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FEMALE MIDWIFERY

ADVOCATED;

OR

THE EMPLOYMENT OF MEN TO ATTEND WOMEN IN CHILDBIRTH, AND IN OTHER DELICATE CIRCUMSTANCES, SHOWN TO BE A MODERN INNOVATION, UNNECESSARY, UNNATURAL, AND INJURIOUS TO THE PHYSICAL WELFARE OF THE COMMUNITY, AND PERNICIOUS IN ITS INFLUENCE ON PROFESSIONAL AND PUBLIC MORALITY; AND THE WHOLE PROVED BY NUMEROUS FACTS, AND THE TESTIMONY OF THE MOST EMINENT PHYSICIANS, IN BOSTON, NEW YORK, AND OTHER PLACES; AND THE EDUCATION AND EMPLOYMENT OF MIDWIVES RECOMMENDED;

TOGETHER WITH

REMARKS ON THE USE AND ABUSE OF ETHER, AND DR. CHANNING'S "CASES OF INHALATION OF ETHER IN LABOR."

BY SAMUEL GREGORY, A. M.

LECTURER ON PHYSIOLOGY, &c.

"I view the present practice of calling on men, in ordinary births, as a source of serious evils to childbearing, as an imposition upon the credulity of women, and upon the fears of their husbands, and as a means of sacrificing delicacy, and consequently virtue."

Thomas Ewell, M. D., of Virginia.

"I have long labored under the conviction, that the office of attending women in their confinement should be intrusted to prudent females."

A. McNair, M. D., Philadelphia.

"No man should ever be permitted to enter the apartment of a woman in labor, except in consultations and on extraordinary occasions. The practice is unnecessary, unnatural, and wrong—it has an immoral tendency."

W. Beach, M. D., New York.

"We should be perfectly satisfied to have any improvements in this kind of practice, and under no circumstances would we object to multiplying proper female midwives."

J. V. C. Smith, M. D., Editor of the Boston Medical and Surgical Journal.

"In the submission of women to the unnecessary examinations of physicians, exposing the secrets of nature, it is forgotten that every indecency of this kind is a violent attack against chastity; that every situation which produces an internal blush is a real prostitution."

Count Buffon, the celebrated writer on Natural History.

"I have ever believed that there would be a time when this sinful practice should be exposed and extirpated from the earth; and now, blessed be God, light begins to dawn on the subject. Success to the enterprise."

Rev. Wm. Millmore, New Hampshire.

"The French government wisely support such schools [institutions for the instruction of midwives] at the present day."

Rev. Wm. Jenks, D. D., Boston. — Comprehensive Commentary.

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P R E F A C E.

THE subject of the following pages is one of grave importance to the whole community. Within a few years a practice, at first considered an outrage against propriety, a criminal offence, has silently grown into a custom.

The introduction of men into the lying-in chamber, in place of female attendants, has increased the sufferings and dangers of childbearing women, and brought multiplied injuries and fatalities upon mothers and children.

Some of my remarks may seem severe, but they are intended only for those to whom they apply. I disclaim any design to cast suspicions on the character or conduct of worthy members of the profession. But still they are blamable, and will continue to be, so long as they countenance a custom which tends to destroy that scrupulous delicacy, that sacred reserve, which Heaven has ordained to be observed between the sexes.

So long as the public require the services of physicians as midwives, so long they must act in that capacity; and till qualified female practitioners can be obtained, women must submit to the unpleasant necessity of employing male assistants. It is natural that the most reliable aid should be secured for the hour of suffering and danger. If any of the facts and arguments in the following pages should seem to reflect too severely upon the female portion of the community in general, let it be kept distinctly in mind that these reflections are intended only for those *exceptions* to whom they properly belong. The author claims to have some just appreciation of woman's worth; and hence it is that he is laboring to restore her Heaven-appointed duties, her inalienable right, and reasonable independence.

From pretty extensive inquiry and conversation upon this subject, the author can safely state that ninety-nine *men* out of a hundred decidedly approve of this movement. Let, then, the women of New England and the land do themselves justice and they will speedily correct the present humiliating custom, will show themselves still competent for all the duties for which God and Nature designed them, will secure a self-reliance and dignity, and, consequently, a higher regard from all honorable men and true friends of woman.

S. G.

Boston, July, 1848.

FEMALE MIDWIFERY

ADVOCATED.

MIDWIFERY, according to Noah Webster, is the 'art or practice of assisting women in childbirth;' and according to Worcester, 'the trade of a midwife.'

The term is derived from two old 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 the delivery.

History of Midwifery.

This duty of waiting upon women in childbed, and affording assistance when necessary, was, till a comparatively recent date, performed wholly by females. In Egypt, to which the earliest records of science extend, they were the sole actors.

BIBLE HISTORY AND TESTIMONY.—From all the passages in the Bible, where midwives are mentioned or the subject is alluded to, it is certain that women only officiated on these occasions. Not because childbearing was attended with no sorrow and danger in those early days, for in the case of Rachel, it was a 'hard labor,' and she died; nor on account of this misfortune were the midwives thrust out of their office.

When Pharaoh commanded the 'Hebrew midwives' to stifle the male children at birth, 'the midwives feared God, and did not as the king of Egypt' commanded them, but saved the men-children alive.' The king sent for the midwives and questioned them; the excuse they gave could not have been satisfactory, but even this tyrant dared not invade their sacred office to make special inquisition. So the midwives, with true courage, did right and feared not. 'Therefore God dealt well with the midwives, and the people multiplied and waxed very mighty.' Yes, the people multiplied and waxed very mighty, and continued to do so for five thousand and six hundred years, not by the aid of male artists, but

under the administration of female midwives. Rev. Dr. Clarke, in his commentary on the above passage, says, 'The Hebrew midwives, Shiprah and Puah, who are here mentioned, were probably certain chiefs, under whom all the rest acted, and by whom they were instructed in the *obstetric art*.' Professor Bush remarks of the same, 'Plutarch says that some of the nations of antiquity had schools where females were taught the obstetric art.' And Rev. Dr. Jenks, editor of the Comprehensive Commentary, adds, 'The French government wisely support such schools at the present day.'

In the New Testament, promulgated after midwives had been in practice four thousand years, there is no intimation that men ever did or ever should assume this delicate office; but there is a passage which, after speaking of woman, and the transgression, and alluding to the physical degeneracy and suffering which followed, reads thus: 'Notwithstanding she shall be saved in childbearing, if she continue in faith, and charity, and holiness with sobriety.'—*Faith* in what? the 'accoucheur' and his recent inventions, or in the great Architect, by whom the human system was 'fearfully and wonderfully made,' and each organ adapted to the function it has to perform? 'And *charity*.' It can hardly be called charity, especially that charity which begins at home, for a woman unnecessarily to submit to a custom which, as will appear in the following pages, often proves the bane of domestic happiness. Nor is the present practice any peculiar mark of 'holiness with sobriety.' 'Doth not even nature itself teach?' says an inspired writer in reference to a matter much less important than this.

The fact that the teachings of the Bible are consistent with nature and philosophy, as well as essential to morality, and the fact that all the light which can be obtained from its pages is in favor of midwives, and not a word

to the contrary, should have peculiar weight with those who acknowledge its authority, especially with those whose *profession* it is to understand and explain it, but who, by their example, do very much to sustain the present unnatural and demoralizing practice. The Episcopal Church very properly prays 'for all women in the perils of childbirth;' but if they would first follow the teachings of Scripture and Nature on this subject, and encourage the employment of such assistants as were 'dealt well with' by Him to whom the prayer is addressed, and have a little more faith in the promise, 'she shall be saved,' on certain reasonable conditions, the petition would be answered with a *blessing*, instead of the moral and physical *curse*, which too often attends the meddling of men.

Common history, as well as sacred, is all in favor of midwives. The Greeks employed them. We are told that Phanarete, the mother of Socrates, was a midwife. Hippocrates and others make mention of them; and Plato speaks at large of midwives, and explains their duties. 'We have reason to believe that the obstetric art was altogether in the hands of women, the natural delicacy of females having reluctant recourse to the professional aid of the other sex. And indeed we are informed that such was the chasteness of the times, that the operation for lithotomy on the female subject was practised by females, and those too only who had been instructed as accoucheurs; and at Athens, the positive enactments of the law were insufficient to overcome their scrupulous modesty.' — *Denman's Midwifery, Francis's Edition.*

It is said that the Athenian doctors procured a legal enactment transferring the practice of midwifery to themselves. The women rebelled *en masse*, and declared they would die rather than submit to such an outrage. The consequence was, the law was speedily repealed; and since then no government has been so ridiculous as to *compel* such unnatural interference. Now, it cannot be doubted that American women are naturally as chaste and delicate as the Grecian ladies; but fashion and necessity have led and forced them into a custom repugnant to their natures and revolting to their feelings.

It appears from the quotation from Dr. Denman, that the women of Greece, in those days of comparative darkness, could perform surgical operations, — those too attended with great difficulty and danger, and requiring peculiar skill; certainly, then, our women,

with the present facilities for knowledge, can become qualified to manage at least the ordinary difficulties of *parturition*.

The Romans employed women only. Pliny, in his *Natural History*, speaks of midwives, explains their duties, and names some of great reputation. According to the Roman law, midwives were recognized as a distinct class in society, and enjoyed certain rights and immunities in common with the medical profession. Among the Romans, *Lucina* was the beneficent goddess who presided in the puerperal chamber. Had they approved of male assistants, they would doubtless have delegated the superintendency of their nativity to Jupiter, or Mars, or perhaps assigned the province jointly to Vulcan and Mercury — the first being a blacksmith, and the second an elegant waiter, and, withal, the most mechanical genius among the gods.

In China, as we are informed in the *Encyclopedia Britannica*, the matter is managed in this way: The midwives attend to all the ordinary practice; but there is a class of obstetric surgeons, devoted exclusively to this department, perfectly skilled in the use of instruments and the management of every possible difficulty. One of these is located in a particular district with a given number of inhabitants; and after a woman has been a certain number of hours in labor, the midwife is *required by law* to call in the surgeon — a very judicious arrangement; one that might be imitated with advantage in this country, especially in cities and large villages.

'It is certain that, till lately, all civilized nations have employed females only as midwives. This appears evident from their names, which in many different languages are all feminine. There were, however, especially in great cities, surgeons who applied themselves to the art of midwifery, and made it their peculiar study. They were sent for in difficult cases, where the midwives found their incapacity; and then the surgeons endeavored to deliver the women by having recourse to instruments useful in these cases, as by crotchets, blunt hooks, &c.; but as these cases happened but seldom, women remained in possession of this business.' — *Kendrick's Medical Dictionary.*

Origin of Man-Midwifery.

In conversation with a man, upon this subject, a few weeks since, he had not a very

good opinion of this movement; for his part he was willing to let his wife make her own complaint in the matter, and he thought it a preposterous idea, this attempting to put down a custom which had existed for ages, and was sanctioned by all classes of the community. 'Friend,' said I, 'how long do you think man-midwifery has been in vogue?' 'Ever since the days of Adam, for aught I know,' was the reply.

