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# THE ACCOUCHEUSE

VERSUS

# THE ACCOUCHEUR;

A  
SERIES OF EXTRACTS

SHOWING

THE UNITED OPINION

OF

MANY EMINENT MEDICAL MEN, &c.

ON

## BOTH SUBJECTS.

Revised by a London Physician.

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1864

JOB CAUDWELL, 335, STRAND, LONDON, W.C.

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# P R E F A C E .



The following extracts from various authorities, on the present custom of employing male instead of female accoucheurs, speak for themselves.

The compilers have given to the subject much long and laborious investigation, and have come to the firm conclusion, that the balance of advantages, even in a *physical* point of view, is on the side of Females. The popular prejudice in England is doubtless strong on the other side, partly from a greatly exaggerated idea of the dangers of childbirth, and partly from the plan of employing midwives, having, to a great extent, gone out of fashion in the higher circles of English Society.

We think, however, that the following pages will show that the employment of women in this occupation has been according to Nature's law, and that it has yet to be proved that the infinitesimal portion of the human race, who, even now, employ men, have been any gainers by the change.

That women enjoy a natural advantage over men

in these cases is undeniable. Their hands are smaller and more dexterous, and their presence does not excite or worry the patient, whereas it is well known to all nurses that the arrival of the "doctor" often puts a stop to the labour, even for hours.

This causes delay and anxiety, if it does not bring on the very evils and difficulties, to avoid which, the patient and her husband have perhaps done violence to their feelings in calling in a male attendant.

Various objections are raised to these arguments. Many persons acknowledge that while in ordinary cases a woman may do well enough, yet that in cases of difficulty she will fail in nerve, and that it is impossible to know beforehand whether it will be a case of difficulty or not. To this we reply that we believe most women to have fully as much nerve as most men, and several cases have come to our knowledge, where even the ordinary monthly nurse, by her presence of mind and courage, brought about a happy result, when the medical man in attendance failed from nervousness; and the thoroughly-trained midwives among the poor in our great cities conduct the most difficult cases with perfect success, as will be seen in the extracts.

To expect that a midwife shall never err in judgment is to expect her to be more than mortal. It is, however, the opinion of numbers of the most eminent and unbiassed medical men, that fewer cases of "difficulty" occur under female than male superintendance, and that if the mistakes and blunders of male accoucheurs were as loudly trumpeted as are

those of midwives, (instead of being concealed through medical etiquette and *esprit de corps*,) the public would soon revert to the more natural practice.

We are also met by the objection :—“ But where are we to find competent women? We should much prefer to employ a female, but dare not trust any but a qualified person !”

In answer to this we would say that from some of the London Lying-in Hospitals, from the Maternity Hospitals, Edinburgh, the Lying-in Charities of Liverpool and Dublin, and numerous other sources, clever and experienced women, who have passed through a careful course of study, and received a diploma after due examination, annually issue. They may be found on enquiry in all our large cities, and in most of our provincial towns, and their practice is usually most successful.

Some, however, will still object that from distance, or other causes, they are unable to procure the assistance of one of these trained women; to them we would suggest another expedient—any monthly nurse of tolerable experience, can, after labour has set in, inform herself whether all is right, if it be, let her act entirely, as she will have no difficulty in doing; if she apprehend difficulty, let the medical man be in attendance, ready to be called in if required, or if the patient be timid, let him in any case be in readiness, still allowing the nurse to *act*. Surely no kind-hearted medical attendant, who is himself a husband and father, would object to this. If, during the convalescence, medical aid is required,

the patient would, as in any other illness, consult her physician.

We do not touch on the *moral* aspect of man-midwifery, though it involves much, especially in the case of medical students and young surgeons, that will not stand the light of strict investigation.

To any high-minded and philanthropic members of the Medical profession who may chance to read these extracts we would especially look for support. The confidence that is reposed in you, gives us a claim to ask not only your tacit, but your *active* help, to save us, as far as possible from everything which can be painful to our own feelings or to those of our wives and daughters. In the words of Dr. John Brown, of Edinburgh, quoted on a subsequent page:—  
“Let the profession look into this subject, honestly, fearlessly, and at once.”

## SELECT MEDICAL OPINIONS, &c.

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“The interest which is at this moment felt in everything relating to the intellectual development of woman, and the questions which all thinking men are asking themselves as to her present position in society, make the most insignificant facts of her past history valuable. We cannot regard the position of woman in regard to Medical science as a matter of secondary importance, or in any respect unworthy the most serious consideration of all who are interested in the future growth of society. It is true that woman entered this arena through a breach in its wall; for had not the opportunity presented itself for the uneducated woman to sustain, perchance assist Nature, in the most natural office of midwife, we should hardly have seen any petitioning for opportunities of culture so early as the time of Agnodike. Once there, she not only defended her own right with so much pertinacity and success that she has retained a certain sort of place in it until the present day, but she most vigorously assaulted and defeated many of the false pretenders of the other sex, who, as she had quickness enough to see, knew no better, and meant far worse than herself.

“That midwifery was originally in the hands of women alone, is a fact so apparent that even if history

were silent on the subject no one could deny it. While the agricultural interest was paramount, and the population of any country was thinly scattered, cases of great difficulty would be rare; and, as will be easily seen, a class of elderly persons accustomed to such duties would necessarily exist. It was in this way, and by a sacred fidelity to their painful duties, that the midwives of the early ages acquired a decisive position and influence. Not only the Sacred Scriptures, but all profane and classic authorities, Plato and Aristotle, Plautus and Terence, attest the fact that this practice was anciently confined to their hands. The obstetrical theory of Hippocrates may be thought to be an argument upon the other side; but its impracticability, and its very hazardous nature, strongly sustain our statement, and go to prove that it was never founded upon experience. In Egypt and Arabia, in Chaldea and Greece, in Persia and Rome, woman ministered to woman. Greece was the first country that developed anything like a medical science, or a medical school, and with this development unfolded also a spirit of exclusion and caste. \* \* \* \* \*

“Long after the fall of Rome women exercised this profession (midwifery) there. During the middle ages they alone practised it in France; and it was not till after the accession of Henry IV. that men laid claim to its privileges. How slowly it passed into their hands may be gathered from the fact that Weitts (or Veites) was burned alive at Hamburg in 1522 for having dared to assume the post of midwife. A century later midwifery is found to have passed into the hands of speculative physicians. The practical experience of the ages rested with women. There were no models, nor preparations, nor plates at that time, nor until thirty years after, calculated in any degree to supply the place of this. What, then, did the human race gain by this change? A rash theoretical *practice*, succeeded to patient attendance. . . .



