an evidence of the dominion of a fine morality in our society; but nevertheless it is true that a greater candor on the part of the patient, and a more resolute and careful inquiry on that of the practitioner, would scarcely fail to bring to light, in their earliest stages, the curable maladies which, by faults on both sides, are now misunderstood because concealed, and consequently mismanaged and incurable. In fact, what is there in the human body that can become disordered so secretly as to elude the exploratory powers of a well-educated medical man who is allowed to make the necessary inquiries ?

“ It is an interesting question as to what can be done to obviate the perpetuity of such evils — evils that have existed for ages. Is there any recourse by means of which the amount of suffering endured by women afflicted with peculiar complaints may be greatly lessened ?

“ I am of opinion that the answer ought to be in the affirmative; for I believe that, if a medical practitioner know how to obtain the entire confidence of the class of persons who habitually consult him, — if he be endowed with a clear perceptive power, a sound judgment, a real probity, and a proper degree of intelligence, and a familiarity with the doctrines of a good medical school, — he will, as far as to the extent of his particular sphere of action, be found capable of greatly lessening the evils of which complaint is here made;

and if these qualities are generally attached to physicians, then it is in their power to abate the evil throughout the population in general."

Such are some of the difficulties which Professor Meigs terms "embarrassments in the practice." And he goes on to relate a case, with which he had just met, illustrating the point. A lady had suffered for twenty years with a painful disorder, and had been repeatedly subjected to mortifying examinations, which had not, however, till then, been sufficiently thorough to discover the true cause of suffering, on account of what he terms a fastidious delicacy on the part of the physician; and he adds, "I doubt not this lady might have been cured long ago had her malady been thoroughly understood."

These paragraphs contain a candid statement of the difficulties in question, and show the cause of a vast amount of unnecessary suffering on the part of females. The author asks, "What can be done to obviate the perpetuity of such evils?" And then, with manifest doubt and misgiving, and with many *ifs*, he states what he thinks may be an *abatement* of the trouble. But let all of his conditions be complied with, — let the physician be an *Æsculapius* in medical renown, a king David or apostle Paul in piety, morality, and gentlemanly deportment, — and that will not remove the objection, unless the race be restored to that moral position which knew no guilt nor shame nor required the drapery of fig leaves.

Indeed, it often happens that the more of a gentleman and a scholar a physician is, the more he is esteemed as a friend or an acquaintance, so much the more it increases and complicates the embarrassment. Hence many an estimable female, seeking relief from her distress, passes by the learned and respected physician, and commits herself to some unprincipled quack, *because* she neither regards him nor values his regard for her. Many young physicians dislike to locate themselves in towns where they were brought up and went to school.

I am aware that some affect to ridicule this inborn and indispensable sentiment by calling it *prudery, false delicacy, or fastidiousness*, as Dr. Meigs terms it; though in another paragraph he more justly and correctly speaks of it as a commendable degree of modesty, scruples of delicacy, of which he is proud, which evince a fine morality, and should exist though they prevent investigations necessary to the successful treatment of diseases.

The following paragraph, from the same author, illustrates still further the "embarrassments of the practice." It also contains an implied recommendation of midwives, and shows how very convenient it would be to have female physicians, if it was only to *assist* male practitioners in the investigation and management of female complaints. He is supposing the case of a young person entering upon womanhood, who should apply for advice on account of symptoms peculiar and painful, but not such as should at all indicate to the physician the precise cause of her trouble without an examination. "What," says he, "can you say, what do, what know? Is there any therapeutics for an unknown case? You can do nothing, know nothing, and you ought not to say any thing, except that you do not understand the nature of the malady, which it is, moreover, impossible to know without the taxis. Now, this is a terrible decision to come to as far as the poor patient is concerned; but it is not your fault that she is unfortunate in being so situated. If she will suffer the proper inquiry to be made, there can be little doubt of the ability to procure the needed information; and you cannot undertake to cure until you know what is the matter. Let them call a midwife, whom you can instruct as to the visit she is to make; or, if none such can be found, you can offer your own services for the occasion."

As the present system of medical practice has but little to do with *preventing* disease, and by such formidable obstacles deters females from availing themselves of its *restorative* blessings, we cannot wonder that they delay to apply till their complaints become incurable, or that medical authors

so sadly lament the inefficacy of the healing art so far as it relates to the female portion of the community.

Among other duties that now devolve upon the male practitioner is a very simple affair, of no uncommon occurrence, that could be managed by female physicians, and even by nurses and the patients themselves, as will be seen by the following advice of Dr. Meigs to his class. He remarks that the medical man should attend to it, "or, what is far better," says he, "leave a proper catheter in the hands of the patient, first instructing her to apply it for her own relief. There are many persons who could be trusted to do this little operation, which is a saving both to their own feelings and those of the medical attendant; for there is scarcely a more disagreeable operation to be performed—an operation which, I should think, every gentleman would be glad to commit to other hands than his own."

Notwithstanding this, there are not unfrequent instances, as the author *knows*, where men have been employed, and have rendered this service daily for weeks and months. Really, it is pitiful, and a reproach to the whole community, that the female portion of it, with all their education and intellectual elevation in other respects, should be so utterly ignorant and helpless in matters like these.

THE PRACTICE OF MIDWIFERY.—From the preceding remarks, I think it will appear that females should participate in the practice of medicine. It will now be shown somewhat more fully that they should be the chief actors in the department of obstetrics.

When we come to add to what Dr. Meigs calls "the great host of female complaints" the tenfold greater host of the ordinary and natural cases of births, all inconveniently attended by males, we see what an awkward and unfortunate state of things results from confining the knowledge of medicine and midwifery to men. It is embarrassing to the patient, and consequently attended with increased suffering and peril; it is embarrassing to the medical attendant, often constraining him to withhold needed services. Dr. Meigs says,

“ I have many times been kept out of my house all night, in order to be near a patient supposed to be in labor; and having been refused the privilege of making the examination until morning, after so tardy an admission of my request, I have been obliged to announce, not only that the patient was not in labor, but that she had not reached the full term of pregnancy by ten days or a fortnight. It is exceedingly vexatious thus to be baffled by the unreasonable backwardness of the patient to submit to an operation which she knows to be necessary and inevitable.”

The thought occurs, If this eminent professor, of above thirty years' practice, and justly enjoying the esteem and unlimited confidence of his patients and the public, finds so frequent vexations of this kind, as appears throughout his writings, how much greater the difficulties to be encountered by the multitudes of young men annually sent out from the medical schools of the country to take charge of these delicate departments of practice !

The objection to the employment of males in the ordinary duties of midwifery is strengthened by the disagreeable necessity that women are frequently under of employing several on different occasions, owing to removals, decease, absence, or engagement at the moment in some of the various duties of the general practitioner which are inconveniently connected with waiting upon ladies. A gentleman in Newburyport, whose family is not very numerous, stated to me that the advent of his children into the world had been presided over by *seven* different medical men. In a family of the author's acquaintance, now in this city, the same number of physicians have been employed in the capacity of midwife, (and no two on one occasion,) though there have been but nine children.

DISTINGUISHED FEMALE PHYSICIANS.— That women may become eminent as practitioners and medical authors there is ample proof. Professor Meigs, in his Letters to his Class on Female Diseases, speaking of a topic on which it is difficult for males to obtain information, says, “ I am ready to

pin my faith in this matter to the sleeve of a person better qualified to judge of it than you or I. I mean the late Madame Boivin, author of the *Memorial sur l'Art des Accouchemens*, long sage-femme en chef of the Maison des Accouchemens at Paris, and author of the admirable *Treatise on the Diseases of Women*, &c. Her writings prove her to have been a most learned physician; and, as she enjoyed a very large practice, her science and her great clinical experience, as well as her own personal knowledge, are more to be relied on than that of all the male physicians together."