Now, as many are satisfied with the present practice, from similar ideas of its venerable antiquity and its universal currency, it may be well to present some information as to its origin and progress. It is true that it cannot be objected to the system, that it originated in the dark ages, or in the half-civilized nations of the earth, nor among the barbarous tribes of Asia, or Africa, or the Indians of America. No; none of these would so far violate nature and propriety, as to allow men to assume such an inappropriate office. Hence we find the origin of man-midwifery in an age of luxury and lewdness, and in a most licentious city and court.

Dr. Davis, of London, Professor of Midwifery, author of a large work on the subject, and a champion of man-midwifery, says, 'Many years have not yet elapsed since any part of the ordinary practice of midwifery has devolved upon the male practitioner. It is pretty generally known, that the Duchess of Villiers, a favorite mistress of Louis XIV. of France, was the first female who was induced to place herself under the exclusive obstetric care of a professor of surgery independent of any anticipated necessity for a surgical operation. That event took place in December, 1663; and Julien Clement, the fortunate attendant upon the case, was soon after appointed to the new and lucrative office of Midwifer to the Princess of France.'

Here, then, we have the origin; and it is worthy of the corruption and iniquity which have attended its progress. Our females, it seems, are following a fashion first set by a court prostitute of Paris, 185 years ago; and too many physicians, like the worthy Dr. Davis, seem to have uppermost in their minds 'the fortunate attendant' and the 'lucrative office.'

It seems that even this 'favorite mistress' had some modest scruples, for Dr. Kendrick remarks, in his Edinburgh Medical Dictionary, 'As she desired it might be kept a profound secret, she sent for Julien Clement, a surgeon of reputation; and he was conducted with the greatest secrecy into a house where

the lady was, with her head covered with a hood. The same surgeon was employed in subsequent labors of the same lady, and the princesses made use of surgeons on similar occasions; and as soon as it became fashionable, the name of *accoucheur* was invented to signify that class of surgeons. Foreign countries soon adopted the custom and likewise the name of *accoucheurs*, for they had no such term in their own language; but in Britain they have more generally been called *men-midwives*.'

Professor Davis, above mentioned, thinks that great advantages have been realized, 'since the ordinary business of obstetrics has ceased to be a monopoly in the hands of women.'

Now it is true that, in common with the progress in every thing else, great improvements have been made in the theory and practice of midwifery, within the last two centuries; and doubtless many of the improvements have been made in consequence of the introduction of men into the ordinary business of obstetrics, and more particularly their attention to extraordinary cases, and hospital practice. So too have philosophers and mechanics made various improvements in the modes and means of accomplishing other household duties, for instance, in cooking-stoves and other culinary utensils; but who argues from that the incapacity of women to use them, or that women should be thrust out of the kitchen, and men take possession?

So in regard to midwifery. Put women in possession of all the knowledge upon the subject, and let them use it for the relief of their sex and for the good of the race. If they could manage these matters so exclusively before the dawning of science, how much more now with the light it has afforded!

Dr. Davis speaks of the ordinary business of obstetrics having been a *monopoly* in the hands of women. What a heinous offence, that woman should ever have assumed so improper a calling, and even dared to monopolize it! Down with monopolies! But fortunately, the doctor thinks, this monopoly has ceased. Yes, and so, in many cases, as will appear, has the husband's monopoly over his wife ceased.

Dr. Davis prudently remarks, 'It may also be assumed as a matter at least of considerable probability, that a revolution so important and so recently effected may not even yet have fully completed its triumphs.'

A glorious revolution this! a war against

woman and chastity; a triumph over delicacy, and that shrinking, modest reserve, the safeguard of virtue and the charm of female character. A glorious triumph! such as a more gallant pagan would blush to acknowledge. The doctor's doubt as to the full completion of the triumph is very reasonable. To those who have not read the history of this great 'revolution,' it may be interesting to know what hard conflicts have been witnessed, and what uproar has been heard during this long and hard-fought war between the invaders and the defenders of 'certain natural and inalienable rights.' One more quotation then from the champion, Dr. Davis. 'The transfer of these duties from one sex to the other was not indeed effected without POWERFUL OPPOSITION, and without exciting a PRODIGIOUS CLAMOR.'

With such opposition and uproar has a partial triumph in a few countries been achieved. It has evidently been uphill work for the assailants. Inch by inch has the ground been disputed.

As a specimen of the hazards incurred by the early movers in this revolution, we are informed that one Dr. Vites, of Hamburg, having disguised himself in female attire, (a very proper one, by the way, for men-midwives,) succeeded in being present at a childbirth. He was, however, arrested, and, for this outrage against the laws of nature and propriety, was *publicly branded*.

It appears then that we permit medical gentlemen not only to perform, but pretty much to monopolize a business, to be a spectator of which once aroused public indignation, and branded the offender with infamy. Yet, contradictory as it may seem, we have some practitioners, and some patients, and some employers, so much more delicate and pure than the good people of Hamburg, as to be utterly shocked and ready to perform a swoon at the bare idea of exposing and correcting the pernicious custom.

The progress of the new order of things was very slow, having to encounter that natural sense of propriety which even custom cannot annihilate nor thoroughly subdue. This moral and physical *plague* first appeared as one of the court fashions of France. The court has gone and the fashion will follow. Adieu henceforth to Paris fashions.

The writer of the article 'Midwifery,' in Rees's Cyclopaedia, says, 'That the poor who could not, and those who from prejudice still refused to employ men, might reap the benefits of the improvements that have been

made in the practice of the art, no women are allowed to engage in the business, who have not been previously instructed by some public teacher, and who do not obtain from him certificates of their qualifications.' This is very humane, for the authorities to provide educated midwives for the poor and the scrupulous. Among us there are multitudes of this latter class who are obliged to employ *men* because we have not provided midwives, with that knowledge and those certificates which would at once insure confidence in their abilities, and give them the preference over men-operators. And for our rulers and the sovereign people, by this negligence and necessity, to force the fair demurrers to act against their delicate scruples, is worse tyranny than to compel Quakers, against their consciences, to take oath or fight the Mexicans.

If, by having educated midwives, the *poor* and the *particular* can 'reap the benefits of the improvements that have been made in the practice,' as stated in the above quotation, why may not the whole community reap the same benefits in the same way?

Neither the Puritans nor the other colonists brought over any *accoucheurs* with them. Indeed, the name had not been 'invented,' nor the thought conceived. And for more than a century after, such a personage was not known among them.

Dr. Shippen, of Philadelphia, was the first public lecturer on midwifery, in the United States. He commenced in 1762, with a class of ten pupils.

A Dr. Atwood was the first in the city of New York, who ventured to advertise himself as a man-midwife, in 1762.

The *innovation* commenced somewhat later in New England. In 1820, a pamphlet, entitled, 'Remarks on the Employment of Females as Practitioners in Midwifery, by a Physician,' was published in this city of Boston. The circumstances which gave rise to the pamphlet are peculiarly interesting in connection with this subject, and the document itself is a very remarkable one, of which some use will be made in the following pages; the history of its origin will also be given. At present the pamphlet will furnish a little information as to the *antiquity* of man-midwifery in Boston, where the profession were first in assuming and have been foremost in plying 'the trade of a midwife.'

'Among ourselves,' says the 'Physician,' 'it is scarcely more than half a century since females were almost the only *accoucheurs*. It was one of the first and happiest fruits of

improved medical education in America, that they were excluded from the practice; and it was only by the united and persevering exertions of some of the most distinguished individuals our profession has been able to boast, that this was effected.'

Add the time since that pamphlet was written, and it is about three quarters of a century 'since females were almost the only accoucheurs among ourselves.' It appears, moreover, from the latter clause of the quotation, that this war against women has been prosecuted with the same vigor, and the same 'united and persevering exertions,' here as in England. And it must be acknowledged, that remarkable success has attended the assailants; the heights of Cerro Gordo have been stormed, the capital has been taken, the opposing forces have been disarmed and dispersed; but, unfortunately for the full completion of the 'triumphs,' the enemy, though 'ignorant and incompetent,' are still unsubdued.

Whether the 'fruits' of excluding women from the lying-in chamber, and placing men in it, are the 'happiest' imaginable, the reader will perhaps be better able to judge when he has perused the following pages.

Having brought down the history of midwifery and man-midwifery to 'our times,' let us look at the practice of

Midwifery at the Present Day.

This business is the most thoroughly monopolized by the medical profession in England and her colonies, and in the United States, particularly the northern and eastern portions. Gentlemen who have lived in our southern cities state that it is as common there to see the signs of 'Midwives' out at the doors and windows, as it is here to see those of 'Drs.,' only not quite so near together. But *here* the influence against the sisterhood is so overwhelming, that they hardly dare to let it be known that they practise, and perhaps not a single one can be found by the aid of any Boston Directory, or Almanac. The poor women go about privately, as if they thought themselves out of their 'appropriate sphere,' or were ashamed of an office which Heaven and Nature designed them, and them alone, to fill. There is, however, a favorable omen: Soon after the agitation of this subject commenced in this city, last fall, some courageous woman ventured to advertise herself in some of

the daily papers as a 'midwife.' That's right, ladies; if you are competent for the office, out with your advertisements and your signs; for the number is increasing who wish to know where you are to be found.

While lecturing on this subject in this city last September, several gentlemen, after hearing the arguments in favor of midwives, inquired what ones I could recommend to them. The names of some in this city might here be given; but not knowing them all, but part could be given, and this might seem like partiality. One of them, moreover, who with the best of success attended in the family of my brother, the publisher,* last summer, cautioned me not to mention her name, as she was already overburdened with applications and engagements. She said she had attended more than a thousand cases during her practice, and had not had occasion to call in a doctor to assist in more than half a dozen instances in the whole number. Another lady practitioner remarked that, in a recent attendance in one of the wealthy families in the city, every thing having been conducted to the entire satisfaction of the wife and her husband, she named and received her usual fee. But the gentleman was so well pleased with her success and the idea of being relieved from the necessity of having a medical man about on such an occasion, that the next day, as an expression of his satisfaction, he sent her a fifty dollar bill.

IN FRANCE, where man-midwifery originated, and where, if it is an improvement, it ought to have been generally adopted, this is far from being the case, even in the city of Paris. It is true that Paris has produced eminent practitioners in the art, and authors on the subject, whose works have been translated into our language as text-books. But these gentlemen have generally been instructors or practitioners in public establishments. Madame Boivin and Madame Lachapelle have also had the management in the hospital practice, and they have each superintended in more than *twenty thousand* cases of midwifery. They have written valuable works on the subject, which English and American medical writers quote as the best authority. But we shall be told that these are exceptions, — female philosophers. It may be; but there are a sufficient number of *exceptions* to supply all the wants of the community.

According to 'L'Union Médicale,' of August 26, 1847, there are 480 licensed midwives in Paris. The permanent population of that city is something short of a million.

* The publisher has been for several years a decided advocate of Female Midwifery.

This gives one midwife to about 2000 inhabitants, or to 1000 females. Now, let Boston, with its 120,000 inhabitants, have a proportional supply, and of like qualifications, and we have 60 educated midwives; enough, with the aid of a few obstetric surgeons, to perform the whole business. And so of New York and our other cities. And it is a reproach to Americans to be behind the French in point of expediency and propriety in this matter. The following item is 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.