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In Greece, Elpinike, the daughter of Cimon, and sister of Miltiades, is known to have pursued the same profession. So sacred was the position of a midwife, that, at this era, queens, princesses, and priestesses at the altar did not hesitate to perform its functions; and long after, at the court of France, when the purity of Joan of Arc was called in question, it was not a college of surgeons, but five women of the noblest blood who made the legal depositions consequent upon examination which wiped away the aspersion." \*

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"The name of Madame Boivin is well known to the faculty; it suggests to every mind a splendid success in the profession to which she devoted herself. Most of her works have been translated into German. She has herself translated elegantly; and eleven of her original memoirs are well known to the medical public.

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"It seems to us that women, above all, should be encouraged to the full use of whatever strength their Maker has given them. Is it not essential to the virtue of society that they should be allowed the freest moral action, unfettered by ignorance, and un-intimidated by authority? For if women were not

\* NOTE.—If it is not considered expedient to continue the old English custom of the "Jury of Matrons" in such cases, why cannot a qualified midwife give all the required information? and thus do away with the indelicacy of examination by a doctor. In the case of young women or girls who have been outraged, would it not be more consonant with their feelings, where such examinations become necessary, that justice may be satisfied, for one of their own sex to make such inspection, rather than to submit to it at the hands of a man? Surely a young female so placed must lose all self-respect; she must feel deeply humiliated ever after. This seems a very powerful argument in favour of women studying medicine, and should not be lost sight of.—Ed.

weak, men could not be wicked; and if women were sound and faithful guides, men need never be ashamed of their influence, nor afraid of their power.”—**HISTORICAL PICTURES RETOUCHEE BY MRS. DALL.**

Attention is earnestly requested to the following remarks, taken, by permission of the author, from the preface to the *original* edition of “*Horæ Subsecivæ.*”\* (First Series.) The talented and kind-hearted author, (Dr John Brown,) thus presents the subject to his readers:—

“There is one subject which may seem an odd one for a miscellaneous book like this, but in which I have long felt a *deep* and *deepening concern*. To be brief and plain, I refer to *man-midwifery*, in all its relations, professional, social, statistical, and moral. I have no space now to go into these fully. I may, if some one better able does not speak out, on some future occasion, try to make it plain from reason and experience, that the management by *accoucheurs*, as they are called, of natural labour, and the separation of this department of the human economy from the general profession *has been a greater evil than a good*; and that we have little to thank the Grand Monarque for, in this as in many other things, when to conceal the shame of the gentle La Valiere,† he sent for M. Chison.

“Any husband or wife, any father or mother who will look at the matter plainly, may see what an inlet there is here to possible mischief, to certain unseemliness, and worse.—Nature tells us with her own voice what is fitting in these cases,—and nothing but the omnipotence of custom, or the urgent cry of peril, and terror, and agony, what Luther calls *miserrima miseria*,

\* It is much to be regretted that in the last edition of this valuable work the publishers have reduced the value of the book by the omission of the original preface.

† A favourite mistress of Louis XIV.

would make her ask for the *presence of a man* on such an occasion, when she hides herself and is in travail. And, as in all such cases, the *evil reacts on the men as a special class*, and on the *profession itself*. It is not of grave moral delinquencies that I speak, and the higher crimes in this region; it is of *affront to Nature*, and of the *revenge which she always takes on both parties* who actively or passively disobey her. Some of my best and most valued friends are honoured members of this branch; but I believe all the real good they can do, and the real evils they can prevent in these cases, would be attained if, instead of attending, to their own ludicrous loss of time, health, sleep, and temper, some 200 cases of delivery every year—the *immense majority of which are natural*, and require no interference, but have nevertheless wasted not a little of their life, their patience, and their understanding—they had, as I would always have them do, and as any well educated, resolute doctor of medicine ought to be able to do, confined themselves to giving their advice and assistance to the *sage femme* when she needed it. I know much that may be said against this—ignorance of midwives, dreadful effects of this, &c.; but to all this I answer, take pains to educate carefully, and to *pay well*, and treat well these women, and you may safely regulate ulterior means by the ordinary general laws of surgical and medical therapeutics. Why should not “Peg Tamson, Jean Simson, and Alison Jaup” (vide Sir Walter Scott’s “Surgeon’s Daughter,”) be sufficiently educated and paid to enable them to conduct victoriously the normal obstetrical business of “Middlemas” and its region, leaving to Gideon Gray the abnormal, with time to cultivate his mind, and his garden, or even a bit of farm, and to live and *trot less hard* than he is at present obliged to do? Thus, instead of a man in general practice, and a man, it may be within an area of forty miles for his beat, sitting for hours at the bedside of a healthy woman

his other patients meanwhile doing the best or the worst they can, and it may be, as not unfrequently happens, two labours going on at once; and instead of a timid, ignorant, trusting woman—to whom her Maker has given enough of “sorrow”—being, in this hour of her agony and apprehension, subjected to the artificial misery of fearing the doctor may be too late, she might have the absolute security, and womanly hand and heart of one of her own sex.