Surely women of intelligence and philanthropy should take courage from this noble tribute to one of their sex, and believe the truth, that they, too, may become useful in the exercise of the healing art among delicate females and tender infants, and contribute also to the advancement of medical literature.

Madame Boivin, in her work on Midwifery, reports 20,517 births that occurred in her practice in the Hospital of Maternity.

Madame Lachapelle is another celebrated medical author and practitioner, "whose vast experience," says Dr. Meigs, "gained while at the head of the Maternité Hospital at Paris, is valid claim to speak as from authority, and whose thorough knowledge of the theory of midwifery must confirm those claims as rights." She reports as having occurred under her superintendence, from 1812 to 1820, 22,243 births.

Most appropriate for these distinguished persons is the term *sage-femmes*, (wise women,) given to females who pursue this honorable profession in France. How great their usefulness! — to have superintended the nativity of forty-two thousand human beings; to have comforted, cheered, sustained so many of their sex through their hours of fear and suffering as none but women can; for they have sympathies in common, a language and sentiments which seem to be made for the purpose; their sorrows and joys are the same. It is not the peculiar regard or the strong arm of a *protector* that

the suffering woman wants at such a time, but the sympathy and ready assistance of one like herself, to whom she can without reserve commit her thoughts, feelings, person. The compassionate devotion on the one hand, and the deep emotions of gratitude on the other, which are so strongly elicited in passing through these scenes of suffering and danger, are then, of course, wholly unmixed with those other sentiments with which the Creator has endowed opposite natures for different purposes—the protection, and not the invasion, of the sanctities of connubial life; to make, and not to mar, the bliss of the domestic relations.

The author is aware that this is a tender point, and that some may take it unkindly, however gently it is touched upon; but the testimony of medical authors, and many proofs that have come to his knowledge, show it to be a consideration of too much importance to be silently passed over in this connection. It is not the design of these pages to cast reflections and reproaches upon individuals of either party for that which the present custom sanctions and even commands, but to show that this custom is unnatural and wrong, and should give place to one which not only insures greater safety to life, but is in every respect unexceptionable.

The embarrassment and nervous agitation which even the sight of the medical man often occasions increase the duration and severity of suffering, and consequently the peril to the mother and infant. There is a fearful calamity which sometimes happens to the parturient woman, termed *puerperal convulsions*. Out of 16,416 labors under the care of Dr. Collins, superintendent of the Dublin Lying-in Hospital, one patient in 547 was attacked in this way. Out of 96,903 presented in statistics collected by Dr. Churchill, there was one case of convulsions in 609. In Madame Boivin's 20,000 and more cases, less than one patient in 1000 was afflicted with this alarming disorder.

Medical authors are not agreed as to the exciting causes of these attacks, which may occur in a very plethoric or a

very exhausted state of the system. Dr. Collins says, "I conceive we are quite ignorant as yet of what the cause may be; nor could I ever find, on dissection, any appearance to enable me even to hazard an opinion on the subject."

May not one of the causes be so simple and natural that these deeply scientific authors have overlooked it — viz., *female delicacy*, grievously shocked by the presence and personal attentions of gentlemen? Their statistics point to this as a cause. Dr. Meigs states that, of seventeen cases of convulsions in his practice, ten were those of women in their *first* confinement — the time of all others when their mental sufferings and embarrassments are the greatest, though their safety requires that they should be the least. Dr. Collins states "that, of nineteen cases of puerperal convulsions recorded by Dr. Joseph Clarke, sixteen were of females with their first children. Of thirty-six by Dr. Merriman, twenty-eight were first children. Of thirty by himself, twenty-nine were first children." These facts, in connection with the circumstance that in the very extensive practice of Madame Boivin a much smaller proportional number of such cases occurred, should have due weight in recommending the more natural and safe administration of females in these affairs.

The question will arise in the minds of some, How are females to get along in cases of extraordinary difficulty and when surgical aid may be needed? The eminent *sage-femmes*, Madame Boivin and Madame Lachapelle, did not need the aid of men even on such occasions. All manual assistance they could, of course, render with greater convenience and dexterity than male attendants; and equally skilful were they with the appliances of art. There is very rarely needed great physical strength; too much of it has ruined thousands. It fortunately happens that Nature, when not disordered or thwarted in her operations, never needs the aid of art; and but seldom even in the present degenerate condition of the race, especially when women, Nature's handmaids, preside. Out of the twenty thousand five hundred and seventeen cases of births under the care of Madame Boivin, only

three hundred and thirty-four required to be assisted — leaving twenty thousand one hundred and eighty-three children born by the unaided powers of Nature. Had she been obliged to give up to the surgeon every one of the cases of slight or serious difficulty, how grateful to this noble woman must have been the reflection that she had saved so many thousands of her sex from the mortification, ay, and humiliation, of being subjected to the *needless* interference of male operators!

Obstetric surgery will not necessarily devolve entirely upon female practitioners, though a sufficient number of energetic and resolute women could be found who would be competent for *all* cases; but there can be in every city and large town a sufficient number of this class of male surgeons who might be called on when needed; which will very rarely happen, if the professional women have the education and experience. This is said to be the course pursued in China; and it is to a great extent adopted among ourselves. The majority of physicians in Boston and other cities, having a very limited practice in midwifery, mixed with their miscellaneous duties, and feeling their incompetency to manage extraordinary cases, send for those who are more exclusively engaged in this branch of the practice.

Any thing requiring promptness of action — hemorrhage, for instance, which is considered the most alarming of the unfavorable accompaniments — can be managed as well by qualified females as by males. In cases requiring surgical aid, there is abundance of time to send for it. Medical authors advise the practitioner not to take his mechanical agents with him, as there will always be time to procure them, even in the most urgent cases, as one writer remarks. Physicians, in such circumstances, take time to call in counsel: midwives can do the same.

It may be replied, that this plan will answer for the city, but never for the country. But in country towns women are now accustomed to rely much more upon each other, as it

would be unsafe to depend wholly upon the uncertain arrival of the physician, who might be in some distant part of his extensive professional jurisdiction, administering to the halt and the lame, the bruised and the broken, the sick and the dying. As midwives could live on a smaller income, there could be a larger number of them and more conveniently located. These would be the familiar advisers and instructors of those who might consult them; and thus this knowledge would become diffused among the female portion of the community generally.

There is no reason why *all* women should not possess the little knowledge and ability which would enable them to render their sex needed assistance when a professional person is not at hand. There is now such a lamentable ignorance upon this subject, and women are such a profound mystery to themselves, that the most foreboding anxiety takes possession of the minds of many for months previous to their time, lest the doctor should fail to be there or should arrive too late. And well it may be so; for, in his absence, numberless mothers and infants have miserably perished, surrounded by a room full of terrified and useless women, any one of whom ought to have been able to save them.

Many physicians, from having often been witnesses of the helplessness and groundless alarms of the women present on these occasions, have doubtless come to the honest conclusion that the sex is so deficient in ability as to be incapable of managing such responsible affairs; whereas they should rather blame themselves for having taken from women their occupation, the knowledge, and the practice, and thus reduced them to such a pitiable condition. The change, then, in country towns and villages, so far from diminishing, will greatly increase the safety of those concerned.

But says one, "Female attendants cannot get about in wind and storm, night and day." Women will go where duty and humanity call, — to the frozen shores of Greenland or the burning climes of Africa, to the loathsome dungeon or the battle field, — not only as angels of mercy, but

sometimes, as the noble Hungarian ladies, as ministers of destruction to their country's foes. So far as relates to this profession, they do go now, in city and country, as nurses or *second* assistants. Let them be qualified as *superintendents*, and they will be waited upon with more distinguished consideration.