Very wise arrangement, judicious regulations. A similar course can and ought to be adopted in Boston, New York, and other cities, so as to supply qualified midwives not only for our cities, but for villages and country towns. If French women are competent to learn and practise the art, are not American, Yankee women? He who says no, slanders his countrywomen.

In several of the German states, such schools are maintained, and women have the general practice. Professor Siebold, in a recent Report to the Royal Scientific Association of Gottingen, on the use of Ether, says, 'If it is decided to use the vapor of ether in natural labor, may this remedy be placed in the hands of midwives?' Thus intimating that midwives have the management of cases of 'natural labor.'

The Danish government, viewing the employment of men in ordinary cases of midwifery as highly improper, established schools for the instruction of women. A lady of Westfield, in this state, who has resided some time in one of the Danish West India Islands, says the regulation there is, that if a midwife presents herself to a woman needing her assistance, she is entitled to her fee, whether employed or not; and some of the foreign ladies, particularly English and American, are so obstinately attached to their home customs, that, though the midwives are qualified and licensed, they will pay *two* fees, rather

than miss of having a professional gentleman!!

In Scotland, where may be found as much good sense, and intelligence, and virtue, as in any country under heaven, not only the popular sentiment, but that of the most eminent medical instructors, has been in favor of continuing midwives in their profession. As a proof that attention was early turned to their education: In the year 1725, a professorship of midwifery was established in the University of Edinburgh; and the town-council at the same time ordained that no woman should be allowed to practise, within the liberties of the city, without having previously obtained from the professor a certificate of her qualifications.

In '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 for 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 preposterous 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, ridiculed the idea of employing physicians, and compared men-midwives to that species of frog, in which, according to the allegation of Reaumur, the male draws out the ova from the female, or, to use the naturalist's own words, '*accouche la femelle.*' If this is a fact in natural history, this frog practice is doubtless the only precedent, in the whole animal kingdom, in favor of *accoucheurs* and man-midwifery.

The following quotation from the article 'Midwifery,' in the Encyclopedia Britannica, gives a condensed view of the question. The writer of the article being a physician, and having no particular partiality for midwives, his remarks are no more favorable than

the subject will fairly admit. As to the difficulties which he suggests, and the cautions to midwives, there is no objection to their having their due weight.

The propriety of men being employed in such a profession is much questioned, by many individuals of considerable respectability. It appears to us that this question, on which so much declamation has been employed by the parties who have agitated it, may be brought within a very narrow compass. It may be assumed as a fact established beyond the reach of controversy, that sometimes dangers and difficulties occur during labor which can be lessened or removed by those only who have an intimate knowledge of the structure of the human body and of the practice of physic. On such occasions, it must be admitted, medical men alone can be useful. But as such labors occur only in the proportion of two or three in the hundred, the general practice might be confided to midwives, if they could be taught to manage ordinary cases, and to foresee and distinguish difficulties or dangers, so as to procure in sufficient time additional assistance. It is on this point that the decision of the question must depend. It consists with the knowledge of the writer of this article, that women may be taught all this. But there are many who allege, that, a little knowledge being a dangerous thing, midwives acquire a self-sufficiency which renders them averse from calling superior assistance, and that, in consequence, they often occasion the most deplorable accidents both to mother and child. In England, this is the popular opinion, so that women are almost entirely excluded from the practice of midwifery. A similar prejudice has, it is believed, begun in some parts of Scotland; but it is presumed this will gradually cease, when it is considered that, in general, the Scotch midwives are regularly instructed, and are at the same time both virtuous and industrious. If they attend strictly to their duty, and invariably prefer their patient's safety to their own feelings or supposed interests, they will deservedly retain the public confidence. But if in cases of difficulty and danger they trust to their own exertions, or from interested motives decline the assistance of able practitioners, and if they interfere in the treatment of the diseases of women and children, they will in a few years be excluded from practice.

This was written some five and twenty years ago. Midwives are still extensively employed in Scotland, but the tendency of

things has been there, as here, gradually to diminish their numbers; not, however, on account of any fault of the midwives; but the medical profession, becoming more numerous and more necessitous, take advantage of the public indifference in the matter, discourage the instruction of women, and then, on the score of their unskilfulness, secure to themselves the practice. So it has been, and ever will be, among us, till the *public* take the matter in hand, and restore this office to its natural and original proprietors.

In England, the practice of midwifery is more exclusively in the hands of physicians, probably, than in any other country except our own. Not because the women are there incompetent, but because they are kept ignorant of the matter, and are therefore unqualified. The name and office of accoucheur were introduced from France, very slowly however, from the fact that the English are not hasty in adopting the customs of their rival neighbors; but they have at length outstripped the inventors themselves in this matter. In the sixteenth century, the *forceps* (instruments for claspings the head and extracting the fœtus) were invented by Dr. Chamberlain, who for many years kept his invention a secret, and obtained great reputation by their use in difficult labors.

Dr. John Maubray was the first public lecturer on midwifery in England. In 1723, he published a work on the subject, in which he strongly condemns the abuse of instruments, which had then come into general use among the obstetric 'artists.' 'I know some surgeon-practitioners,' says he, 'are too much acquainted with the use of instruments to lay them aside; no, they do not (it may be) think themselves in their duty or proper office, if they have not their cruel accoutrements in hand; and what is most unaccountable and unbecoming a Christian is, that when they have wounded the mother, killed the infant, and with violent torture and inexpressible pain extracted it by piecemeal, they think no reward sufficient for such an extraordinary piece of mangled work. I would advise such to practise butchery rather than midwifery, for in that case they could sell what they slay.'

In 1760, there appeared a treatise on 'Midwifery,' by Mrs. Elizabeth Nihell, professed midwife. She exposes the abuse of instruments, advocates the employment of women, and vehemently protests against the interference of men. There is, says she, 'a curse that attends their operations; for diffi

cult and fatal labors have never been so rife or so frequent as since their intermeddling.'

This is the case among us, some proofs of which will be presented in the course of this exposition.

From the following paragraph it would seem that midwifery in those days was not a very difficult or dear-bought science.

We are told, in Brewster's *Edinburgh Encyclopedia*, that 'Dr. Smellie gained deserved reputation as a practitioner and a teacher. In his class he made considerable use of machines, and, if we may credit his enemy, Dr. Douglass, he endeavored to condense his information so as to suit all purses as well as capacities; for he is said to have hung out a paper lantern with these words: "Midwifery taught here for five shillings."'

The employment of instruments was considered such a wonderful improvement upon nature, that almost every doctor, old and young, was for trying his hand at it, (as too many are now;) and to such a pitch did this preposterous manœuvring proceed, that the friends of midwives and of nature opposed it by argument, invective, and ridicule.

In 1759, Sterne employed his satirical pen against the instrumental performers, in 'The Life and Opinions of Tristram Shandy, Gent.' In this, his autobiography, Tristram tells us he was born in 1718; and gives the particulars of his advent into the world, as he received them from his 'Uncle Toby.' The obstetric artist on this occasion was the illustrious Dr. Slop, consecrated to immortality. It appears that he was a 'scientific operator, who had expressly written a five shillings book upon the subject of midwifery, in which he had exposed not only the blunders of the sisterhood itself, but had also superadded many curious improvements for the quicker extraction of the fetus.' The result of the doctor's experiment with his 'new-invented forceps,' in the case of Mrs. Shandy, was such irreparable damage to Tristram's physiognomy as to bring upon him, in every period of his earthly existence, a train of vexatious disappointments and misfortunes; all of which he relates in his 'Life and Opinions.' That part of his autobiography which relates to his nativity—the writings, and indentures, and the warm discussions, between his father and mother, Mrs. Shandy, on the one hand, in favor of the old midwife and nature, and Mr. Shandy, on the other, for the 'scientific operator,' and the 'improvements'—the persons who figure, Obadiah, Uncle Toby, and Cor-

poral Trim—the character and exploits of the redoubtable Dr. Slop, the man-midwife, &c.,—this portion of the 'Life and Opinions,' I say, is so exceedingly applicable to the present times, so transcendently amusing and instructive withal, that I have some idea of selecting and arranging it in a pamphlet form, that the public may compare man-midwifery as it was with man-midwifery as it is.

Notwithstanding Dr. Slop's obstetric prowess and astonishing improvements, midwives in his day continued in good repute, and received their commissions from the highest sources, as appears from the following notice of one, who came to this country the same year Tristram Shandy was born.

A Successful Midwife.

The following inscription I took from a gravestone, a cheap slab of slate, somewhat bedimmed by time, and standing much out of perpendicular, in the 'Old Burying-Ground' in our neighboring city of Charlestown.

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

A very respectable number. There is, I am informed, a similar record in a burying-ground in *Dorchester*.

The graveyard contains myriads of proofs of the bad success, nay, of the ignorant and cruel barbarity of male artists—as Professor Bedford, of New York, exclaims, 'If the grave could speak, how fearful would be its warnings on this topic, how monstrous the guilt of those who revel in innocent blood!' It is therefore pleasant to meet with these venerable records of the ability and success of midwives, in this their proper office. Those were the days when women made themselves useful, and aided and patronized each other; they would have blushed at the thought and scorned the idea of being dependent on male assistants.

In regard to the stone in Charlestown, lest any one should be deceived, as the writer came near being, on looking at it, it is proper to state that some graceless fellow has wantonly cut a figure 1 before the 3, which, though too unskillfully done to deceive the

careful observer, would cause the 'passer by' to read the prodigious sum of 13000.

Now, the author is, of course, in favor of giving midwives whatever credit is their due; but he wishes no exaggerated testimonials in their behalf, nor against those who have usurped their office; and this sacrilegious scamp, this 'cub of Satan,' as Lord Timothy Dexter would call him, deserves to have his head pulled off with a pair of Dr. Slop's forceps, and to have it forever perched on the stone he has desecrated.

Important Testimony.

In order to give the public the highest degree of confidence in the correctness of the views advocated in this pamphlet, the testimony of some of the greatest physicians has been, and will continue to be presented — testimony which cannot be overthrown by argument, or invalidated by any counter evidence of physicians.

Here is an important fact to be borne in mind: It is notoriously for the interest of the medical profession to retain this branch of practice in their hands; therefore, when one of their number condemns man-midwifery, it is evident that he considers it *wrong*, and that he is willing to sacrifice the interest of his profession for the public good. I will not say that there are not physicians who honestly believe that they are the most proper midwives; but the fact that they say so, is not proof positive that they so believe. The authority now to be presented is that of the late

THOMAS EWELL, M. D.,

of Virginia; 'Honorary Member of the Philadelphia Medical Society, and former Surgeon in the Navy Hospital, Washington City.' Dr. Ewell was a learned physician, of *thirty years'* practice, and of high standing in the estimation of the profession.

In his 'LETTERS TO LADIES, detailing important Information concerning Themselves and Infants,' published in Philadelphia, in the Introduction to the work, he speaks and argues as follows:—

'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 on men,

in ordinary births, as a source of serious evils to childbearing; as an imposition upon the credulity of women, and upon the fears of their husbands; as a means of sacrificing delicacy, and consequently virtue; and as a robbery of many good women of their proper employment and support.