“This subject might be argued upon statistical grounds and others; but I peril it chiefly on the whole system being *unnatural*. Therefore, for the sake of those who have borne and carried us, and whom we bind ourselves to love and cherish, to comfort and *honour*, and who suffer so much that is inevitable from the primal curse, and for its own sake, let the profession look into this entire subject in all its bearings, *honestly*, fearlessly, and at once. Child-bearing is a process of health, the exceptions are few indeed, and would, I believe, *be fewer*, if we doctors would *let well alone*.” — JOHN BROWN, M.D., *Fellow and Librarian of the Royal College of Physicians, Edinburgh*.

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## LETTER OF SIR A. CARLISLE,

(Late President of the College of Surgeons.)

TO THE LATE SIR ROBERT PEEL.

(From the TIMES Newspaper.)

SIR,—The high ministerial station which you deservedly occupy must often expose you to the various kinds of applications respecting the condition and management of our national institutions, and also to personal or partial interference about their several real or pretended interests. In all such instances you must perceive the fairness and the ultimate advantage of preferring direct information from the respective constituted authorities, of requiring advice from rival

institutions upon doubtful measures, and of regarding with jealousy the private communications of interested individuals. It is, however, reported that you are, at this time, beset upon the subject of introducing an ordeal for licensing man-midwives, by certain members of the London College of Surgeons, and that you are urged by popular men (whose wisdom and disinterestedness may be questioned,) to favour their scheme with your powerful influence.

As the prevalent vice of avarice may have some share in this professional movement, it is fit that you and the public should be acquainted with the probably concealed effects of granting the solicited privileges; and, for the reasons already given, I am induced to address you through the press.

Man-midwifery has only been practised in England during the last hundred years, and it was introduced as a French fashion. From the beginning it has been strongly opposed on the score of its indecency, by many distinguished and scientific medical men, and also, because the birth of mankind appears to them to be a purely natural process, so wisely ordered, that it very rarely demands any other aid than experienced mothers can safely give. Even so late as the illustrious mother of his present Majesty, that exemplary Queen was personally attended by good Mrs Draper, without difficulties or misadventures; whereas, the contrary result, under male management, in the fatal affair of the Princess Charlotte and her infant, will be long remembered.

If it should be asked why so many professional men addict themselves to a degrading vocation, it may be answered, that the practice of man-midwifery leads to unlimited power in every family, and thence to lucrative ends. Women, naturally timid, and ignorant of their own structure, are peculiarly exposed, during the most important office of their existence, to the persuasions or menaces of more knowing per-

sons, and they are thence easily made to believe that the natural and wholesome delays and pains of child-bed are within the control of medical or surgical art,—an assumption which is too generally acted upon, and with unvarying evil consequences; because it is a violation of the ways of nature. Man-midwives have continually alleged that ignorant women-practitioners commit many fatal mistakes, and now they present similar objections against unlicensed men. If, as I believe, the safeguards of child-bed are amply provided for by nature, and that not one instance in a thousand calls for any other help beyond what any moderately experienced woman can safely give, why are we to license adventurers, who may seek notoriety by desperate acts, often involving manslaughter — operative acts, the moral propriety of which is very doubtful, and the time and the methods for performing them still subjects for rancorous disputes? But the present affair is not respecting the utility of man-midwives, but the impropriety of empowering any special corporate medical body to coerce the rest, to further impede female midwives in a becoming duty, and to deprive delicate women of that great source of self-respect. Already the prevalence of man-midwifery has driven country surgeons and apothecaries to adopt this humiliating office, and the number of women practitioners has been thence so reduced, that paupers are in many places delivered by apprentice boys under 16 years of age. The Royal College of Physicians in London, who rank the highest for learning and for decorum, have lately rescinded their admission of licentiates in midwifery, whether for considering the practice as derogatory to a physician, or as an overweening privilege towards females and children, is not avowed; but it seems that no London physician educated at Oxford or Cambridge, has yet condescended to be a man-midwife. The Royal Colleges of Surgeons in London, in Dublin, and in Edinburgh,

have likewise hitherto renounced every connection with man-midwifery.

The teachers of midwifery are indiscriminately doctors and surgeons, but at this moment the majority of lecturers and superintendents of lying-in charities are physicians, while a multitude of legally appointed sub-physicians (styled apothecaries) are equally entitled, with the other classes of the faculty, to establish tribunals for examining and licensing candidates for man-midwifery, if they should deem it expedient. Finally, it may be noted, that the different classes of man-midwives have never yet agreed among themselves to adopt a common ordeal for certifying the qualifications of their calling; and you may be assured, Sir, that many worldly interests will rage against the establishment of any monopoly of this kind in any single institution, because man-midwifery is the covert way to medical fortunes. If, however, the greediness of a few individuals should expose this subject to free discussion, and the judgment of married men and modest women should be copiously awakened, perhaps the general custom of employing women may be again resorted to, and their competent instruction publicly enforced.

It is said that our changeable neighbours at Paris are already tired of their fashionable freak, and when our countrywomen reflect that not one in ten thousand of their sex throughout the globe allow of the presence of a man during the rites of child-bed, they may acquire courage, and unite their efforts to replace the routine of midwifery among themselves. I will not offend you and the public by any observations upon the outrageous stories collected on this occasion to prove the violent and fatal injuries committed by unlicensed man-midwives, because I think the privilege sought for would increase those evils.

With the greatest respect, I have the honour to be  
 your very obedient servant,      ANTHONY CARLISLE.  
 Langham-place, Feb. 19.

“It is my firm opinion, that the practice, of man-midwifery compromises the character and morality of our country. It is demoralising to society, an insult to virtuous women, and a foolscap to men. If not checked and abolished, the pretensions to female modesty, and a respect for the decorums of society, will eventually be altogether excluded from the female character.”—SIR ANTHONY CARLISLE, *late President of the Royal College of Surgeons.*

“The physician takes it for granted, and even boasts, that if he can attend one single case of midwifery in a family, he has ever after secured their patronage; so that both interest and prejudice operate as barriers to any improvement or change in the practice, and although the most *fearful* consequences have, and are *still* occurring, modern females still cling to this unnatural practice.”