Rev. Mr. F., in a town which the writer visited in Maine, remarked, that it was a source of sad regret and great affliction to his wife, in prospect of maternity, that it was necessary to have a gentleman attendant. He said if there had been any way to avoid it, any competent woman in his village, or had he known any in Boston for whom he could have sent, he should not have hesitated a moment in obtaining her. Such would be the feeling of every humane husband, possessed of a correct and delicate regard for his wife; and there will be ways and means for these doctresses to get about.

The following illustration of the point and the spirit of the last two paragraphs occurred since the publication of the first edition of this Letter. In the summer of 1851 the author was applied to by a gentleman of intelligence and influence, at the present time (1854) a member of the legislature of Vermont, from a town in that state bordering on Canada, who came to Boston expressly, as he stated, to engage a female physician to attend his wife in confinement. Several months after, in midwinter, the person engaged went on her distant professional visit, and performed her responsible duties with the highest degree of satisfaction to her employer, having carried the patient safely through her critical period; although two sisters of this lady had lost their lives in similar circumstances under the care of male physicians, and she was apprehensive of a like result in her own case. In December, 1853, the same professional woman a second time performed this journey of some 300 miles to attend the same lady, and with results alike satisfactory. This female physician has twice been called to attend cases in Newport, Rhode Island—thus having patients near 400 miles apart.

Perhaps the argument most relied upon against female practitioners is, that they have not the coolness of judgment and firmness of nerve requisite for cases of great difficulty. Let us look at this point. Suppose physicians were as ignorant upon this subject as females now are, they would then be easily alarmed and incapable of rendering efficient aid in a case of emergency, as young doctors often are, and non-professional gentlemen almost always are; so that the fact of being one of the stronger sex does not render one competent. On the other hand, if females had, in addition to their natural qualifications, the acquired knowledge of the physician, they would act with coolness of judgment and with efficiency.

In every accident or difficulty which can happen in the practice, the rules of action are plain and definite, and only need to be followed to insure the greatest possible safety. Two things will enable a weak man or a nervous woman to act with firmness and effect in trying circumstances; viz., 1st. To know just what to do; and, 2d. To know just how to do it. And to acquire this knowledge is not at all above or beyond the capacities of the female mind; but, on the contrary, it is in a measure intuitive with them, and something in which they can greatly excel.

But, says the objector, the midwife must be inferior to the physician, because she is not acquainted with all departments of the profession of medicine. Well, then, if it is necessary, let the *sage-femme* study medicine and midwifery three years or more. There is a surplus of twenty thousand females over the number of males in New England; and hundreds of them would be willing to devote any necessary length of time to qualify themselves for a useful, honorable, and remunerating occupation. It is the duty of the public and of wealthy individuals to *give* them the education, if they have not the means to obtain it, and let them use it for the good of their sex and the race.

But there are decided advantages in having a class of

women devoted exclusively to this department of practice, whatever may be the extent of their collateral knowledge.

Excellence in various departments is obtained by a division of labor. In the medical profession this is carried to a much greater extent in other countries than in our own. It is related, as an illustration, that a gentleman passing through the streets of Paris slipped down and broke his right shoulder. He was taken up and carried into the office of the nearest surgeon, who looked at him, and excused himself from operating by saying that he only attended to the setting of *left* shoulders.

This may be an extreme of division and subdivision of professional duties; but it is not more absurd than the opposite extreme that prevails among us, where the term *physician* is so very comprehensive. The following *sign* enumerates a very few of the duties that pertain to an American "doctor." This particular specimen may be a quack; but, if he is, he does not differ from the honored profession in respect to the *variety* of his accomplishments and his disposition to render himself *generally* useful. This medico-literary curiosity is taken from the Boston Post.

"*Queer Signs.*— The following is a *verbatim et literatim* copy of a sign which may be seen any day in the eastern quarter of this city:—

Consult
 Doctor
 Waller
 (Accoucher)
 On All Diseases
 Particularly
 Midwifery And Diseases of
 Women And Children
 Fevers And Agues
 Diseases of the Skin
 Bone Setting. Sore Legs
 Tooth Drawing
 Squinting Cured."

Add to this specification, clubfoot, consumption, corns, and cholera, — in short, “all diseases” which afflict mortals, male *and* female, — and you have an idea of a modern *accoucher*, as this son of *Æsculapius* styles himself.

Rather an incongruous and inconvenient vocation, which calls one in so many directions often at the same moment — requiring in every thing great hurry and despatch, tempting the impatient man of multifarious duties to terminate lingering labors by the stimulus of ergot or by instruments.

It is gratifying to learn from the following that there is an improvement in respect to the abuse of this timesaving drug, spurred rye, in one city at least. “The use of ergot,” says Dr. Meigs, “has very much diminished in Philadelphia in the course of the last ten or fifteen years. Few practitioners, when I was first engaged in business in this metropolis, were unprovided with a portion of ergot, which was given in almost every case of slow labor. The number of stillborn children, I doubt not, was greatly increased by this pernicious practice.”

The attendance of females, being more natural, would remove a common source of difficulty and delay. Dr. Dewees, of Philadelphia, states, in his work on Midwifery, that he was once called to attend a lady whose midwife was absent; and the moment he entered the room her labor pains ceased, and did not recommence till a fortnight afterwards. “Every *accoucheur*,” says he, “has witnessed a temporary suspension of pain on his first appearance in the sick chamber.” A physician in Woburn attended a lady; and, perceiving that his presence had a retarding influence, he very candidly told the friends that the best thing he could do for the patient was to go away and leave her. He did so, and the favorable result proved his absence the best of prescriptions. Mental emotions, operating through the nervous system, have a powerful influence, as Dr. Dewees justly remarks, in exciting or suspending uterine contraction. A physician in Weymouth, having expended much time with a patient, pronounced the birth impossible without the aid of art, and

started home for his forceps; but, before he returned, Nature, relieved from her embarrassment, had anticipated his services, and dispensed with his skill.

It has been urged in favor of retaining this practice exclusively in the hands of physicians, that they need the ordinary cases to qualify them to manage the difficult ones. Medical students will of course continue to study this branch, as they now do surgery, though some may never have occasion to set a broken bone; and if a physician should be called to render surgical assistance in obstetric cases, and was not so familiar with the minutæ of the art, the *sage-femme* would be present with her knowledge and practical skill, and both together would manage difficult cases better than they are now conducted. If the question is, whether this practice should be confined *exclusively* to males or females, the arguments greatly preponderate in favor of the latter.

The greater facility with which women can obtain this sort of knowledge, especially the practical part of it, must be obvious to every one. It is so difficult for medical students to *get cases*, that they often graduate with mere book knowledge, having little or no practical skill, unless they have access to a large hospital. And it seems rather cruel and revolting to take advantage of the poverty of women to make them obstetric *subjects*, in a hospital or out, for the education of young men in affairs which humanity and morality demand that women should manage among themselves. Females, during their course of education for this profession, could very conveniently and usefully attend with ladies thoroughly versed in the science and practice, and officiate under their direction. They would thus graduate much better qualified than are young physicians.

Some may ask, If there are such advantages attending the exercise of this art by females, why has the practice almost entirely passed into the hands of males, especially in our enlightened New England? Is it not the result of the progress of the age? All change is not improvement.

While society has made progress in most things, it has lost ground in many. The answer to the first question is this: While the various sections of the public have been absorbed, each in their own affairs and interests, the medical profession have very naturally been mindful of theirs; and of course they had no objection, so long as nobody else raised any, to letting women remain ignorant, and allowing this whole business, with the honors, and emoluments, and influence it confers, to slide into their hands.

The kings and autocrats of Europe, in the exercise of their paternal care, have made provision for the more dependent portion of their subjects; but in this country, the public, on whom devolves the duty of taking care of themselves, having omitted to provide the female portion of the community with any instruction upon this subject, and allowed all the practice to be taken from them, they have been growing more and more ignorant and helpless, as to their own affairs, from the landing of the Pilgrims to the present time. The following record will show how this subject was viewed by our ancestors, and what trouble one Dr. Rayus fell into by getting out of his "appropriate sphere."