'Truly it shows as extraordinary a revolution in practice as any afforded by a survey of all the arts. That all females bring forth their young without assistance except the human in a state of civilization; and that women should call for the assistance of men, while the human species is the only one tormented by jealousy, is a fact that will scarcely be credited in a Turkish Harem, or by the Christians of some future and purer age. Should the strangers to the practice inquire if our men have large, unwieldy hands, great curiosity about women; should they ask if our females had the requisites for useful services—small hands, nice sense of touch, and patience in attendance—they will absolutely deny this monstrous perversion of nature.

'From the peaceful and retired occupations of women, they are generally more numerous in the community than men.* Nevertheless, the men have assumed several offices properly belonging to the weaker sex. The natural consequence is, that many women, as men in similar circumstances, wanting proper occupation, seek the employments of the vicious. Inasmuch, therefore, as these men-midwives have meddled with this proper business of women, they have been instrumental in the depravity of many. Indeed, it is owing to their acting where they are not required, that female practitioners are often so ignorant—not having the opportunity or means to qualify themselves for attendance on ladies.

'Several observing moralists have remarked that the practice of employing men-midwives has increased the corruption among married women. Even among the French, so prone to set aside the ceremonies between the sexes, the immorality of such exposures has been noticed. In an anecdote of Voltaire, it is related that when a gentleman boasted to him of the birth of a son, he asked who assisted at the delivery; to the answer, "A man-midwife," he replied, "Then you are travelling the road to cuckoldom." The acutely-observing historian of nature, Count Buffon, (on puberty,) observes, "Virginity is a moral

* According to the census of 1840, there are in New England 15,000 more females than males

quality, a virtue which cannot exist but with purity of heart. In the submission of women to the unnecessary examinations of physicians, exposing the secrets of nature, it is forgotten that every indecency of this kind is a violent attack against chastity; that every situation which causes an internal blush is a real prostitution."

'It is very certain, where these exposures have been most numerous, as in large cities, there adultery has been most frequent.

'Be it folly or prejudice, or not, there is a value in the belief, that the husband's hands alone are to have access to his sacred wife. Break through the prejudice, if you please to call it so, but for once, unless powerful reasons command it, the Rubicon is passed; and rely upon it, the barriers, on future emergencies, will not be so insuperable. Time and opportunity to press on a grateful heart, for a favor in regions where magnified favors have been conferred, have been used and more frequently desired. To convince you of this, you will not require me to enter into the secret history of adultery.

'Many of these modest-looking doctors, inflamed with the thoughts of the well-shaped bodies of the women they have delivered, handled, hung over for hours, secretly glorying in the privilege, have to their patients, as priests to their penitents, pressed for accommodation, and driven to adultery and madness where they were thought most innocently occupied. In one case, I was well assured that a physician in Charleston, infuriated with the sight of the woman he had just delivered, leaped into her bed before she was restored to a state of nature. The melancholy tale of the seduction of the wife of a member of congress from Carolina, by her accoucheur, is a warning that ought not to be disregarded. The beautiful organization of the lady preyed upon his mind for years; he sought her from one to the other extremity of the country, regardless of all dangers; and on acquiring his game received a premature death—leaving horror and ruin in the family he had been hired to serve.

'Whatever you may think on this subject, there are many husbands to whom the idea of their wives' exposure is horribly distressing. I have heard of cases affording singular mixtures of the distressing with the ludicrous. In one case in my neighborhood, the husband sent for his physician to his wife in labor, yet was so strongly excited at the idea of her exposure, that he very solemnly declared to the doctor, that if he touched his wife, or looked

at her, he would demolish him! No man possessed of a correct and delicate regard for his wife, would subject her to any exposure to a doctor, that could be avoided without danger.

'But the opposition, the detestation of this practice cannot be so great in any husband as among some women. The idea of it has driven some to convulsions and derangement; and every one of the least delicacy feels deeply humiliated at the exposure. Many of them, while in labor, have been so shocked by the entrance of a man into their apartment, as to have all their pains banished. Others, to the very last of their senses suffering the severest torments, have rejected the assistance of men. To be instrumental in relieving one of this truly interesting cast, will be a heavenly consolation to all who can be alive to the pleasures of serving the virtuous.

'If all other considerations united cannot induce you to attend to this subject, the mechanical advantage between a man's and delicate woman's hand, ought to command your decision in favor of employing and encouraging female assistants. Such is the confined organization of the parts for our birth, and such the large size of man's hands, that I verily believe as much mischief as good has been done by them, as has been stated by more extensive observers than myself.

'The rule that I would prescribe to the females for whom I felt the most affection and solicitude, would be this: On no account submit to the interference of men in common labor; do it most readily in the uncommon cases, when a midwife under the direction of a physician cannot afford relief. I will venture to add, that there is not a physician, disinterested, of sound sense, who would not approve of the rule. The best authors on midwifery decidedly recommend it.'

Such is the testimony of Dr. Ewell—sound, candid, disinterested. Against the injurious and immoral custom he speaks with an earnestness and plainness of speech, characteristic of a noble and pure-minded man. Some passages in the extract are very striking, and the reader will do well to re-peruse it. Nothing is more true than that, when human nature has been subjected to this ordeal, and that has been perpetrated which Buffon calls '*une vraie défloration*,' the *Rubicon has been passed*, by both parties, and the barriers between them are not insuperable, unless there is stern virtue, high-toned moral principle; for to take the only remaining step is very easy, and seems compara-

tively a trifle, after the steps already taken. And if it does not result in any overt act of impropriety, it leaves a mental depreciation, an easiness of soul, which shows itself in the jovial conversations among some of the merry members of the profession, in the subsequent interviews between practitioner and patient, and sometimes in the social circles and pleasant chit-chats of the better part of creation.

Dr. Ewell says, 'Many of these modest-looking doctors have been driven to adultery and madness.' Not many years since, a physician in L—, having, in the way of professional duty, become too well acquainted with a lady, (a clergyman's wife,) presumed upon too great a freedom to be endured. The woman exposed him. This doctor, by way of palliation, said to a gentleman, from whom I have the fact, 'I'm nothing but human natur', and human natur' can't stand every thing.'

'Lead us not into temptation,' clergymen pray and admonish others to pray. Yet, at the same time, they thrust their wives and daughters, their medical attendants, and, so far as their example goes, the whole medical profession, and the whole female portion of the community, right into temptation! From such inconsistency between preaching and practice, we should with all solemnity pray, 'Good Lord, deliver us.'

Another important thought in Dr. Ewell's remarks: If a man raises his voice against this unnecessary evil, there are some ready to cry out, 'O, you are a suspicious, a jealous fellow, "a jealousy man;"' and perhaps his *idol* at home is one of these accusers—'La, you are very particular; always getting hold of something new, some new kink into your noddle; I wouldn't be jealous.' So the poor husband, dreading to be thought 'a jealousy man,' yields and travels on, though he may have now and then an instinctive premonition that he is travelling that unfortunate road spoken of by the philosophical Voltaire.

But what says Dr. Ewell on this point? 'No man possessed [not of a spirit of jealousy]—no man possessed of a *correct* and *delicate regard* for his wife, would subject her to any exposure to a doctor, that could be avoided without danger.'

As to the rule, which Dr. Ewell lays down, to employ midwives on ordinary occasions, and call in physicians in extraordinary difficulties,—which is precisely the course advocated in this pamphlet,—he says, he will venture to add that there is not a *disin-*

terested physician, of *sound sense*, who would not approve of the rule.

Now, that the profession should be desirous to retain the practice is perfectly natural. 'Human nature,' says Tristram Shandy, 'is the same in all professions.' But to their honor be it spoken, there are many physicians in the country and the city, who would be glad to see the practice in the hands of midwives. One, in this city, said he disapproved of it, and should be glad to get out of it, but he was actually 'pressed into the service, by families in which he attended.' Another doctor steps out of the back door, and is 'not at home,' when they call on that business. Another sends his wife. Another remarked to me, that when called for by any one, he referred him to a midwife, saying, if they could not get along then, he would come.

Lectures in Boston.

OPINIONS OF EDITORS, PHYSICIANS, &c.

In September last, the writer gave a number of lectures, in this city, on this subject of man-midwifery, which created some sensation, and called forth some opinions as to the matter.

'THE BOSTON MEDICAL AND SURGICAL JOURNAL.' Its editor, Dr. J. V. C. Smith, it appears, honored the lecturer, by hearing 'a part of one of his discourses;' which part of a discourse he makes the topic of a very spirited editorial, prepared in his happy vein of sarcastic humor, with a mixture of serious apprehension for the interests of the public, but with no allusion to the interests of the *profession*.

'No subject,' says the editor, 'is neglected, in these days of agitation, which promises to produce a remunerating degree of excitement when presented to the open ear of the great irresponsible public.'

So this is got up for a money-making business. Well, the author is frank enough to acknowledge, that when he labors, for what he considers the good of the public he expects the public will be willing to pay his expenses and give him a 'remuneration.' '*Quid pro quo*,' as the lawyers say, 'something for a consideration,' is a principle on which the public, collectively and individually, act—unless doctors are exceptions. And the question is respectfully submitted, whether the editor looks after the health of the 'Port,' and the public, without any 'remunerating

degree of excitement'? and whether he conducts his excellent journal, in which he sometimes makes himself useful, by 'exposing the blunders of the sisterhood,' and by taking care of the public morals—whether this is all done from mere philanthropy? and once more; whether he and his brethren practise the obstetric art from pure benevolence, a disinterested regard for the safety of the patient, and the good of the race? If so, I do not read the Boston Fee Table rightly, which says,

'For a case of midwifery in the daytime, \$15

'If any part of the attendance is in the night, \$20

'And in all cases of extraordinary detention or attendance, also in proportion to the importance of the case and the responsibility attached to it and to the service rendered, when these are extraordinary, the charges shall be increased according to the judgment of the practitioner concerned. If in any case of midwifery, a second physician is called in consultation, both the attending and consulting physician shall charge at least the usual fee for delivery; except that when the consulting physician in such a case pays only a consultation visit, and is not detained in attendance on the case, he may charge the fee for a consultation visit. [The accoucheur is authorized to make a certain abatement from these established charges, as a *favor* to those unable to pay the whole.]

'In cases of midwifery, when the child is born, but not the placenta, before the arrival of the accoucheur, the whole fee is to be charged. When both the child and placenta are born before the arrival of the accoucheur, half or the whole fee is to be charged, according to the circumstances. This rule is not to be applied to cases where the delay arises from the accoucheur.

'When the circumstances permit, every physician shall present his account immediately after his attendance in a fit of sickness. This shall be particularly attended to in cases of midwifery.'

'*Exemption from charges.* The clergymen of the city and all members of the medical profession, within it, together with their families, should be attended gratuitously.' (Query. Has this any thing to do with retaining the clergy in favor of anti-scriptural midwifery?) The above are some of the 'Rules and Regulations of the Boston Medical Association,' adopted some years since; but I am not aware that there have been essential alterations.