“I hesitate not to say that hundreds of women perish in childbirth from the employment of males, all of whom would have been saved if females had officiated. I would say to women everywhere that they owe it to the modesty of their own sex—to the principles of good morals—to their own lives—to the lives of their children, and the good of mankind—to set their faces against the present destructive, disgraceful, and unrighteous practice of employing, in ordinary cases, males instead of females as midwives. No man should ever be permitted to enter the apartment of a woman in labour, except in consultations and on extraordinary occasions. The practice is unnecessary, unnatural, and wrong; it has an immoral tendency.”—WM. BEACH, M.D. New York.

“The serious object of my present solicitude is, to wrest the practice of midwifery from the hands of men, and transfer it to women, as it was in the beginning, and ever should be. I have seldom felt a more ardent desire to succeed in any undertaking, because I view



the present practice of calling upon men in ordinary births, as a source of serious evils in child-bearing, as an imposition upon the credulity of women, and upon the fears of their husbands, as a means of sacrificing delicacy, and consequently virtue, as a robbery of many good women of their proper employment..... Several observing moralists have remarked that the practice of employing men-midwives has increased the corruption among married women. The mechanical advantage between a man's and a delicate woman's hand ought to command your decision in favour of employing and encouraging female attendance. I verily believe as much mischief as good has been done by them (men) as has been stated by more extensive observers."

"A thousand times you dwell upon the miseries of one sufferer, without thinking of the millions who happily and healthily pass the period of parturition. Away with your forebodings! Believe the truth, when pregnant, that, in all probability, you will do perfectly well; that the most ordinary woman can render you every needful assistance, without the interference of men-midwives. Their hurry, their spirit for acting, have done the sex more harm than all the injudicious management of midwives of which they are so fond of talking."—Dr. EWELL, a physician of 30 years' practice, in New York.

"Generally no active assistance is required until after the birth of the child, all that is required being that the attendant should remain an observant, though unofficious spectator of the process,—for no maxim in obstetric science is of more universal application than that the unnecessary assistance rendered with a view of expediting the termination of the case, or shortening the sufferings of the patient, is not only useless, but in the highest degree injurious, and directly calculated to defeat its own ends."—DR RAMSBOTHAM'S "*Obstetrics*."

“A good practitioner meets with very few difficulties; a bad one frequently creates as many as he could wish. By far the greater number of difficulties occurring in general practice are manufactured, arising from officious interference: thus it is that we learn those, who are in a state of nature, and perfectly uninterfered with by art, get better through labour, &c. . . . . The women (the Hebrews, Ex. i. 19.) had all easy, safe, and short labours, and why? only because they were left entirely to nature, and had no assistance; so that this we find, that in natural labour our object should be to put the woman as nearly as possible into a state of nature.” (Why do not the doctors make these truths generally known?)—Ed. “The London Practice of Midwifery,” &c., chiefly designed for the use of students and early practitioners. Sixth edition. With alterations, new sections, &c. By GEO. JEWELL, M.D. Senior Physician Accoucheur to the St. George’s and St. James’s Dispensary; to the Middlesex Dispensary, and General Lying-in Charity; lecturer on Midwifery,” &c.

“Nature is to be regarded as the sole guide; and where any person describes numberless difficulties that he has met with in practice, we may suppose that he either created the difficulties himself by mismanagement, or manufactured them while telling the story!”—*Ibid*, p. 161.

“Our first authority as to the simplicity of parturition and small amount of skill required in the vast majority of cases, shall be Dr Conquest, ‘one,’ says Dr Johnson, from whose book we quote, ‘of the most eminent of our metropolitan physicians.’ ‘Child-birth,’ says Dr C., ‘is that natural process by which the womb expels its contents and returns to the condition it was in previously. I call it a natural process, and, in my opinion, no sentiment is more pregnant

with mischief than the opinion which almost universally prevails, that this process is inevitably one of difficulty and danger.' . . . . .

"The ordinary treatment of women in childbed, is irrational, indefensible, and most preposterously foolish. Nothing can be more absurd. Child-birth is not a disease! It is simply the performance of a natural function, like eating, drinking, evacuation of the bowels, &c."—"Treatment of the Diseases of Women and Children," p. 125, by E. JOHNSON, M.D.

"Midwifery is an art foreign to the habits of gentlemen of enlarged academic education. The successful practice of midwifery requires no such laborious preliminary study as is necessary for the practice of medicine, else discreet matrons, and plain uneducated men in the country, who frequently arrive at great notoriety in this calling, would not acquire that credit which they often attain."—"Letter from the Royal College of Physicians to the Secretary of State for the Home Department, dated May 2nd, 1827, in reply to a memorial from the Obstetric Society."

"Midwifery is no branch of the medical art. Any one may practise it, as being the superintendence and assistance of what is generally a healthy natural function and from the necessity of the case. It is true that licentiates in midwifery are recognised by the Act, but they exclude no one else, and the nature of the practice is not altered."—NEW MEDICAL ACT, by J. B. DAVIDSON, Esq., *Barrister-at-Law*.

"Midwifery," says Webster, "is the art or practice of assisting women in childbirth. The term is derived from two Saxon words—*mead*, a reward, and *wife*, from the fact that the midwife was the person who received the present or reward for assisting at a

delivery, and attending upon her sister woman—a duty which, until a comparatively recent date, we find, in every country, performed wholly by females. In Egypt, Greece, Rome, as far as the earliest history extends, they were the sole actors.” “Childbirth, like parturition in the lower animals, is purely a natural process, the safety of which divine Providence has most wisely secured; and consequently it is always mischievous to *tamper with pregnant women*, under the pretence of hastening, easing, or retarding their delivery.”—SIR ANTHONY CARLISLE.