We are informed, in the first volume of the "Collections of the Maine Historical Society," that the General Court, held at Wells on the 6th of July, 1646, "presented Francis Rayus, *for presuming to act the part of a midwife*. The delinquent, examined by the court, is fined fifty shillings for his offence; and paying the fees, five shillings, is discharged."

In the town records of Rehoboth, in this state, it is recorded that, on the 3d of July, 1663, the town voted to invite Dr. Samuel Fuller, of Plymouth, to come and reside and practise among them. "It was also voted and agreed that his mother be sent to, to see if she be willing to come and dwell amongst us, to attend on the office of midwife, to answer the town's necessity, which at present is great."

It appears that the good people of Rehoboth did not think it would at all "answer the town's necessity," in this latter respect, to have a male physician only among them.

Mrs. L. H. Sigourney, in her work entitled "Examples of Life and Death," thus speaks of Mrs. Ann Eliot, of Roxbury, wife of the "apostle to the Indians:"—

"Among the multitude of employments which a systematic division of time enabled her to discharge, without omission or confusion, was a practical knowledge of medicine, which made her the guardian of her young family. Her success in the rearing and treatment of her own children caused her experience to be coveted by others. In her cheerful gift of advice and aid she perceived a field of usefulness opening around her, especially among the poor, to whom with a large charity she dispensed salutary medicines. But her philanthropy was not to be thus limited to the children of penury. Friends and strangers sought her in their sicknesses; and she earnestly availed herself of the best medical works that she could obtain, to increase her knowledge and her confidence in its application." On the occasion of her death, which occurred in 1687, the town voted to erect a ministerial tomb, and passed a unanimous resolution, that "Mrs. Eliot, for the great service she hath done this town, shall be honored with a burial there."

In Blake's Annals of the Town of Dorchester is this record among others for the year specified: "1705. This year Died Feb. 6th Old Mrs. Wiat, Widow, being 94 years of age, having as a Midwife assisted y^e Births of one Thousand One Hundred & odd Children."

This was quite an extensive practice, considering the country location and the more sparse population at that time; but the following example, furnished from the author's native state, is somewhat more remarkable.

The account, which is contained in Thompson's History of Vermont, relates to Mrs. Thomas Whitmore, who, with her husband, went to the town of Marlboro', in that state, in 1765. It reads thus: "Mrs. Whitmore was very useful to the settlers both as a nurse and a midwife. She possessed a vigorous constitution, and frequently travelled through the woods, on snowshoes, from one part of the town to another,

by night and by day, to relieve the distressed. She lived to the advanced age of 87 years, officiated at more than two thousand births, and never lost a patient."

It is true that the less healthy females of our cities and populous towns, at the present day, may need more scientific assistance than did those "women of the revolution." And they will have such; for the female practitioners are to be thoroughly educated for their profession—what has never yet been done in this country. The artificial state of society, so far from being an argument in favor of male attendants, is the opposite. The patient is delicate in health, sensitive, nervous, especially at such times. So much the more need of avoiding all unnecessary annoyances. The terror and alarm thrown over the scene by the formidable parade, haunting the imagination for months beforehand; the shuddering ideas associated with the scientific and dignified surgeon, and the implements of his art, together with his ergot, inhalers, and bottles of oblivious ether or chloroform, and all the "meddlesome midwifery" of the present day, — surely this is enough to appall the most heroic woman and jeopard the life of one of ordinary "nerve."

The Princess Charlotte, of England, young and accomplished, lost her life in confinement with her first child, in 1817. She was attended by the usual parade of royal physicians and distinguished friends, with ministers of state and others assembled in adjoining apartments. "All this brought on," as a medical author writes, "anxiety of mind and excessive fatigue, followed by hemorrhage and convulsions, terminating in a fatal syncope, which all their united skill could neither prevent nor cure."

This event cast a cloud of sorrow over the nation. It was the theme of every tongue and the burden of every heart. An English gentleman, who was in London at the time, informed me that Mr. Hume, member from Scotland, declared, in his place in Parliament, that it was his candid conviction, that, if she had been spared the useless parade, and attended by a good Scotch midwife, she would have then been a living woman.

But to come nearer home. A clergyman who lived in this city at the time of the occurrence, three or four years ago, informed me that his wife, young and acutely sensitive, was attended on the occasion of her first confinement by a skilful and excellent physician; but, when she came to be subjected to the preliminary measures to ascertain whether it was likely to be a natural labor, it was more than her philosophy could bear. She burst into tears and sobbed like a child. Of course she was wholly disconcerted; the nerve force, which was all needed for accomplishing its appropriate office, was dissipated, exhausted. After some delay and a consultation of physicians, mechanical means effected what Nature's efforts might have done had they not been paralyzed — a healthy, well-formed woman as the patient was. In consequence of the extreme nervous excitement and the mental and corporeal suffering, inflammation and fever set in, and in two days she went with her infant to the grave.

O, ye mothers, who have delicate and carefully trained daughters, will you not do something to save them from such a trial, and, it may be, such a fate as this!

Thomas Moore, the poet, in his journal, as edited by Lord John Russell, under date of May 24, 1823, makes a memorandum of his wife's accouchement, speaks of the successful attendance of the midwife, and says, "The physician did not arrive till an hour after all was over, to Bessy's great delight, who has a horror of his being even in the house on these occasions."

A lady of great intelligence and moral worth, having perused the first edition of this Letter, communicated to the author the following case, with permission to use it, if he should wish, in a future edition:—

"*A Case.*— A lady of good constitution, nurtured in simple, industrious habits, and of nervous system under good control, approached her first accouchement. She was remarkably destitute of apprehension with regard to the event, and on terms of friendship with the gentleman physician who

was to officiate. When the time arrived, quite an array of friends surrounded her; and, having had no information or idea of the style of examination that was pronounced necessary, she felt a revolting and horror that it was impossible to subdue, and the vigorous action by which Nature was about to pursue her operation was suspended. Pains occasionally returned, but produced no effect, seeming to be spasmodic, and wasting themselves upon the system at large. Ergot was repeatedly and copiously administered. Eighteen hours passed, and the patient seemed to be sinking. Though in a bath of perspiration, coldness seized the extremities and sight forsook the eye. Then the physician hurriedly, and with great exertion of manual strength, used the forceps; and a very fine infant, weighing nearly eleven pounds, was brought into the world, but never breathed, its head having been fearfully compressed by mechanical force. There was here neither malformation, nor malpresentation, want of vigor, nor previous disease. The only cause that seemed assignable was the sudden overthrow and terrible revulsion of a long-cherished, deep-seated delicacy. Afterwards, when the same person had similar anticipations, it was her earnest prayer that she might be saved from the revolting intervention of men; and her only two living children were both happily born before the arrival of the physician."

A clergyman of this city remarked, in conversation, that a family in his society employed a distinguished physician as accoucheur. After some delay, he decided, in consequence of the pressure of other engagements, to use the forceps. He did so, and in a few days the mother and child were no more. The gentleman said the family had ever felt that it was an entirely unnecessary sacrifice of life.

But, to remove all doubt as to the existence and extent of the dangers which attend the present officious system of midwifery, some eminent medical authority from the Universities of Edinburgh and of New York will here be presented.

In a work entitled "A Comparative View of the State

and Faculties of Man with those of the Animal World, by John Gregory, M. D., F. R. S., Professor of Medicine in the University of Edinburgh, and First Physician to his Majesty in Scotland," is the following passage:—

"Every other animal brings forth its young without assistance; but we judge Nature insufficient for that work, and think an accoucheur understands it better. What numbers of infants, as well as mothers, are destroyed by the posterous management of these artists, is well known to all who have inquired into this matter. The most intelligent and successful practitioners, if they are candid, will own, that, in common and natural cases, Nature is entirely sufficient, and that their business is only to assist her efforts in case of weakness of the mother or an unnatural position of the child."