Now, as to this remuneration of the profession, I have not the least fault to find; for it is a laborious life, that of a doctor, and only the more successful portion of them get a tolerable compensation. That, however, is no fault of the fee-paying public; but man-midwifery has introduced a doctor into almost every family, and multiplied that useful profession altogether beyond what the *health* of the community requires. So much so, that here in Boston, according to the 'Directory,' we have over *two hundred and fifty* professional gentlemen, engaged in seeing the citizens into and out of the world. The practice and compensation being so minutely distributed, they cannot, as a general thing, get fees enough to keep themselves in comfort, nor practical skill enough to perform the duties of midwives with a reasonable degree of safety to mother and child—as will appear more fully in the following pages.

But the pecuniary expense of man-midwifery is a trifle compared with other considerations. It would be well if the fee was fifty dollars instead of fifteen; the evil would then work its own cure, since midwives can afford to officiate for a much smaller fee than physicians can.

But it is necessary to return to the Journal, which speaks in a measure for the profession. The editor does not apparently think the remunerating excitement, in regard to the *lectures*, of so much consequence as other matters, (though he remarks, 'a flourishing business is conducted,') for he proceeds to lament the state of the times: 'We are wholly overstocked in New England with anti-isms of every possible shade and texture, from the advocates of bran pudding to the believers in anti-man-midwifery.'

Truly the times are out of joint; conservatism has reason to tremble; for this last 'anti-ism' is the most *radical* of all, striking, as it does, at the very foundations of morality, and even of society itself. '*O tempora! O mores!*'

'These reflections,' continues the Journal, 'were called up by the energetic displays of a man by the name of Gregory, who has been discoursing in Boston on the horrible depravity of employing physicians in obstetrical practice.' As to the 'horrible depravity,' the reader can form his own opinion from the few exposures in this work, bearing in mind, all the while, that not a thousandth part has been told.

The censor then proceeds to give the opinion that 'the great irresponsible public' ought

not to be permitted to hear such lectures — the arguments in favor of midwives and against men-meddlers, — especially they ought not to hear the exposure of medical depravity, lest it should corrupt their morals. Perhaps the 'married men,' to whom the lectures were addressed, feel competent to listen to an important subject, and then judge for themselves. Physicians dictate in the obstetric room, and often tell the husbands they 'can't come in;' but when 'married men' wish to attend a public lecture, they may not think it necessary to ask leave of their men-midwives.

But, says the critic, 'the lecture which we attended was publicly announced to be for married men. This was another contrivance, under the semblance of extreme delicacy, to gather a crowd. There were young men present who were not old enough to assume the responsibilities of a married life, besides numbers who would not if they could.'

The door-keeper was not authorized to demand the 'marriage certificate' of those who presented themselves, and it is not easy to tell by a man's looks precisely whether he is married or not; and the Journal does not pretend to say that there were any there younger than 'young men.' But by what sort of physiological or physiognomical science he ascertained that there were 'numbers who would not if they could,' does not appear; but the insinuation is as unhandsome as it is unjust to the gentlemen assembled there; for not a more respectable or attentive audience could be found in this or any other city. Hear the testimony of a non-professional editor upon this matter.

The Boston Traveller, in a notice of 'Lectures to Married Men,' says, 'We took occasion to listen to Mr. Gregory, on Thursday evening, and came to the conclusion that it was a subject of importance; and the audience, which was evidently composed of thinking, candid men, manifested a high degree of interest. Considering the course which Mr. G. takes, of inviting in married men only, we can see no impropriety in enlightening the public; every one may then be his own judge in the matter.'

In fact, so far from being improper to inform those 'who are not old enough to assume the responsibilities of married life,' it is *highly important* that young men and young women should, *in season*, have instilled into their minds correct ideas of this demoralizing practice. The next day after one of my lectures, a young married man, an entire

stranger, who had heard the lecture, stopped me in the street, shook my hand very cordially, and said he was exceedingly gratified that he had become informed *seasonably* in regard to this subject. Others have said, 'If I had known before what I do now, I should have done differently from what I have.'

In order to correct the iniquities which grow out of this and other medical duties, it is absolutely necessary to expose them to public view; and he who condemns the exposure, prefers the continuance of them. The greatest danger is, that it will excite in the minds of still greater numbers of young men a desire to *study medicine* — wild young men, having, as Dr. Ewell says, 'great curiosity about women.' Just to show how the mind sometimes runs: A gentleman in Weymouth said to me, that he had a medical student boarding with him, teaching the district school, to pay the expenses of his medical tuition. It happened that on one occasion they were sitting up after midnight; and the gentleman remarked to the student, 'Well, sir, it is about time you were abed.' 'O,' said he, 'never mind; I must get toughened to it; I shall have to be up taking care of the women'!! In the name of decency and morality, cut off such allurements to those interesting and curious young men; cut off the golden bait which accompanies the other attractions; let '*taking care of the women*' be given up to women; and it would tend to check the rush of young men into the medical profession. And this would be of essential benefit to those already in practice; for no physician can now go to bed with any feeling of security, that when he steps out in the morning he will not see the sign of young *Dr. Somebody* for his next door neighbor.

Having noticed the main points in the criticism of the Medical and Surgical Journal, we now come to a valuable item in it — very valuable, from the high source from which it emanates. The editor thinks 'the idea that the whole system of obstetric medicine can be changed,' by such humble means, is utterly 'preposterous.' He finds fault with the *authority*, not only as regards the lecturer, but with that drawn from professional sources. But perhaps he will admit such testimony as this work presents from eminent medical men, 'in good and *regular* standing,' and also such evidence as is obtained from his excellent Journal, and certainly that derived from himself. Here it is: 'We should be perfectly satisfied to have

any improvements in this kind of practice, and under no circumstances would we object to multiplying proper female midwives.' Thanks for that! It pays for all the severe things he said about the lectures. Excellent! We doubt whether the Journal ever before uttered so much in *favor* of 'the sisterhood.' The lectures, then, have done a little good. Having now ascertained that the editor's views are favorable to the object to be attained, if he has no objection we will be co-workers. And it is to be hoped that, having access, through the medium of his Journal, to a good share of the medical profession in New England, he will adopt such means as he considers proper and efficacious. And, moreover, as the people of Boston have shown their good judgment by intrusting the editor, among others, with the duty of representing them in the legislature, it is earnestly to be hoped that in his professional and representative capacity, he will propose some measure to effect 'improvements in this kind of practice,' which the governments in other countries have attended to as a matter of great importance, and which is of the highest interest to the Commonwealth, and to mankind at large.

Boston Editors.

In making out his plea in an important case, the lawyer gathers his evidence from various sources, and presents the *opinions* of good judges, and makes them all bear upon the point in question. Now, editors of public journals are perhaps better acquainted with the body politic, with human nature, and things in general, than any other class of the community; therefore the opinions of some of these movers and moulders of public opinion, in the literary and commercial metropolis of New England, will here be given.

While engaged last fall in giving the Lectures against Man-midwifery, as before mentioned, they were advertised in most of the city papers, and most of those also noticed the subject editorially, and, without exception, favorably. In handing in the advertisements for insertion, there was of course occasion, and sometimes a necessity, for a word of conversation upon the matter with the gentleman of the sanctum; and of course, too, some opinions were incidentally expressed—the more valuable, as they were not designed for their patrons, and consequently not modified in view of professional or non-profes-

sional prejudices. The views being expressed in private conversation, names; of course, will not be given, though there might not perhaps be any objection; at any rate, the gentlemen are not so far off but that they may readily be found.

One editor, who is particularly careful as to what advertisements are admitted into his paper, on looking over the notice of the *Lectures*, said he saw no objection to admitting it; and doubted not that my views were correct.

Second editor said, he did not know how the public generally would regard the subject; but for himself he thought women were the proper attendants in obstetric practice. Another gentleman, connected with the same press, said that was his belief and practice; he had three children, and never had a doctor in his house on that business.

Third editor thought midwives would be better on ordinary occasions; but doctors would stick to the practice, there were such a multitude of them, and some of them half starved.

Fourth editor, on being shown the advertisement, and asked if he had ever given any attention to that subject. 'No,' said he, 'only I know that my wife is strongly in favor of employing women.' 'Enough said,' thought I; 'your wife is right on the subject, and you will be, of course.'

Fifth editor said he thought that women should not only perform this duty, but should understand medicine, so as to attend to the complaints of their own sex.

Sixth editor said it always appeared to him marvellous that this business should ever be in the hands of men, and that women should want doctors about on such occasions. Said his wife, at her last confinement, wished a midwife to attend her; he had some hesitancy about it, fearing it would not be entirely safe to depend on a woman. So he asked the opinion of his family physician; and the doctor said, 'If your wife wants a midwife to attend her, why, have one by all means.' The midwife was employed with perfect safety and success.

Seventh editor, in speaking of doctors' pupils and students of medical schools, practising gratuitously or otherwise about the city, to 'learn the trade,' thought it would be quite as safe to trust midwives, and very emphatically laid it down as his opinion, that they wouldn't any of them get into *his* house.

Eighth editor stated to me, that he employed a doctor to attend his wife in her first

two confinements. On the second occasion, though the physician was a kind and excellent man, a familiar in the family, yet such was the effect of his presence on his wife, that the progress of the labor was suspended, and it was impossible for the child to be born, until they requested the doctor to leave the room; then all went on to a speedy and successful termination. Since then, he said, he had followed the dictates of nature and propriety, and employed a midwife, as he had had occasion in several instances, and the consequence had been entire success, without any of the embarrassment and injurious effects of having a man about. 'O,' said he, with much feeling, 'there is no knowing how much delicate and sensitive women suffer mentally, and how much their bodily sufferings and dangers to life are increased, by the unnecessary and unnatural practice of employing men to officiate at childbirth.' He expressed a deep interest in the success of this enterprise of restoring the office to women.

I have never conversed with an editor who argued *against* the plan of instructing and employing midwives; indeed, it is an exceedingly rare thing to find a non-medical gentleman, in any class of society, who takes that ground. The only question in their minds is, Can male attendants be dispensed with, and females employed with safety? If this question can be satisfactorily answered in the affirmative, as it most assuredly can be, there would seem to be no insuperable obstacle in the way of an entire change of practitioners, and that too in no great length of time. Let us have, by legislative enactment and appropriation, or by private donation, an institution that shall afford a supply of thoroughly qualified female practitioners, according to the example of France and other countries. No one can doubt that this would be exceedingly gratifying to the public; and the medical profession would of course accommodate themselves to the new order of things. The *supply* is always regulated by the *demand*. If a smaller number of physicians should be needed, a smaller number of young men would turn their attention to that profession.

Man-midwifery in Boston in 1820.

INTERESTING RELIC.

'Remarks on the Employment of Females as Practitioners in Midwifery. By a Phy-

sician. Boston: Published by Cummings and Hilliard, 1820.'

Such is the title of a pamphlet of 24 octavo pages — a document of remarkable interest, not only on account of its contents, but from the circumstances which called it into existence.

The 'Physician' commences thus: 'The attention of the public having lately been turned to the subject of the employment of females as accoucheurs, has led to some discussion among the faculty and others with regard to the safety and expediency of introducing them into the practice of midwifery instead of physicians.'