“All that is proper to be done in a case of *natural* labour (that is, a labour which terminates in twenty-four hours after it has set in, *without artificial assistance*), from its commencement to its termination, will suggest itself to any person of common understanding; and I have long laboured under the conviction that the office of attending women in their confinement should be entrusted to prudent females. There is not, according to my experience, and the reports of many of the most eminent Surgeons, more than *one case in three thousand*, that requires uncommon assistance. I am aware, however, that there are *crafty physicians who attempt, and often succeed in making the distressed and alarmed female believe that it would be altogether impossible to get over her troubles without his assistance.*”—DR MCNAIR, a Physician of forty years' practice.

“Medicine and midwifery are both domestic arts—woman is all but a born doctor. Ladies of England, think of this! Hitherto you have left the field of ‘labour’ to men who would be better employed with your distaffs and spindles. Mothers of England, you have a mission—fulfil it; proclaim to your daughters that the birth of a child is not a surgical operation, but a natural process, and that there is no case of parturition so difficult that it may not be better managed

by a well instructed woman than by a man, whose very presence in a sick chamber disturbs the uterine action, and causes the greater number of difficulties that occur in such cases. Whatever objections the apothecaries throughout the country may now find it their interest to adduce against the practice, this fact is at least certain, that all throughout the West, during the days of the Cæsars, and for many centuries after, women were the only attendants of parturient women. Then, as regards the East, who, let me ask, looked on at the birth of the Twelve Apostles? An oriental mother, even at the present time, would sooner die than seek the assistance of a man in her hour of travail.

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“One very great obstacle to improvement in medicine has been the very general preference given by Englishwomen to male over female practitioners of midwifery; for by means of that introduction, numbers of badly-educated persons not only contrive to worm themselves into the confidence of families, but by the vile arts to which they stoop, and the collusions and conspiracies into which they enter with nurses and each other, they have in great measure managed to monopolise the entire practice of physic in this country. To check the career of these people, Sir Anthony Carlisle wrote his famous letter to the *Times* newspaper, wherein he declared that the ‘the birth of a child is a natural process, and not a surgical operation.’ Notwithstanding the howl and scowl with which that letter was received by the apothecaries, it is pleasing to see that the public are now beginning to be aware of the fact that more children perish by the meddlesome interference of these persons, than have ever been saved by the aid of their instruments.

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“The ladies of this country should take a lesson from the American ladies, who not only prefer midwives of

their own sex, but actually employ female physicians. Female modesty and morality alike require that the diseases of women should be attended to solely by women; and all through the United States you now meet with regularly-bred female physicians, most of them having the degree of M.D. from a university, and many of them being in the enjoyment of large and lucrative practice. We have the pleasure of an acquaintance with Mrs. Dr. Longshore; she is a lady possessing a strong and original mind, close powers of perception and reasoning, and a thorough medical education. As a practical anatomist she has few superiors, even among practitioners of the sterner mould. Mrs. Dr. Longshore is 'a Friend,' and her whole character is marked by the excellences of the 'Friends,' or Quakers, as they are called. Placid, thoughtful, observant, full of sympathy, and governed by an active benevolence, she delights in doing good. Her practice is large, rapidly increasing, and generally successful, and she is devoutly attached to her noble profession."—S. DICKSON, M.D., London.

"The celebrated female midwife, Madame Boivin, is a doctor of Medicine of the University of Paris; she has written a book on Midwifery, which will compare with any that has yet been written on the subject by the most learned men in that profession. Many women who are now toiling as daily governesses might make handsome incomes as midwives. Their right has long been occupied by people who should be otherwise employed."—*Ibid.*

"Among the number of well-educated females who have such difficulty in obtaining a living, many with a very little instruction might do well as midwives. It is not the business of a man to be in a woman's apartment at such a time, except under circumstances which do not take place in one case out of some thou-

sands, and even for such why might not women be competently educated?"—*Ibid.*

"Madame Boivin, a female physician of some note, has published a work on midwifery, which is acknowledged to be equal to any work of the kind published by male practitioners. It is entitled, "Memorial de l' Art des Accouchemens." From that work the following is an extract:—"Moved and affected by the painful cries which mothers, victims of barbarity and ignorance, caused to be heard from far, the government hastened to reply to them by establishing a practical school of midwifery within the lying-in Hospital. From all parts were summoned not men, but women, to come and assist at the lectures of the most eminent professors of surgery and medicine. . . . . You will find in this edition remarks on certain cases of difficult labour, and on the operations practised in these cases, so brutally treated by practitioners in England; and in a manner so simple, and so happily different by us, especially at the school of midwifery at Paris."—HINTS TO HUSBANDS, by GEO. MORANT, jun., J.P., late Grenadier Guards.

"Feeling so deep an impression of the awful consequences of this outrage against propriety, this once, by law, "criminal offence," now a "fashionable custom," I became assured that if this same feeling could be largely imparted to the public, by presenting them with a selection of the same facts and arguments, in proper form, it would prove one of the best methods of hastening the abolition of this terrible abuse; and not only so, but by showing how men operators *make* the supposed necessity for their violent and cruel work, I should give confidence to woman in the Providence of Deity in her case, and help to restore her natural facility of labour by returning to the experienced matron her ancient and natural right to attend that

labour,—by introducing the midwife instead of the man."

"On the occasion of the birth of George the Fourth, the Queen, his mother, refused the assistance of the male sex. Mr Huish, in his "Memoirs of George the Fourth," published in 1831, relates, that 'Delicacy had, in those days so far the ascendancy, that the obstetrical art was chiefly practised by females; and on this occasion the Queen was delivered by Mrs Stevens, Dr Hunter being in attendance in an adjoining room, amongst the ladies of the bed-chamber and maids of honour, in case of professional aid being required.' And so in succession were all the numerous children of George the Third brought into the world, by the assistance of Mrs Stevens. Also our youthful Queen Victoria was brought into the world by a midwife, who having attended the Royal mother in similar circumstances abroad, attended her also in England on the important occasion. England hails the result!"