Dr. James Gregory, son of the author just quoted, and also professor of the Practice of Medicine in the University of Edinburgh as late as 1821, thought women abundantly competent to assist in childbirth, and strongly protested against the employment of physicians.

The following is an extract from a lecture by Gunning S. Bedford, A. M., M. D., professor of Midwifery and the Diseases of Women and Children in the University of New York, to his class of medical students, November 1, 1845:—

"Allow me, in the most solemn and emphatic manner, to caution you against an error which, unfortunately for suffering humanity and the honor of our profession, has too generally prevailed. I allude to the indiscriminate and unpardonable use of instruments in the practice of midwifery. If the grave could speak, how fearful would be its revelations on this topic! how monstrous the guilt of those who revel in innocent blood! No more than six weeks since, I was visited by a medical gentleman who had been in practice but a short period, and in the course of conversation the subject of operative midwifery was introduced; and he observed to me that he had enjoyed the best opportunities of becoming familiar with the use of instruments, for his pre-

ceptor had performed the operation of embryotomy on an average sixteen times a year! To you, gentlemen, an announcement of this character may appear a romance; but I have myself witnessed in this city scenes of blood sufficient to satisfy my mind that this is not an exaggerated picture; and I will take the liberty of citing one case, among several others now fresh in my memory, to show you that I do not speak without cause when I protest against the unholy acts of men who were intended neither by Heaven nor Nature to assume the sacred duties of the lying-in chamber."

The professor then proceeds to relate a case of thrilling horror—a piece of "atrocious butchery," to quote his own words. When he arrived in the room of the patient, "the perspiration of death was on her." "In her death agony," says he, "she supplicated me to save her, and said, with a feeling that none but a mother can cherish, that she was willing to undergo any additional suffering if she could only be spared to her children." After narrating the case, the doctor proceeds: "The question may now be asked, Why was embryotomy had recourse to in this case? I never could ascertain. There must have been some secret reason for it—the burning love, perhaps, which some men have for bloody deeds. There was no deformity of the pelvis; the head of the fœtus was of the usual size; and, as far as I could learn, it was an ordinary labor."

The professors of midwifery manifest a commendable degree of humanity in exhorting their pupils to beware of rash and hasty resorts to mechanical aid; but, so long as the absurd and unnatural practice of posting a man at the bedside in parturition prevails, so long instruments *must* be used. When Nature, shocked and paralyzed, cannot perform her office, her work must be accomplished by the poor substitutes of art.

But the sacrifice of life is not all. The shock to modest sensibilities, and consequent suspension of labor, frequently render necessary the countervailing force of ergot or the employment of instrumental or ill-adapted manual aid; and

from these result numberless injuries, which sometimes render the life of the sufferer miserable, and go to make up that "great host of female complaints," the vain attempt to investigate and cure which constitutes quite a share of the present medical practice.

Many ill-fated infants are by the same cause put in peril of life and limb. Conversing with a gentleman in East Thomaston, Maine, he called his little son, about six years of age, and wished me to place my hand upon his wrist, the cords and joint of which were rigid and almost useless; upon his arm, which had been broken, and healed with a projecting callus at the fracture; upon his shoulder blade, which was warped out of shape; upon his side, where was an indentation of several ribs,—all of which disasters he experienced at the dreadful hour of his birth. The gentleman said, that since that occasion he had employed a plain sort of a matron to wait upon his wife, and no trouble whatever had occurred. He was, as we might well suppose, most decidedly in favor of female assistants.

An army might be collected of poor, crippled, deformed creatures, to whom life is a burden instead of a boon, in consequence of their never having been born, but calamitously introduced into the world by the resources of science. Well may it be said of such, "Better is the day of death than of one's birth."

Multitudes of infants are now lost, who by more suitable assistance, or by none at all, might have been saved to become the joy of their parents and ornaments to society. A wealthy gentleman present at one of the author's lectures, in Boston, said that he employed one of the most celebrated physicians that could be obtained to attend his wife in three instances, and every child was lost. On the fourth occasion a female practitioner officiated, and there was much less inconvenience and suffering, and a living child, now a fine lad, in whom centre the hopes of his parents.

A person of great worth and influence in this city gave me an account of a case of disappointed expectations and

blighted hopes in this respect, instances of which are not uncommon, though, from the delicate nature of the subject and other reasons, they are wholly unknown to the public. The case was as follows:—

A young lady was taken in labor; and, though every possible assistance was rendered by the young medical gentleman who attended, yet after a long period of suffering the infant was born lifeless. This was a cause of extreme sorrow to the parents and friends—so much so, that in prospect of her second confinement the greatest anxiety was expressed that a similar misfortune might not occur. On account of the faithfulness and skill manifested by the young physician, his attendance was considered indispensable. His anxiety was increased by that of the friends, with whom he deeply sympathized; and of course he felt a heavy responsibility. The time arrived; and, to make assurance doubly sure, at the desire of both parties, the presence of an eminent professor was obtained. After a tedious and distressing labor, and considerable aid from art and operative skill, the child was delivered—alive! Pain and anguish were forgotten, and the most rapturous joy was expressed by the young mother, in which physicians and friends participated with the most lively sympathy and satisfaction. But alas! alas! the little one showed signs of distress and of ebbing life; and in consequence of an injury to the spine, discovered on a more careful examination, its brief existence was soon over, and unutterable grief as soon succeeded to transports of joy.

MIDWIFERY PRACTICE IN BOSTON.—The number of still-born children in Boston has been for the past few years something over three hundred annually. There are, of course, various causes of this absence or loss of vitality, some of them wholly independent of good or bad midwifery practice. But it is well known that many children are born lifeless in consequence of protracted, distressing, exhausting labors, occasioned by the circumstances before mentioned, and that many are destroyed by the various means used as substitutes for the natural powers.

In the author's work, "Female Midwifery Advocated," published two years ago, it was given as an opinion that three hundred stillborn children was a very large number for this city, and indicated an unsuccessful system of obstetric practice. It could be given only as an opinion, the whole number of births not then being known or registered; but we now have data by which to ascertain *comparative* results. The city registrar informed me, early in December, that efficient measures had been taken to ascertain and record the number of births in Boston in 1849; and it would amount to 4000, and might be something over. If we suppose it to be 4200, and call the deadborn 300, (to say nothing of the large number that perish in early infancy,) it gives one in fourteen. In 21,502 births in the Hospital of Maternity, in Paris, under a female superintendent, the number of stillborn was 783—a fraction over one in twenty-eight, or about half the ratio in Boston, where the proportion would have swelled this number of 783 to more than 1500.

The fatality to mothers,—the "childbed" cases,—it is probable, is proportionally as great as that of infants.

Some allowance should, perhaps, be made for the greater skill and more prompt assistance in a well-conducted hospital; but, on the other hand, it would seem that in this "new world," in the salubrious city of Boston, whose population is, to a great extent, made up from the healthy stock of the country, there ought not to be a greater mortality in the incipient stage of existence than there is in an old, luxurious, and effeminate city of Europe.

For some reason, the number of "stillborn," though recorded as usual in the bill of mortality at the office of burials, has for a year or more been omitted in the weekly reports through the newspapers, and in the Medical and Surgical Journal, where it has appeared for twenty years or more. On inquiring of the registrar the occasion of the omission, he replied, that he only knew that such were the directions. It would seem that it was a matter of as much interest and importance to the public to know how many human beings

perish at birth, as to know how many leave the world after a stay of a few hours, days, or weeks, and are reported under the head "infantile diseases." At any rate, there are as good reasons for it now as there have been in time past.