It may be interesting to the younger part of our population, and call up some reminiscences among the elder citizens, to have the history of an event which happened twenty-eight years ago. What, then, turned public attention to that subject, at that time? Here is the clew to the matter — an obituary notice in the *Boston Liberator*, of 1845, runs thus: —

'Mrs. Janet Alexander died in Boston, September 15, 1845, after an illness of nearly five 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. She arrived in Boston in November, 1819, and commenced the exercise of her profession on the ensuing Christmas day; and, for a period of more than twenty-five years' practice among the most intelligent and respectable portion of the community, was most singularly successful, *having never in any instance lost a patient!*'

It is something of a coincidence, it may be remarked in passing, that this excellent and useful woman arrived here, with her diploma from high authority, just one century after that benefactress of her race, Mrs. Elizabeth Phillips, who arrived in 1719, 'commissioned by John, Lord Bishop of London, and, by the blessing of God, brought into this world above 3000 children.' How many centuries more is New England to depend on the 'Old Country,' for qualified and commissioned midwives?

The arrival of Mrs. Alexander, then, was the beginning of the troublous times, and 'discussion among the faculty.' But wherefore? They were not frightened by a *woman*, and she a friendless stranger. No; but she was not entirely friendless; for *two*

physicians, who were even then distinguished and influential, gave the midwife their encouragement and assistance, and endeavored to introduce her into practice among the middle and higher classes. It appears, moreover, that the female practitioner had the audacity to advertise and give notice by handbills that she was qualified and prepared to wait upon ladies. This circumstance, together with the fact that two prominent physicians, 'of good and regular standing,' encouraged the lady, explains how public attention was turned to the subject, and why there was 'some discussion among the faculty.'

The nature of that discussion, it being, of course, in secret conclave, and not reported for the papers, does not fully appear; but from some paragraphs in the 'Remarks by a Physician,' it is evident that the debate was much like that of certain *silversmiths*, who made shrines for the temple of the voluptuous goddess Diana, when that man, who went about turning the world upside down, proclaimed the true doctrine of the Deity. — 'Great is Diana of the Ephesians,' — 'Great is man-midwifery!'

That the cases were much alike will appear from that interesting document, 'Remarks by a Physician.'

'It is in vain to say,' remarks the 'Physician,' 'that we have nothing to do with the general principle; that the present is a particular case, and will extend no farther. It is impossible any man should believe, that when a female has offered herself for practice, has been believed to be competent to her office, and has been received as an attendant among the most respectable families, her example should not be followed, that others should not likewise offer themselves and be employed, that the fashion should not go down in society till all classes had followed it, and had their practitioners of different degrees of respectability and merit.'

'But suppose, for a moment,' continues the 'Physician,' 'that the practice is not to extend beyond a single individual. If there is any good reason for recommending the employment of a female at all, why restrict the practice? If there is good reason for employing this one, there is good reason for employing another; therefore, why employ her at all? And besides, one cannot last forever, so that her patients must finally return to the employment of physicians, which must become doubly disagreeable from the idea which has been cherished, and will become

more powerful, that their employment is indelicate and improper.'

Here it is! The faculty were as much afraid of this *midwife* as the silversmiths were of the 'True God.' Here is logic: 'If there is good reason for employing this one, [and the remark implies there was,] there is good reason for employing another; [so there is;] therefore, why employ her at all?' Because it was *right* and *proper*, and those medical gentlemen who recommended her knew it.

But the next objection, that one midwife cannot last forever, is quite amusing; as if no more could be raised up, or in any manner be obtained, either native or imported! The argument founded on that objection is, however, worthy of the particular attention of the reader. The unfortunate patients must finally by necessity be forced back into the hands of the doctors, 'which must become doubly disagreeable, [no doubt of that,] from the idea which has been cherished, [there is then such an *idea*, though uncherished,] and which will become more powerful, that their employment [that of physicians] is indelicate and improper.'

True, — true! as the voice of nature, and that this voice 'will become more powerful by being cherished.' Let the idea that it is indelicate and improper become prevalent, and it is the death of man-midwifery.

Therefore, beloved brethren of the 'craft,' and particularly you who are so recreant to its interests, you perceive it is vitally important that we should not let these 'bond-women' go. It is even now difficult to keep them quietly in subjection; but let them once escape, and learn that they can *live* independently of us, their 'true and legitimate' lords obstetrical, let them once taste the pleasures and blessings of freedom, and, unfortunately for themselves, it will be doubly disagreeable for them to return to our authority, and, alas for us! trebly difficult to *reclaim* the fugitives.

To prevent such a catastrophe, and stay the progress of the man-midwifery abolitionism so ripe at the time, the pamphlet — 'Remarks by a Physician,' just quoted — was put forth to the profession, and the public at large. Tradition says they were, gratuitously of course, 'thrown into houses.' Whether the 'Physician' was a young David, who volunteered against the female Goliath, or whether, as appears most probable, he was duly appointed during the 'discussion among the faculty,' as being their strongest man, and

the fittest champion, in view of the impending dangers, — it is to be regretted that, from the poor opinion of the cause in which he was engaged, or some other reason, he should have withheld his own proper name, appearing only as a 'Physician;' otherwise he might have been handed down as worthy of the eternal gratitude of posterity, perhaps side by side with that great, obstetric benefactor, Dr. Slop. And if he is now living, he will probably be ambitious to step forward and claim the paternity of his offspring, as it is now of age, and like to be 'known in the world.'

The two physicians, who had been so forgetful of their obligations to the brotherhood of the Medical Society, as to recommend the midwife, soon desisted, as report says, from the course they had taken; for what reasons it would probably be easy to guess; but it could not have been from having become disbelievers in the safety of employing midwives.

High Authority in Boston.

It may be doing injustice to the two eminent medical gentlemen who were more particularly active in introducing the midwife, before named, into practice in this city, and whose commendable endeavors, as I am informed, were a matter of notoriety at the time — it may, I say, be doing them injustice to withhold their names, as being on the right side in regard to this most important subject; it is, at any rate, doing injustice to the cause. However, the reader may rest assured that their authority, in regard to the safety and propriety of employing females in the practice of midwifery, is as good as can be found in *Boston*, and perhaps in the world.

There are, moreover, several other of the oldest and most distinguished physicians of this city, who, I am satisfactorily informed, have expressed themselves in favor of employing midwives. One of them (whose *interest* would lead him to speak otherwise) remarked to an acquaintance, at the time of the 'Lectures' here last fall, that he did not care how many midwives they had, if they were only qualified. A gentleman states, that another eminent physician here said, in his hearing, that he thought it rather small business for physicians to be engaged in this women's work.

An elderly and excellent man very recently told me, that one of the two physicians alluded to recommended Mrs. Alexander to him, as

a midwife, and said it was as safe to employ her as *any physician*. He even presented some reasons why it was *better* to have a female attendant: one was, she had more time, could wait, and not be hurried away by other duties; another was, she being all the time in that particular branch of practice, her mind was upon it, and she became more familiar with the minutiae of the business than the physician who attends to all branches of medicine; a third reason he gave was, that she was more properly qualified by *nature* for this duty.

Excellent authority! Admirable arguments in favor of midwives!

So it appears that here in Boston, the head-quarters and stronghold of man-midwifery, the oldest and most eminent medical men are in favor of the employment of females in the practice of midwifery.*

These facts are very encouraging, and lead us to believe that as soon as the public shall demand a change, the most eminent and influential physicians will openly and boldly coöperate with them in bringing it about. Boston is in a measure the depot of Fashion for New England, and here, where this absurd custom was first introduced, is the place where its correction should commence; and as is the fountain so will be the streams. There is here abundance of wealth, and public spirit, and moral principle, to carry out any enterprise which the general good requires. Surely, then, an object, which is recommended by the common sense of mankind and their innate ideas of the fitness of things, cannot long remain in need of the influence and aid requisite for its accomplishment.

The first thing needed is a suitable degree of knowledge upon the subject, to make its importance duly appreciated. Let, then, those who have correct ideas endeavor to enlighten others. Let every man, in public or private, communicate the information he possesses, and exert his influence. Let every woman who detests the present practice endeavor to inspire the same feeling in the minds of her acquaintances; and it will not be long before the community will be *leavened*. Public instruction and diplomas for midwives are the things to be aimed at, but women should not lose time by *waiting* for them. They should read books on midwifery, and those who have the practical knowledge should assist others in acquiring it.

But let us now inquire whether it is safer to employ men or women as midwives.

* P. S. The two physicians alluded to are Drs. John C. Warren and James Jackson.

IN WHICH IS THERE THE GREATEST SAFETY TO MOTHER AND CHILD, THE EMPLOYMENT OF MEN-OPERATORS OR MIDWIVES ?

It is on this point that the whole subject mainly rests, and upon which, when fairly settled, the public mind will turn.

In the Boston pamphlet, 'Remarks, &c., by a Physician,' *against* midwives, the medical author states the question in this way : —

'The question is, Can the practice of midwifery be carried on with equal safety by females as by male practitioners ? This is the only question which ought fairly to be considered, for no one can deny that safety is the principal consideration ; so important indeed, that we can conceive of none that can come in competition with it. If this be decided in the affirmative, the controversy is settled ; for every other consideration would lead us to the preference of females.'

Says the Encyclopedia Britannica, as before quoted, 'The general practice might be confided to midwives, if they could be taught to manage ordinary cases, and to foresee and distinguish difficulties or dangers, so as to procure, in sufficient time, additional assistance. It is on this point that the decision of the question must depend. *It consists with the knowledge of the writer of this article, that women may be taught all this.*'

But not to depend on the testimony of physicians, though they may be the greatest in Boston or any other part of the world, let us look at some general principles and *facts*.

Now, the fact that midwives alone officiated for more than five thousand years, 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 scrutinizing 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 !

So far from being *safer* to employ doctors,

there are many reasons by which it may be shown that it is *less* safe, that it is *dangerous*, to employ them.

'I respect,' remarks the 'Physician,' 'as much as any man, those nice feelings of delicacy in the sex on which this argument [the impropriety of employing men] is founded : it is upon their preservation that the honor, the dignity, the virtue of the sex depend. [Remember this in passing.] There can be no doubt that the attendance of a female must be more grateful to these feelings, and that they must be somewhat wounded at first by the presence of a physician. * * * * That it is a sacrifice of feeling we cannot doubt, but it is a sacrifice to safety.'

Let us look at this point a little. A woman in labor feels annoyed, embarrassed, and shocked by the presence and examinations of a physician — is suffering a mental martyrdom, a *sacrifice*, — and that is a sacrifice to *safety* !

Dr. Dewees, formerly professor of midwifery in Philadelphia, author of a 'System of Midwifery,' and one of the highest American authorities, makes the following statement upon this point ; not, however, to encourage the employment of women ; he is on the other side, though he seems to have had no antipathy against midwives. I have directed attention to a few words by *Italicizing* them.