"Let the country contrast these happy, yet natural results with the lamentable and melancholy fate of England's former hope, the Princess Charlotte of Wales and her babe. Alas! that ingenuous and Royal female, in anticipation of becoming a mother, pleased herself with the fond idea of suckling her infant; 'and,' says Mr Huish, 'it was the cause of most poignant grief, when it was announced to her that, in conformity with etiquette, she would not be allowed the enjoyment of one of the sweetest occupations of a mother,' so little was a fatal termination of the interesting accouchement anticipated! She, too, with the same delicacy of feeling which influenced her august grandmother, expressed a wish to be attended by a woman; but Dr Baily (no doubt to secure Royal recognition of the MALE practice, in furtherance of the interests of the faculty) introduced Dr Croft. What



he was paid for this, deponent suggests not; however, Dr Croft, who certainly was considered the first practitioner of the day, after the fatal event, and after a similar fatal event, committed suicide! In that memorable and national circumstance so fatal both to mother and child, in the deplorable result of all that eminent surgeon-accoucheurs, physician-accoucheurs, or men-midwives could effect, what is to be seen but conspicuous proof that men with all their eminence, all their talent, and all their skill, may make sad work of the expectation of nations and the hopes of families? In these contrasted cases of Royalty are shown uniform safety and happy deliverance under woman's care; but death of mother and child, resulting from man-midwifery, stands out in the history of our country, like one of those awful sacrifices by which, at times, the world has been taught some important lesson—a sacrifice whose melancholy relics still remain conspicuous upon the sands of time, a monumental warning to all succeeding generations. In regard to this case a medical author remarks—'This scientific parade and useless number of attendants have been more injurious than no attendance at all. This was the case of the Princess Charlotte. It was in a measure the indecent presence of the ministers of state, who, with the Royal Physicians, are obliged by law to be present at the accouchement of a royal princess, that brought on that anxiety and excessive fatigue, followed by hæmorrhage and convulsions, and which terminated in a fatal syncope, which all their united skill, it appears, could neither prevent nor cure.' Great people are guilty of great absurdities! Had they omitted the royal levee till the child was born, and employed a patient and prudent old midwife, instead of surgeons and statesmen, doubtless all would have been well."—J. STEVENS, M.D.

“Now, the fact that midwives alone officiated for

more than 5,000 years," says Dr Gregory, "in all nations, and all the while the people multiplied and waxed very mighty, that, at the present day even, probably nine-tenths of the female population of the globe are attended by women, that in France and other enlightened nations of Europe, midwives are extensively employed, under the instruction and sanction of government, with the approbation and under the scrutinising eye of the greatest professors and instructors of the art, that we have had, in our country and in our day, those who have been wonderfully successful; the fact, I say, that all this is so, is proof that midwives can manage this business with safety, and to deny it is an absurdity!"—S. GREGORY, M.D., Boston, U.S.

"We have seen," says Dr Stevens, "while tracing the history of Man-midwifery, that it is of comparatively recent date, and that, women have been sufficient in all ages and in all countries to perform all that is necessary in parturition. Has labour, then, become more difficult, or have females lost that instructive knowledge with which nature endowed our ancestors? And has this departure from pristine purity been productive of good results? We have seen that it has not. The important question then is "Who shall officiate in parturition? This is so well answered by Dr Beach, the President of the Reformed College of New York, to which I have the honour to belong, in his admirable work on Midwifery, that I cannot do better than avail myself of the knowledge given me, to quote from the work: 'Who shall officiate in parturition? In consequence of the practice which prevails in the present day, this has become a grave question. The Physician contends with much zeal that it is his province to officiate. Females, he alleges, are incompetent, and these assertions of physicians have influenced the minds of females to such an extent, that they are forcibly impressed with the belief

that there are no others competent; and when it is proposed to many women to employ a midwife, they appear to shrink with horror, and many even suppose that in trusting themselves to the most accomplished female accoucheur, they jeopardise their lives. The confidence of females in the physician is so great, that it is almost impossible to effect a reformation in the prevailing practice in this respect. Notwithstanding, however, the existence of the above obstacles, we are well assured, that females if rightly qualified, are not only as fully capable as men, but are even more so; and, therefore, the most valid and conclusive reasons may be assigned why a reformation should take place in this department of the practice. What more conclusive than the fact of the actual attendance of women in childbirth in all nations, previous to the sixteenth century; and *the attestation of competent persons during the first century of man-midwifery to the fact, that not half so many fatal cases occurred before as after the innovation.* And, in the first settlement of this country (America), when females attended exclusively on such occasions, it was as rare a fact to hear of a woman perishing in child-birth, as it is now to hear of an Indian or an animal perishing in labour, who are delivered by the unaided powers of nature. But, in this age, it is quite common to hear of persons who die in child-birth, or from some of its consequences, either bleeding before, mal-practice at the time, or the subsequent use of some poisonous minerals. The advantages, therefore, vastly preponderate in the employment of females.’’

The following was copied from a gravestone, near Charlestown, in America, by Dr Gregory:—“Here lyes interred the body of Mrs Elizabeth Philips, wife to John Philips, who was born in Westminster, in Great Britain, and commissioned by John, Lord Bishop of London, in the year 1718, to the office of Midwife,

and came to this country in the year 1719, and by the blessing of God, has brought into this world 3,000 children. Died May 6th, 1761, aged 76 years."

An obituary notice in the "Boston Liberator" reads thus:—"Mrs Janet Alexander, died in Boston, September 15th, 1845, after an illness of nearly four months, aged 61 years. She was a native of Scotland, and was instructed in the theory and practice of midwifery by Dr James Hamilton, the celebrated Professor of Midwifery, in the University of Edinburgh. She received her diploma from him in 1817, and commenced the exercise of her profession on the ensuing Christmas Day, and for a period of more than 25 years practised among the most intelligent and respectable portion of the community, and was most singularly successful, having NEVER in any instance lost a patient."