From the data furnished by the new registry of births, some other important considerations can be presented. There are three hundred physicians in this city: 4200 cases of midwifery would give them on an average fourteen each — not enough to make them adepts in the art; but, on account of the repugnance to employing young physicians in these duties, they have less than their share of cases, next to none at all, while the older and more celebrated are overwhelmed with applications; so that some cannot do justice to their patients for the want of skill, and others for the want of time. As the *age* would not be a matter of so much consequence to female practitioners, the business would be more equally distributed among them.

I am very well aware that the medical profession, in consequence of an over supply of members, has but a poor remuneration from all the duties that now pertain to it, and I regret as much as any one the inconvenience that may result to some physicians from restoring the practice of midwifery to females; but a measure recommended by so many and weighty considerations should receive the support even of those who may be temporarily discommoded.

Suppose, now, that these forty-two hundred cases of child-birth, instead of being attended by three hundred gentlemen, were intrusted to forty-two good women every way qualified for the office, — and surely Boston could furnish that number of females, of just the right description, to be educated and employed as sage-femmes, — one hundred cases in a year, or about two a week, would be a moderate practice without attending to other departments. They could, of course, devote ample time to their patients, and would never be interrupted by the miscellaneous duties of the medical practitioner.

The number of females being considerably larger than that of males, in consequence of the recruiting of armies and

navies, the loss of men at sea, and, in this section, the constant emigration, women need all the occupations for which they are adapted. So their performance of these duties, instead of being a loss of labor to the community, would relieve the widow and her children from want, and the relatives or the public from the necessity of sustaining hundreds and thousands of females who have both the ability and the disposition to support themselves if they could only have the opportunity.

But man, the lord of creation, has the world before him, and can choose his profession or pursuit—war, politics, agriculture, commerce, mechanic arts, mercantile affairs, (not excepting ribbon and tape,) and a thousand vocations and diversions; and, not content with these, he must wrest from the long-suffering and ever-yielding sex the more responsible and dignified of their duties, deprive them of the honor of presiding over the nativity of mankind—a calling which Heaven and Nature designed them, and them alone, to pursue.

There are said to be forty thousand physicians in the United States. Twenty thousand of these ought to give place to this number of women, and turn their attention to pursuits better adapted to their strong muscles and strong minds than is this waiting with ladies from two to twenty hours, and this simple, mechanical routinism of midwifery. Indeed, physicians of good intellectual and scientific attainments do consider it beneath their qualifications; and when circumstances permit they are glad to be rid of it, and devote themselves to departments better calculated to exercise their mental capacities.

In addition to providing for the self-support of twenty thousand or more women, this change would release that number of men, and secure to the country the benefits of their mental and manual industry—quite an item in our political economy and national wealth. Of course this very desirable change cannot be brought about so suddenly as to create any great disturbance in the established order of

things, even if the enterprise is carried forward with all possible vigor; so that physicians now in the field need not be greatly alarmed in prospect of female competitors.

There are probably three thousand young men annually assembled in the medical schools of the country. Let half of the prospective pupils turn their attention to other pursuits, and the same number of females be put in a course of training, and the proper division of professional duties will gradually be established between the sexes. If at first but a quarter of the male should give place to female pupils, (and there ought to be that number at least,) the change would be still more gradual. But, in fact, every one ought to wish that the whole business of midwifery could be immediately transferred to women; for every instance of the real or supposed necessity of employing a man in such a case is an unfortunate occurrence and one to be lamented.

There is not all the necessity which some people imagine for these severe trials of female sensibility. In the Southern States, the colored women perform these services to a great extent, and that without knowing the first letter of the alphabet. An editor of this city, during a temporary residence at the south, employed one of those natural Ethiopian doctresses to attend his lady in confinement, and with the most satisfactory results. A gentleman who had resided in Arkansas remarked to the writer that one of his neighbors there owned a famous practitioner of this description, who spent her whole time in riding from the residence of one planter to another, and was a source of quite an income to her master.

Thomas Ewell, M. D., of Virginia, a distinguished physician, honorary member of the Philadelphia Medical Society, and an eminent author, appeals to the ladies upon this subject in the following graphic and earnest manner:—

“In some parts of our country the negro women, feeling their ignorance, and fearful of harming their mistresses, hesitate in acting until they accidentally discover the powers of Nature: they then obtain great reputation in the practice of

midwifery, rivalling the most renowned doctors of the trade. They soon discover the secret that Nature does all the business, and that they have only to keep themselves quiet and pocket the credit of the operation.

“Indeed, considering the extraordinary facilities which Nature has provided for the birth of the humankind, considering the numbers who bring forth daily without suffering, it seems wonderful how so many ladies on these occasions can make such an ado about the affair, can so idly injure themselves with unhappy conceits, can apprehend any thing but the most fortunate termination of their case.

“But the cause of all such groundless fears may be traced to the arts and ignorance of designing persons. A thousand times more notice is taken of one little irregularity of the attendants than of the many cases Nature conducts without aid. This operates on the fears of the women; each considers that the worst may be her case; assistants at extravagant rates are sent for; and they pocket commonly very handsomely for the folly of the patient. I beseech you, for the sake of decency, of justice to your attendants, of charity to poor women, abandon such improper infatuation. Believe the truth, that, in ten thousand instances to one of the contrary, women can render you all proper assistance without the meddling of men operators. Their hurry, their spirit for acting, have certainly done more harm than all the improper conduct of women, of which they are so fond of talking.”

When physicians, whose own interests and that of their profession would lead them to sustain the present system, speak in this strong manner against it, women ought certainly to believe their testimony.

A SUCCESSFUL MIDWIFE.—The following inscription, taken from a gravestone in the Old Burying Ground, in our neighboring city of Charlestown, will show in what high esteem these professional women were held in this vicinity less than a century ago:—

“Here lyes Interred the Body of Mrs. Elizabeth Phillips, wife to Mr. John Phillips, who was Born in *Westminster*, in

Great Britian, & Commissioned by John, Lord Bishop of *London*, in the year 1718, to the office of a Midwife, and came to this country in the year 1719, & by the blessing of God, has Brought into this world above 3000 children. Died May 6th, 1761, aged 76 Years."

From this it appears that midwifery, in the true signification of the word, is no new idea in this section, no untried experiment, and that this movement aims at no innovation or revolution, but simply to *restore* this office to its natural and rightful possessors, in whose hands it was and ever should be.

A great change has taken place in the customs and manners of New England society since Mrs. Phillips's day. In reference to these matters, the order of ideas is directly inverted. There was then much less affectation of modesty. A whole town could exhibit so great a want of *refinement* as to put such a record as the above in a public place! Accompanied with true delicacy and purity of mind was an honest frankness, that called things by their right names. Neither prospective maternity nor midwifery, when alluded to, was considered an occasion for a smile or a blush; nor did the women deem it necessary to avoid observation by secluding themselves from the green earth, the sunlight, and the pure air of heaven for weeks and months previous to their confinement, to the detriment of their own and infant's health and future well being; but, when the important occasion arrived, they showed their *real* refinement by allowing no male intruders within the sacred precincts of the lying-in room.

Now all these things are changed; and a practice which our ancestors punished as an offence against propriety is glossed over with circumlocutions and French phraseology, and compliance with it enforced by the code of fashion.

Mary Wolstonecraft, in her vindication of the claims of females to some of the more responsible and remunerating duties of life, thus speaks upon this subject:—

“ Women might certainly study the art of healing, and be

physicians as well as nurses. And midwifery decency seems to allot them; though I am afraid the word *midwife* in our dictionaries will soon give place to *accoucheur*, and one proof of the former delicacy of the sex be effaced from the language."

MORAL CONSIDERATIONS.—This view of the subject has hardly been alluded to; but I should feel that one of the most serious and weighty reasons in favor of female physicians was omitted if this were passed over in silence.