'The contractions of the uterus,' says Dr. Dewees, 'are entirely independent of the will ; their intervals can neither be accelerated or retarded by any exertion of it, nor can their force be either augmented or diminished by its influence ; but passions and *emotions of the mind*, when strong, often exert a powerful influence over uterine contractions — they may call it into play at a time the least expected ; or *may suspend it after it has been strongly excited*. The first is proved by passions and emotions being followed by abortion ; and the latter by the following fact, which came under my own notice : —

'I was called to attend a Mrs. C —, in consequence of her midwife being engaged. As I approached the house, I was most earnestly solicited to hasten in, as not a moment was to be lost. I was suddenly shown

into Mrs. C.'s chamber, and my appearance there was explained by stating that her midwife was engaged. As I entered the room, Mrs. C. was just recovering from a labor-pain; and that was the last she had at that time. After waiting an hour in the expectation of a return of labor, I took my leave, and was not again summoned to her for precisely *two weeks*. And Dr. Lyall says, "We have been informed, by a respectable practitioner, of a labor, that had nearly arrived at its apparent termination, suspended more than two days, in consequence of a gentleman having been sent to the patient against whom she had taken a prejudice." *Every* accoucheur has witnessed a temporary suspension of pain upon his first appearance in the sick chamber; but so long a period as two weeks is very rare.'

Such is Dr. Dewees's testimony as to the consequences of this 'sacrifice of feeling.' Nature is shocked, is paralyzed, by the intrusion of men on these occasions. We are told that the Indian women, of the forests, go away alone, refusing the attendance even of their own sex. Farmers very well know that, when their domestic animals are about to bring forth their young, they go away to a place of retirement; and if they are confined so as to make escape impossible, and spectators are about, they manifest great impatience, uneasiness, distress, till the intruders are away; which affords immediate relief. And *women* in civilized life are less annoyed and injured by the presence of men? Where is the advocate of man-midwifery who will pay them such a compliment? But there is a native feeling in woman, in whatever rank of society, which is and must be violated by the present practice; even in the topmost grades of society, where such sensitiveness is less often found, it sometimes appears, and produces its natural consequences. Two instances will be given.

The first is that of the Princess Charlotte, of England, daughter of George IV., and wife of Prince Leopold, afterwards king of the Belgians. This young and highly intellectual lady died in childbirth, with her first child, in 1817, as we are informed, 'deeply and sincerely lamented by the whole nation, who had looked forward to the period of her sovereignty with the fondest hopes.'

In regard to this case, a medical author remarks, —

'This scientific parade and useless number of attendants have been more injurious than no attention 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 accouchment of a royal princess, that brought on that anxiety of mind 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.

One more specimen of man-midwifery among the great.

'Within a year after her marriage with Napoleon, the young empress was announced to have been taken with the pains of labor. The case was a difficult and distressing one; and the professional person employed lost courage, and was afraid to do what was necessary. Napoleon appeared in the apartment, and commanded him to proceed as if the patient were the wife of an ordinary burgess. She was at length successfully and safely delivered of a fine boy, which Buonaparte, with feelings, doubtless, as highly strong as after a battle gained, carried into the next apartment, and exhibited in triumph to the great officers and courtiers, by whom he was unanimously hailed King of Rome, the dignity which had been destined to the heir of the French republic.'—*Scott's Life of Napoleon*.

The labor was a protracted and distressing one. We are not *certain* that it was made such by the attendance of a *man*; but taking Dr. Dewees's principle that mental emotions retard or suspend labor, it may be, a *fortnight*, and that the *young* empress was waited on by a medical *gentleman*, and it is not unreasonable to suppose that man-midwifery was the cause of the difficulty and danger; especially when we are informed that the accoucheur was *unceasing* in his attention, as we are *assured* by Bourrienne, who, in his *Life of Napoleon*, says, 'My friend Corvisart did not for a single instant leave Maria Louisa, during her long and painful labor.'

Not for a single instant! Such professional assiduity is enough to endanger the life of any young and modest lady. Dr. Dewees says the physician should not be in the room more than is absolutely necessary. Then, again, see the advantages of male operators! 'The professional person employed lost

courage, and was afraid to do what was necessary.' If the attendant had been a *woman*, she would not have embarrassed the patient, nor herself been embarrassed, and 'afraid to do what was necessary.' Napoleon ordered the physician to proceed with the empress as with the wife of an ordinary burgess; had he ordered the man from the apartment, and the wife of an ordinary burgess to attend the empress, he would have evinced some of that knowledge of human nature and the fitness of things, which he possessed in so preëminent a degree. But great men, as well as small, are hoodwinked and fettered by custom.

From this and the preceding cases we may draw some principles of general application. The introduction of men into the lying-in chamber is unnatural and injurious to the woman directly. The physician knows he is out of his place, feels embarrassed, and acts awkwardly and unskilfully. His embarrassment increases with the patient's rank in society, and so, of course, does the danger arising from that want of freedom which is natural and proper between the patient and an attendant of her own sex.

The force of these remarks will not be felt unless the reader is aware of the nature of the duties required of the accoucheur; and on this point young married people generally remain in ignorance till it is too late to avoid the inconveniences which are a part of man-midwifery.

One of the first duties of the accoucheur, as laid down in works on the practice, is that which comes under the head of 'Touching.' An 'examination' must be made 'per vaginam,' in obstetric phrase, to ascertain what part of the child presents; whether the presentation is the natural one, that of the head. This course is necessary; and if there is no midwife to be had, then the physician must perform this and similar duties. Hence the embarrassments and inconveniences before spoken of.

RULE FOR MAKING EXAMINATIONS.—Dr. Gooch, of London, in his work on Midwifery, *third American edition*, (high authority in England and this country,) lays down the following rule in regard to these and other examinations: 'We can examine patients in humble life as we please, but those in higher stations require a little more ceremony.'

That sentence was of course not written for the non-professional public; but this pam-

phlet was, and the main object is to *expose* the absurdities and enormities of man-midwifery. What think you, reader, of this direction of Dr. Gooch? 'We are to observe decency just according to the patient's rank in society.' What think you, honest, virtuous men, unfortunately 'in humble life,' whose wives are to be handled as the doctors *please*? What think you, farmers, mechanics, middling classes, whose wives are to receive a shade or two more of decency? What think you, men 'in higher stations,' whose wives are to be favored with 'a *little more ceremony*,' and that little too often disregarded?

Man-midwifery is thus attended with two opposite evils to patients in different ranks in society. The accoucheur's display of scrupulous delicacy, and the 'standing on ceremony' with women in 'higher stations,' deprives them of necessary assistance, and perhaps disconcerts both parties; while in 'humble life' there is often too much officiousness and freedom for the physical welfare of the patient, and the moral good of patient, practitioner, and the female assistants.

It is important, too, that those who are not informed in these matters, should know that it is sometimes necessary, by the hand, to turn the child in the uterus or womb; and more frequently by the same means to separate and remove the placenta or afterbirth. And hence Dr. Ewell gives, as the weightiest objection against men-midwives, 'the large size of men's hands.'

Proofs of the Danger of employing Men-midwives.

Medical authors are accustomed to illustrate principles by cases. That is the course pursued in this work.

A case has already been presented, as given by one of the Boston editors. The presence of the physician had the effect—described in the preceding paragraphs—to suspend the progress of the labor. The husband had the discernment to perceive the cause of the difficulty, and sent the doctor from the room, which afforded perfect relief. Had the gentleman been less intelligent and observing, and possessed less authority, the accoucheur would probably have said nature was at fault, and made a 'forceps case' of it, to the injury of mother and child.

Mrs. H., of W., in this state, sent for a physician to attend her in labor. The labor was protracted. Another physician was called; instruments were used, and the child destroyed. At her second confinement, she again employed the first doctor, who labored diligently 'to assist nature,' and then pronounced it *impossible* for the child to be born without again resorting to instruments. He retired to another room to wipe the sweat from his brow, and take a little refreshment. The woman being thus fortunately relieved from the presence and officiousness of the doctor, nature consented to go to work again, and lo! before the accoucheur had got ready for scientific operations, the child was born, safe and sound, without any aid whatever! The women attendants announced the fact to the doctor, who exclaimed, *Impossible!* and would not believe till he went in and saw with his own eyes.

Is not Nature superior to art? Thus does she rebuke the meddling of men, and pour contempt on their artificial trumpery!

This same lady, this last spring of 1847, was confined with her third child. The same two physicians were employed as at the first time. The labor became difficult; the instruments were again used, and in the operation both mother and child were killed. Thus a mother and two children were sent to their graves by the operations of obstetric artists. That there was no *natural* difficulty is proved by the fact that the second child was born *naturally*, and survived.

Another case in the same town. A gentleman called a doctor to attend his wife. The accoucheur labored as if anxious to earn his fee. He then pronounced the birth impossible, and started home to get his 'improvements.' But before he could get back, nature had anticipated his operations: the child was born!

These facts are communicated by a gentleman who resides in the town, and knows all the particulars.

A gentleman of N., N. H., told my brother, the publisher, that his wife, when confined with her first child, was thrown into a condition of great suffering and danger by the presence and interference of the physician; who then declared that the forceps must be used to effect the delivery. The mother of the lady, who knew more about the matter than the scientific operator, said it should not be done. They then drove the doctor away from the bed, soothed and encouraged the

afflicted wife, and in less than half an hour she was, without aid, delivered of a fine healthy child.

A clergyman in L., in this state, said a doctor officiated at the birth of his first three children; and not one of them survived. Having moved away where he could not get an accoucheur, his wife gave birth to a living child. Taught by his experience, he said he did not doubt that the doctor killed his first three children.

Mr. F., of our neighboring city of Charlestown, said that Mr. N. employed a physician to attend his wife. The case either was or was made a difficult one. Three physicians, who are among the best, spent one night and most of the next day, mutilated the child *in utero*, and even then could not extract it. They pronounced it a hopeless case, and said 'the woman *must die*,' and left her. An old lady, Mrs. S., who had no other qualifications as a midwife than that of having had several children herself, and having occasionally assisted her neighbors, learning that the accoucheurs had *made room*, called on the woman soon to die, and in less than an hour safely delivered her of the murdered child. The woman *lived*, and did as well as possible, considering what she had suffered.

The following convincing case is by Dr. Channing, professor of midwifery in the medical department of Harvard University.

'A case is related by Dr. Channing,' says a Boston medical author, 'which proves that a woman, if left to herself, may often be delivered naturally, notwithstanding she has suffered the greatest agony at the hands of her medical attendants. "I was called," said the professor, "to a case of arm presentation in the country. Three physicians had successively abandoned the woman, but the fourth, poor fellow! was still in attendance, and almost worn out. One of the physicians, as I was informed, had cut away the right shoulder; another the left shoulder; and a third had removed the collar bone. The woman expressed a wish not to be handled any further, and said she was anxious to die. I found the womb quiet, because it had been *worn out*, and knew that, after a sufficient interval of rest, it would begin to contract. This very soon took place, and in a short time after my arrival the child was delivered."

Some people imagine that, if they employ a man who understands medicine, anatomy, and surgery, — in short an M. D., — there must be the greatest *possible* safety. The object

of presenting these facts is to undeceive the public in regard to this matter.

In 1839, Dr. Septimus Hunter, of New York, was sentenced to one year in the Penitentiary, for causing the death of a woman in childbirth. This *physician*, of more than eight years' practice, in attempting to remove the placenta, mistook, and tore away the uterus!