"A lady, still in practice (in 1857), Mrs Elizabeth Mate, of Islington, has practised since 1827, first in the City-Road Hospital, where she delivered 101; her certificate was signed by Drs. Conquest and Liddersdale. She left there, being appointed to the Islington Lying-in Institution, early in 1828, where she continued until 1843, having delivered, during that time, 2012. Mrs. M. was attending, the whole of that period, cases for the parish of Islington, delivering for the midwife, who was unable for some years, from bad health, to attend the duties of her office. She was also, at the same time, midwife to the "Ladies' Compassionate Society," and the "Ladies' Philanthropic Society," as well as to the Finsbury Dispensary. Her private cases would surprise everyone. She frequently attends foreign ladies, especially those from the West Indies, &c. In 1846 she was appointed midwife to the parish of Islington, and has twice (without assistance) delivered two full-grown children joined together, in one instance joined by the sides, and in the other by the front part

of their bodies. Her cases are two, three, and sometimes four per day and night."

Summary of cases attended by Mrs. Mate :— (1857)

Private	3587
City-Road Hospital	101
Islington Lying-in Institution	2012
Parish of Islington	3278
Ladies' Compassionate Society	242
—— Philanthropic Society	51

9271

"REPORT of the Hotel-Dieu at Paris, when neither physician, accoucheur, consulting surgeon, nor surgeon was employed, but only women, in midwifery, and no instruments used :—

" Women delivered from, Jan., 1740, to Jan. 1, 1742, five of whom died, not from child-birth, but from mental and bodily disease ; one from the complication of a dropsy, the others from the shock of grief and shame at being deserted by the men who had brought them into that condition . . . . . 3743

Children still-born . . . . . 29

" Report of the London Lying-in Hospital, for 1829, with the aid of a physician, physician-accoucheur, consulting surgeon, and surgeon :—

" Women delivered from Jan. 1 to Dec. 31, of whom four died, and on four of whom were employed instruments . . . . . 377

Children still-born . . . . . 18

REPORT of the ROYAL MATERNITY CHARITY for 1856.

Births (attended by Midwives) . . .	3297
Women died . . . . .	2

Elizabeth Blackwell, one of those noble women who, braving the servile conventionalisms of the world with right and reason, morality and religion on their side, have triumphed over prejudice and bigotry, by firmly establishing themselves as female physicians—

in "An Appeal on behalf of the Medical Education of Women," after referring to the establishment and opening of medical schools for women in Philadelphia, Boston, and other towns of the United States, in the nine years since "the first woman was admitted as a regular student to a medical college and graduated with the usual honours," says:—"In all these places public opinion has expressed itself heartily in favour of the action of the colleges. The majority of the female graduates have entered upon the practice of their profession, and many of them have already formed a large and highly respectable practice. The intense prejudice which at first met the idea of a female doctor, is rapidly melting away. If further evidence were needed of the vitality of the new idea, and its adaptation to a real want in the community, it might be found in the character of the practice which has come to those physicians now most firmly established. Intelligent, thoughtful women, of calm good sense, who appreciate the wide bearing of this reform, and foresee its important practical influence, have been the first to employ the new class of physicians in their families, and encourage them with their cordial approbation."

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"Women are now so steadily pressing into the medical profession, that I have no need to direct your attention toward it; but I may say that it is much to be wished that women should devote themselves to the specialities of that science. Until within a very few years a Boston physician has been expected to understand all the ills that flesh is heir to; an eye-doctor, or an ear-doctor, or a lung-doctor must necessarily be a quack. Women are entering, in medicine, a very wide field. A few specially gifted may master every branch of practice; but many will undoubtedly fail from the want of *inherited* habits of hard study, of *transmitted* power of investigation. I wish those who are in danger of this would apply strenuously to one branch of practice; and a great success in any one

direction would do more for the general cause than a thousand competencies earned by an ordinary career. I do not suppose there is a city in the United States—and if not in the United States, then certainly not in the world—where, if you asked the name of the first physician, you would be answered by that of a woman.\* I do not complain of this; it is too soon to expect it. Colleges, schools of anatomy, clinical courses, have not yet been thrown open; and success, so far, has been mastered mainly by original endowment. Genius has held the torch and shown the way; but I want women to remember that, in this department, all the teachings of nature and experience show that they are bound to excel men. Let them, therefore, take the best way to accomplish it.”—WOMAN'S RIGHT TO LABOUR, BY MRS. DALL.

“\* I am happy to find, on the authority of the London *Athenæum*, that this statement was, when I wrote it untrue. Germany,” it says, on the 23rd of July, 1859—“Germany, has lost one of her most tamed and eminent female scholars. Frau Dr Heidenreich, *nee* Von Siebold, died at Darmstadt a fortnight ago. She was born in 1792, studied the science of midwifery at the Universities of Gottingen and Giessen, and took her doctor's degree in 1817, not *honoris causâ*, by favour of the faculty, but like any other German student, by writing the customary Latin dissertation, as well as by bravely defending in public disputation, a number of medical theses. After that she took up her permanent abode at Darmstadt, indefatigable in the exercise of her special branch of science and universally honoured as one of its first living authorities.’

“In the history of Southold, N. Y.—one of the oldest towns in the United States—it appears that women have practised there as ‘doctresses’ and ‘midwives’ from the first settlement of the country. From 1740 to the present time—more than 100 years—the town of Southold has had a trustworthy female physician. The first of these Elizabeth King, who practised from 1740 until her death in 1780, attended at the birth of more than *one thousand children*. The instance of so creditable a practice being maintained for a whole century by three women, stands alone, so far as I know, in this country. Mrs King probably studied abroad, and taught her next successor, and possibly Mrs Peck, who seems to have assisted both. That two of the women named should have practised forty years each seems very remarkable.”