It is not necessary to say that physicians, as a body, are an intelligent, honorable, and most useful class of men. Nothing is farther from the author's desires or intentions than to depreciate their worth in the estimation of the public, or to discourage sound and thorough medical education. Among the profession he has many valued friends and agreeable acquaintances, classmates and others. It is not that he regards their interest less, but the general good more, that he thus strongly urges this matter.

Far be it, too, from the writer to affirm or imply that there is not now a high-toned female delicacy in New England and the country; indeed, the assumed existence of such delicacy is the main ground of his argument. The good opinion he has of the abilities of his countrywomen leads him to believe that the object aimed at is not an impracticable one; and his faith in their good sense and elevated principles makes him believe that they will not be offended at, but will rather approve, the plain and faithful manner in which he has felt it his duty to present this subject.

The unfavorable tendency of the present system of medical practice, in a social and moral point of view, does not necessarily presuppose a want of virtuous, or even of religious, principle; for there is no one who cannot properly utter the petition, "Lead us not into temptation." When it is considered that a profession of forty thousand or more men in the country—not all of whose hearts can be reasonably supposed to be the shrine of probity—are obliged, from the necessity of the circumstances, to have the most intimate

and confidential relation to the female portion of the population, especially those in married life, it is impossible to doubt, even were proofs wanting, that it must be a source of not a little domestic unhappiness, wounded feelings, alienation, and sometimes the dispersion of an otherwise happy fireside circle.

The following, from the "Code of Medical Ethics adopted by the National Medical Convention in Philadelphia, June, 1847," will show how directly at variance is the medical with the moral code and the conventional forms of society. After speaking of the necessity of perfect frankness, both as to mental ailments and bodily diseases, lest concealment should prevent a cure, it says, —

"A patient should never be afraid of thus making his physician his friend and adviser. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences," &c.

A system of practice which renders it necessary to treat thus lightly that natural reserve which the Creator has implanted to be *observed* between the sexes cannot but tend to lower the general tone of delicacy and weaken the safeguards of public virtue. And who can say how much the employment of men, in services which women only should perform, may have assisted in causing the great deterioration from the Puritan morals of past generations?

Many clergymen — those who possess a reasonable share of general intelligence — understand the bearing of these things, and have felt it their duty to encourage and assist this movement to restore, or establish, a code of medical ethics more in harmony with the code of the Bible and Nature. They perceive that they have been laboring with indifferent effect as conservators of public morals, in consequence of having (according to the present system of medi-

cine) expended their efforts on chronic and incurable complaints instead of attending to causes and prevention.

Rev. Wm. Hosmer, editor of the Northern Christian Advocate, Auburn, New York, in speaking of the subject in his widely-circulated journal, in the following paragraph expresses his views of the evils and the remedy:—

"MEDICAL EDUCATION OF FEMALES.—An institution has lately been started in Boston under the patronage of the American Medical Education Society. From the circular of this society, forwarded to us by the secretary, Samuel Gregory, — a well-known lecturer and author of many valuable works, — we learn that 'the object of the association is to educate midwives, nurses, and female physicians.' This is a most laudable enterprise, worthy alike of the philanthropist and the Christian. There are hundreds of females in the country, who could in no other way be so useful to the world as by qualifying themselves for medical practice among their own sex. All who know any thing of the matter know full well that the modern practice of medicine too nearly overlooks the distinction of sex, and that there is no remedy for this evil but the medical education of females. Nature suggests it, reason approves it, and religion demands it."

The French, who, as it is well known, are not noted for being over-particular in relation to the ceremonies between the sexes, are altogether in advance of us upon the subject of providing their women with female attendants, as will be seen by the following paragraph from the Boston Medical and Surgical Journal of 1845:—

"INSTRUCTION OF MIDWIVES IN PARIS.—According to the new regulations regarding the instruction of midwives in Paris, it is required that they shall present testimonials of good character, be at least eighteen years of age, and able to read and write correctly the French language before they can be admitted to the clinical lying-in hospital. It is only after having diligently attended this institution for twelve months, and taken two full courses of lectures on the Theory and Practice of Midwifery, that they can present themselves as candidates for the degree."

Rev. Dr. Jenks, in speaking (in the *Comprehensive Commentary*) of the Hebrew midwives and of institutions for educating these professional women among the ancient nations, says, "The French government wisely support such schools at the present day."

According to L'Union Médicale of August 26, 1847, there were 480 licensed midwives in Paris. The French are certainly good judges in this matter, taking the lead, as they do, of all the world in medical affairs.

The editor of the Boston Daily Bee, who has resided sometime in Paris, speaks as follows:—

"We would call attention to a paragraph headed 'American Medical Education Society,' among the local matters, in another column. One cannot walk through a street in Paris without seeing the portrayed sign of a *sage-femme* with a young infant in her arms; and we have heard French surgeons of eminence say that, except in cases of great difficulty, females, properly educated, (as they are there,) were far preferable to male practitioners. No one who has the good of the community at heart should refuse his aid to this commendable undertaking. Liberal donations will doubtless be made."

But, not to rely upon French example alone, let us look at other European countries. The following is a translation of a diploma, the original broad parchment of which I have in my possession, having received it from the lady herself, now a resident in this city. She remarked that the king was accustomed to bestow some of his royal charities in sustaining annually half a dozen midwives in the institution. The certificates must have amounted to a great number by this time. The document indicates the custom in that noble and virtuous nation, Sweden.

"I, Peter Gustavus Cederschjold, physician and surgeon, professor of midwifery in the Medical and Surgical Institute and director of the General Lying-in Hospital in Stockholm, hereby give notice that Fredrica Wilhelmina Mellgren has this day been examined before the medical faculty, and has

given evidence of a very good knowledge and understanding of all the branches pertaining to Midwifery, and by this letter she is accepted as a practitioner, and has all the rights and privileges which the law gives for the exercise of this profession.

I therefore affix the stamp of the common Lying-in Hospital seal and sign. Stockholm, June 29, 1826. By authority of the Faculty.

P. G. Cederschjold.

No. 1233 Midwives' Certificate, for F. W. Mellgren.

A. F. Idstrom, Doctor of Medicine, and Adjunct."

It is the custom throughout Europe to educate women for this practice. John S. Crawford, M. D., of Galena, Illinois, in a letter to the author, dated June 20, 1849, and enclosing a remittance in aid of the object, expresses his cordial approval of the effort making in this city for the education of professional women, and adds, "This course has been pursued by many, if not all, of the Medical Schools of Europe for some years; and during the time of my attendance in the Dublin Lying-in Hospital, there was a class of females attending for instruction, to whom, as well as to the students from the 'Schools,' a Certificate or Diploma, of having attended three full sessions, was given, and an examination made of their competency to practise midwifery.

In Russia, as I am informed by a gentleman who has resided there, principally in St. Petersburg, ten years, the government provides institutions for educating females for this profession; and they are employed by all, from the Empress to the wife of the serf. The gentleman said he had occasion to employ one of them for his lady; he was much pleased that measures were in progress to provide female practitioners among us, and gave something for the object.

Rev. Dr. Baird remarked to the writer, that the employment of females in this office was the general custom of Europe; said he had stepped into an institution where a lady was lecturing upon the subject at the time. He expressed himself in the strongest terms against our system of midwifery, and said if his influence would aid this enterprise

any he would most cheerfully give it. He accordingly made himself a member of the society, and gave a strongly written recommendation of the object.

If the women of Russia and other European countries can manage these affairs, most certainly American, New England women can; for they are altogether better informed in other respects, and our system of female education is every year growing more solid and thorough.