“In a recent number of the ‘North British Review’ appeared an excellent article on ‘The employment of Women;’ under the head of women doctors, the writer says: ‘But the something practical—where is it?’ We believe that a great deal, which is very practical, is scattered over this article. But we have still some further suggestions to offer. Not very long ago, a statement ‘went the round of the papers’ to the effect that there were already eight diplomatized female physicians practising in Boston (U.S.), and that there were thirty-eight students in the Female Medical College. ‘Whenever,’ says an American writer, ‘there are sufficient data to establish the truth (now little if at all disputed in America), that child-birth is freed from its worse difficulties and dangers when the unnatural presence of men is dispensed with, the medical and surgical care of women and children will pass into the hands for which nature designed it.’ There would appear to be nothing very unreasonable in this, but, on the contrary, something extremely rational and hopeful. But see how the facts stated above are received by the faculty in England. The leading medical journal of this country thus comments upon them :—

“ ‘Female physic thrives apace in America. At Boston, where Columbia gave birth to the young Constitution, which is now sowing its wild oats broadcast, there is a female medical college, numbering thirty-eight students. A grant of government money has also been voted towards establishing a similar institution at New York. This is to be under the immediate superintendence of Elizabeth Backwell, M.D., late of St. Bartholomew’s, with a bevy of those spinsters mentioned by Shakespeare as free “maids who weave their threads with bones” for anatomical demonstrators.’

“At Boston, moreover, there are eight doctresses with diplomas in full practice. We suppose some of these



female physicians are married, and this involves a great social mystery, of which we have as yet received no account. When the Mrs. M.D.'s are attending to patients in their boudoirs of consultation, or pointing out pathological nicknacks in their anatomical drawing-rooms, or going their rounds with stethoscopes in their bonnets, what are their husbands doing? Do they superintend the perambulators, or are these hitched on to the professional broughams of their mammas? Is it a part of the husband's marital duty to manage the nursery—in short, to attend to the domestic affairs generally? Perhaps matrimony is ignored altogether. Indeed, we do not well see how a conscientious doctress could promise to love, honour, and obey a husband who might order her to give her patients a dose of strychnia all round.'

“Surely this is not the way to deal with so grave a question! Argument must be wanting, or the sneer would not be resorted to by so distinguished an authority. The same questions as are here put might be employed also to write down *any* description of independent female labour. When women go out to teach drawing or music, or when they attend to shops, or make caps and bonnets, gowns or mantles, what, it may be asked, are there husbands doing? Attending to their own business, if they have any, or living on their wives' earnings, Mantalini-like, if they have not. We do not mean to say that there are no practical difficulties in the way of the effectual working of this scheme. Objections will readily suggest themselves; but they are not insuperable objections. All women may not be fit for such work. *But all men are not fit for it.* Many women will lack the necessary amount of nerve; but *many men lack it also.* In difficulty and danger women have great presence of mind. They are often calm and collected where men are unhinged and unbalanced, and incapable of exertion. Women have

more tenderness and more patience, and they must necessarily understand many female ailments better than men. They will always have one great advantage over male practitioners—female patients will be more unreserved in their communications to them. Many women have been sacrificed to their delicacy—to their repugnance to state fully their ailments to men-doctors; perhaps even to call them in until it is too late. Let such objections as these be fairly balanced against those which may be adduced against female practitioners, and let us calmly consider the average result.

“We do not pretend to know, under the existing order of things in Great Britain, what proportion of children are annually brought into the world without the assistance of any male practitioner. But we know that in humble life it is very common to employ only a nurse or midwife. And we do not believe that, under such circumstances, more dangerous cases of parturition occur than where men are professionally employed. But if such were the case, if the number of deaths or injuries were proportionately greater, no argument could be derived from the fact against the employment of educated and diplomated women. If, in the present state of things, accidents arise from the absence of men, it is not on account of the sex, but on account of the ignorance of the practitioner. The same amount of knowledge, as indicated by the diploma, existing in both cases, we cannot help thinking that the advantage, in most cases, will be on the side of the female attendant.

“We might pursue this subject much further; but time and space have alike narrowed to a small compass, and we have by no means exhausted our notes. In the early part of this paper we have touched on the subject of nurses, but rather in connection with amateur than with professional labour. Many women of a better kind might find profitable employment in this path of life; and if licences, or diplomas of an inferior class,

indicating a certain amount of medical and physiological knowledge, were granted to them, the business would not be beneath the adoption of women of birth and education. But here again, perhaps the jealousy and selfishness of men would step in and thwart our efforts; for the presence of such educated nurses would often render it wholly unnecessary to call in a regular practitioner at all."—*North British Review*, No. LII., Page 333.

We have ascertained that a Charity, called the "Royal Maternity Charity," has existed for a century in London. The Report says:—"It was instituted, 1757, for the gratuitous delivery of poor *married* women at their *own habitations*. The patients are attended in their lying-in by skilful and well-taught midwives, (of whom there are thirty-five,) under the watchful superintendence of appointed physicians, by one of whom the midwives are first carefully instructed at the charge, and expressly for the service of this charity; and, being located in various parts of the metropolis, and not restricted, in the exercise of their profession, to the patients of the Charity solely, though such patients are, at all times and without exception, to have the preference, their services are available to any other persons, who, either from choice or necessity, may be desirous of employing a midwife instead of a medical man; and as these occasions are not rare, some of the midwives having from fifteen to twenty *private* patients per month, it is not among the least of the advantages incident to the establishment of the ROYAL MATERNITY CHARITY that it is the means of keeping up a class of respectable, intelligent midwives for such emergencies."—*The Office is at 2, Chatham-place, Blackfriars.*

"Notwithstanding all our affectation of superior delicacy, and our reprehension of the coarse manners of our ancestors, we suspect that they would have been shocked at the idea of the indelicate and unnecessary presence of a man in the sanctuary of the lying-in room."—"Plea for Physicians," *Fraser's Magazine*, March, 1848.