ETHER AND CHLOROFORM.—In the author's work, published two years ago, the opinion was given, and sustained by the best authorities, that the use of these agents in childbirth was unnecessary and unsafe. Since that time proofs of this point have been multiplied. Professor Meigs, in his recent work, *Obstetrics*, says, "Having carefully studied the reports upon etherization and chloroformization, whether those in this country or those produced in Europe, I remain as yet unconvinced, either of the necessity for the method or of its propriety. I am a witness that it is attended with alarming accidents, however rarely. As to its employment in midwifery here, notwithstanding a few cases have been mentioned and reported, I think it has not begun to find favor with accoucheurs." In dentistry and surgery people had better do without these noxious influences on slight occasions; but in severe cases of surgery their judicious use is a different matter, as the injurious effects of employing them might be less than would arise from the shock to the system by the pain of amputations, the excision of tumors, and other formidable operations. A strong reaction has already commenced against the use of ether, chloroform, and all their modifications.

With regard to the "American Medical Education Society," it is proposed to have it incorporated by the legislature at an early day.* And it may not be thought un-

* The association was incorporated by the Massachusetts legislature the same year, 1850, by the name of Female Medical Education Society, and in 1856 its name and organization were changed to that of New England Female Medical College, the institution being previously conducted by the Society.

worthy of pecuniary aid from the state, and perhaps such assistance will be rendered, unless the public and individuals of wealth should anticipate legislative action on this point, and prevent the necessity of it. Certainly, no literary, scientific, or agricultural institutions can be of greater importance to the public weal than an establishment for qualifying midwives, and female physicians, to administer to the wants of women and children, and nurses for the responsible office of attending the sick generally. The Maternity Hospital, to be connected with the College, will not only serve for educational purposes, by affording the pupils practical knowledge, but will be a most important charitable institution for the accommodation of large numbers of *virtuous* poor women, who now have to pass their critical periods amid poverty and distress, in damp and unwholesome residences of the city.

The following very handsome and — so far as relates to the *object* — very judicious paragraph, is clipped from the Boston Post, of March 8, 1848. The editor having been present on the occasion of one of the author's lectures, remarks, "his lecture last evening, in the lower hall of the Tremont Temple, was fully attended by gentlemen, and his observations upon the impropriety and injurious effects of the present custom of employing males in the offices of midwifery were marked with sense, shrewdness, and discretion, and attended with general approval. His positions upon this subject, and upon others immediately connected with it, were logically enforced, and need only notoriety to be followed by a propitious legislative action. *Progress* is the watchword of the times, and when manifested in causes akin to this in substantial and practical good, none but the conventionally dull will regret it."

FEMALE PRACTITIONER IN BOSTON. — Thirty years ago Mrs. Janet Alexander, from Edinburgh, where she was educated for the profession of midwifery, was introduced into practice in this city, under the auspices of Drs. John C. Warren and James Jackson. She had an extensive and very successful

practice for twenty-five years, among the most intelligent portion of the community. It has been the pleasure of the writer to meet with many, and to learn of a still larger number of heads of families, among the wealthy citizens, who had employed this lady, and were therefore most decidedly and understandingly in favor of educating females for the office generally.

For some time after Mrs. Alexander arrived, as I was informed by her daughter, her prospects of success in this city were rather discouraging, and she decided to remove to New York; but a number of the influential ladies of the city immediately interested themselves, and made up a purse of \$1200 for her, and encouraged her to remain.

A clergyman remarked to me, that he had always employed Mrs. Alexander in his family, as had most of his society. He said that when she died, (in 1845,) it was a time of heartfelt mourning with all the women who had known her great worth and eminent usefulness. A lady, now acting as agent in this city for the Medical Education Society, reports that she meets with very many of the friends of this gratefully remembered woman; and finds not only them, but other ladies, with hardly any exceptions, most cordially in favor of the objects advocated in these pages. Many of the more favored in point of wealth, on giving their names and something *to help along*, kindly and encouragingly remarked, that when the plans were fully matured, their more substantial aid should not be wanting. No, the influence and aid of the ladies *cannot* be wanting; for it is woman's nature to be ever humane and benevolent, and "ready to every good work."

FEMALE MEDICAL EDUCATION.

OPINIONS OF EDITORS AND OTHERS.

It has always appeared to us that the education of females was not sufficiently extended in the direction which it is now proposed to give it. There are many diseases of women and children, and many cases of practice among them, in which a lady, well qualified by medical and surgical education, may be employed with every advantage; and the sense of propriety, that prevails in every well-regulated mind, would decide that the presence of a female practitioner is even more desirable than that of a man, however learned or skilful.

New York Observer.

There are a few self-evident propositions, and it would be questioning the common sense of mankind to doubt the general belief on these points. One is, that women are by nature better qualified than men to take charge of the sick and suffering; a second, that mothers should know the best means of preserving the health of their children; and a third point is, that female physicians are the proper attendants for their own sex in the hour of sorrow.

Godey's Lady's Book.

The importance of securing for women a larger sphere of usefulness, and the especial propriety and desirableness of qualifying them to practise the healing art among children and those of their own sex, will be admitted, I should hope, by all persons.

Rt. Rev. Bishop Potter.

I would express my conviction that the objects aimed at are of great moment, and call for the aid and cooperation of all intelligent and benevolent members of the community.

Rev. Edward Beecher, D. D.

We have long been persuaded that both morality and decency require female practitioners of medicine. Nature suggests it; reason approves it; religion demands it.

Northern Christian Advocate.

Fifty years hence it will be difficult to gain credit for the assertion that American women acquiesced, throughout the former half of the nineteenth century, in the complete monopoly of the medical profession by men, even including midwifery and the treatment of the diseases peculiar to the gentler sex. The current usage, in this respect, is monstrous; but its reign is near its end; the abuse begins to be discussed, and discussion will soon finish it.

New York Tribune.

In our opinion this enterprise should meet with the favor and support of every married man and woman in the community; for we believe that women can become as competent to the performance of the delicate duties of midwifery as men, and that they alone should perform them.

New Hampshire Patriot.

Whoever shall found a college for the instruction of female physicians, will do good service for his generation and race.

Christian World.

The object is an important one, and every reasonable man and woman must wish for its success.

Boston Traveller.

Progress is the watchword of the times, and when manifested in causes akin to this in substantial and practical good, none but the conventionally dull will regret it.

Boston Post.

The object is of great public importance, and must commend itself to general favor and support.

Christian Witness and Church Advocate, (Boston.)

This is one of the most important projects of the day for the improvement of the condition of women.

Zion's Herald and Wesleyan Journal, (Boston.)

Conservative as we are, we are fond of rational reforms, and in no one do we more rejoice than in this.

Hartford (Ct.) Courant.

We approve of female physicians, fully. On certain occasions a due regard for delicacy dictates that men should not be called in, if capable women can be procured. The employment of men as "midwives" is a modern custom, and one not to be commended.

Philadelphia Saturday Post.

We have long approved of this change, as no female the least refined can feel pleasant with a male attendant, especially in cases of extreme sickness; and often, no doubt, diseases of a peculiar character have been concealed, and death welcomed rather than exposure to the rude searching gaze of men. Reform is demanded, and we shall have it before long.

Portsmouth (Va.) Pilot.

The people feel that educated female doctors are a kind of "God-send," and they will employ them for the softer sex. It cannot be helped; the people will do it.

American Journal of Medicine.

Among the wise and benevolent projects which have been started in America, of late years, that of providing the means of giving to females a medical education, for practice among their own sex, has attracted my particular attention, and from the first moment I heard of it I gave it my unqualified approbation.

Rev. H. G. O. Dwight, Missionary at Constantinople.

It is unquestionable that in that great country, [alluding to this movement in the U. S.] and among a great people, reforms are in progress which, while they startle us by their magnitude, strike at the root of many social evils, and lay the foundations of improvements of which the universe will reap the benefits hereafter. — There can be no doubt that all classes of society would prefer to employ women in peculiar cases, — cases in which women must have the surest and easiest facilities for acquiring knowledge, — if there were conclusive evidence of their fitness for the task upon which always so much depends; and who will be bold enough to affirm, that if women were duly, wisely, and by system educated for the discharge of such duties, they would be incompetent to perform them?

Sharpe's London Magazine.