A physician in Springfield made the same mistake. After laboring for a time to the great distress of the woman, he prudently called in a brother doctor. This old physician, on seeing what the operator was about, burst out upon him — 'Get out of the way, you ignorant d—l; you ain't fit to doctor a cow' — and yet a regularly-instructed physician and accoucheur!

A physician in Hartford told the publisher that he was called in consultation with a doctor who had partially extracted the uterus, and thought it was 'some foreign body, that would have to be removed with the knife'!

A doctor in New Hampshire attended a woman. She having given birth to one child, the accoucheur kept her in position for several hours, and continued to apply snow to her abdomen; as he said, 'to make her bring forth another;' declaring that she had twins. But his wonderful science and obstetric skill were of no avail; for that could not be brought forth which had not been conceived.

Who ever heard of a midwife, with the light of nature and any degree of acquired knowledge, making such stupid and shocking blunders as these!

Extraordinary Operation.

FROM THE BOSTON MEDICAL AND SURGICAL JOURNAL.

The following is copied from the Journal, together with the editor's prefatory remarks. The public doubtless will be benefited by such exposures; not so much, however, *indirectly*, by the more thorough preparation of men-midwives, as by learning that man-midwifery is unnatural, and, for that and other reasons, dangerous, and to be avoided.

'We think,' says the editor, 'there is room for doubt in regard to the expediency of publishing papers like the following. Their injurious effects on the community in needlessly impairing confidence in the profession,

would seem to be apparent. It is possible, however, that this evil may be more than counterbalanced by an indirect benefit, as a more thorough preparation and greater care may be expected in those just entering the profession, when they are made fully to understand that the results of ignorance or carelessness in the practice of medicine cannot be concealed from the public. We have no doubt Dr. Moore had this or some other good object in view in preparing the article, and we therefore give it an insertion.'

NEW OBSTETRICAL INSTRUMENT AND OPERATION.

'The following account of an operation, or rather piece of butchery, which occurred not a hundred miles from Derry, N. H., is respectfully submitted to the editor of the Medical Journal for insertion. The merits of the instrument are left to the judgment of the profession, as being rather unique.

'Mrs. C., aged 35, slight form and delicate constitution, was taken in labor with her second child, on the morning of the 10th of March, 1845. Nothing occurred up to the thirtieth hour to mar the anticipations of the expectant husband, or interfere with the delectable anxiety of the old ladies to behold the arrival of the young stocking-mender — (the child proved to be a female.) The mouth of the uterus had been tardy in dilating, and at this period its efforts began to flag. Forty hours had now elapsed, with but little progress of the head. Ladies will talk in a lying-in chamber, and with very little provocation lash themselves into a high state of excitement. It was soon whispered that something must be wrong: side-winds were thrown out at the doctor, till the patient became alarmed and the doctor nervous. All action of the uterus had now ceased. The doctor being asked "what was the matter," replied that the head was too large; that something must be done, the woman being feeble, and not likely to stand it long. A consultation was proposed and agreed to. Will you, sir, credit the result of that consultation? It was deliberately and coolly proposed, as the only means of saving the mother, that the child should be destroyed, and delivery accomplished by removing it piecemeal. The question next arose, how should they accomplish this; for instruments neither possessed, and to send for another counsel would be a loss of time, and repugnant to

their judgment. And now, Mr. Editor, what do you think these men of science agreed upon as the best weapon wherewith to destroy the child? "Arcades ambo!" — "Tell it not in Gath, whisper it not in the streets of Askelon." A "*jack-knife*" was the tool selected! Yes, and they resorted to the barn to sharpen it on a grindstone, and then proceeded to insert the blade into the cranium of the child. After a few ineffectual efforts, the operator made a sudden plunge, and, believing he had penetrated the skull, gave the knife a rotary movement, and withdrew it to think what was next best. While pausing to concentrate their murderous efforts, unexpectedly the uterus contracted steadily and forcibly, and the head of the child came into the world, followed in quick succession by the shoulders and body, to the utter discomfiture of the doctors. But the worst feature of this tragedy was not yet over. In their confusion to hide their disgrace, they left the child to its fate, who soon eked out its brief existence from a wound in the right temporal region; the "*jack-knife*" having glided off the skull without penetrating, and divided a branch of the temporal.

'The prominent features of this case are strictly true, and it is left to the editor to make his own comments.

Very respectfully,
'N. MOORE.'

Derry, N. H., Sept. 16, 1846.

MORAL. Beware of jack-knives and of men-midwives; particularly of the latter, for then there will be no danger from the former.

'These men of science' would do well to attend to the advice of Dr. Maubray 'I would,' says he, 'advise such to practise butchery rather than midwifery, for in that case they could sell what they slay.' How nature did confound the wisdom of these obstetric professors! The child was born *entire*, notwithstanding the doctor had pronounced 'that the head was too large.' It was born *naturally*, in spite of the terrors of the obstetric butchers. Had the doctor been away practising *physic*, instead of leaning against the bed-post, to the annoyance of this 'slight and delicate' woman, and his place been occupied by a competent female practitioner, probably the action of the uterus would *not* have 'ceased,' nor jack-knife or other instrument been needed, nor any thing occurred to 'mar the anticipations of the expectant husband.'

Professor Bedford, of New York, On the Abuse of Instruments.

The reader is aware by this time that various instruments are made use of in obstetric practice. The one of most frequent application is the forceps, adapted, by the breadth and thinness of the blades, and in other respects, to clasp the head of the child before it is delivered, and then to aid in extracting it. The *Vectis* or lever, somewhat like a single blade of the forceps, by which a lifting and extracting force may be exerted. The *Perforator*, to perforate the child's skull, and excavate its contents, so as to diminish its size, when necessary from the narrowness of the pelvis or bony structure around the passage. Then there are hooks, and breaking instruments, and cutting instruments, &c., for performing *embryotomy*, or the cutting of the child in pieces, so as to remove it piecemeal. These instruments are all very useful when it is proper to use them; it is of course proper to use them when it is necessary; and man-midwifery makes them frequently necessary; as is evident from the reasons and facts given. And, aside from this necessity, there is a great propensity in many accoucheurs to try their dexterity in the use of these mechanical 'improvements.' In their admiration of instruments and their spirit for action, they follow in the footsteps of their immortal predecessor, Dr. Slop.

In order to give the best authority on this point, as on all others, the following testimony is presented:—

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 opportuni-

ties of becoming familiar with the use of instruments; for his preceptor 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 more thrilling horror than any given in this pamphlet—a piece of 'atrocious butchery,' to quote his words. The two 'operative' accoucheurs had cut up the child, and removed it, excepting the head, which was still undelivered. They had ruptured the uterus, and partially disembowelled the woman! When Dr. Bedford arrived, '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 instrumental exploits and 'bloody deeds.' 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. The doctor, by his unseemly presence, and perhaps his 'green baize bag' full of horrid instruments, (present, at least, in the lady's imagination,) shames and frightens nature out of the room; in consequence, the woman is sinking, dying; and then the operator finds it necessary to perform nature's work for her; and murderous work does he make of it.

A gentleman in the town of N., in this state, tells me that Dr. N., a venerable and celebrated physician, now deceased, 'told

him, with sorrow, that during his practice, he had with his own hands brought 7000 children into the world; and said that hundreds of heads he had taken off, many children he had mutilated, and those whose hearts he had broken he dared not enumerate. Freely and without hesitation he admitted, he never had and never could learn the art of producing a natural and quiet birth; and said that a woman, who had been blessed with three or four children, knew more about the matter, except in cases of very rare occurrence, than a man could learn in a lifetime.'

Testimony of a Lady.

The following is an extract from a letter by a highly respectable and intelligent lady of Westfield, in this state. Mrs. Stebbins, of whom she speaks, was an excellent and successful midwife, of that town, who labored untiringly to benefit her sex and to restore the good old fashion of employing female practitioners. She died in 1844, at the advanced age of 75 years. The letter, which was afterwards published, was written to a female friend in Springfield. The testimony is valuable; every word of it is weighty; it is an experimental proof of the correctness of the foregoing arguments. Let females read and *believe*.

'Though I consider the reputation of Mrs. Stebbins too firmly established, in her profession and as an individual, to require recommendation from her friends, yet I feel irresistibly inclined to write a few words in favor of the object she has so much at heart. I am myself much interested in her success, from having personal experience of her skill in very trying circumstances. When I was confined with my first child, I had the assistance of a celebrated physician, and merely survived a long scene of distress with a living child. With my second, I had the best medical advice, yet barely escaped death. My child was taken from me lifeless. To such a state was I reduced, that the physicians gave it as their opinion that I never again could be delivered of a living child. My anxiety was extreme when I found myself a third time in such a situation; but Mrs. Stebbins, who is a near neighbor of mine, gradually inspired me with confidence in her favorite system of trusting more to *nature* and less to *art*. I had seen the utter insufficiency of the best medical skill to secure me

from danger and distress, and resigned myself wholly to her management in my approaching confinement. With much less actual pain, much less embarrassment of every kind, I gave birth to a *living, healthy* child. I cannot now help thinking, that had I always had female assistance, and been of course free from the nervous agitation which the sight of a physician occasions, I should have escaped much distress. We all know how much the mind affects the body; I believe that a composed and tranquil spirit is the best physician in such cases.'

Physicians endeavor to cover up their bad success by attributing it to natural defects; and often, after their criminal operations, to make the friends think they have afforded superhuman aid and relief, they gravely inform the woman that she is not qualified to give birth to a child unmutilated. But when the women are relieved from the doctors, as in this last and other cases presented, nature gives the lie to these physiological pretensions.

In the case at Charlestown, before mentioned, where the three learned physicians (whose names I have) exhausted their obstetrical resources, mental, manual, and instrumental, and then pronounced it an *impossibility*, (which was very natural they should do,) and said the woman must die, undelivered, — even then nature, assisted by a plain, unscientific old handmaid of hers, gave the lie to their wonderful skill and oracular declaration.

In the case given by Dr. Channing, where four accoucheurs had *worn themselves out*, and tortured the woman till 'she was anxious to die,' even then *nature*, under the superintendence of a *professor*, who had sagacity enough to 'let alone,' (the best part of obstetric knowledge,) — even then nature did the work.

Gentleman and ladies should not be deceived, when, to excuse their misfortunes and mal-practices, doctors lay the blame to nature. Hear Professor Dewees on this point; and, having near a half a century of practice, he is certainly a good judge.

'I believe,' says Dr. Dewees, in his 'System of Midwifery,' 'that the united experience of all the American practitioners would not have led to a correct conclusion on this subject; as the occurrence of deformity of the pelvis is so very rare as never to have been encountered by some practitioners of pretty extensive experience. As far as regards my own, I must declare, I have not met

with extreme deformity in American women three times in my life.'

Artificial State of Society.

Notwithstanding this assertion of Dr. Dewees; notwithstanding there are midwives who have never seen a set of obstetric instruments, and yet have brought into the world thousands of children with entire success, we are told that we live in such an artificial and degenerate state of society, that qualified midwives will no longer answer, but we must have learned and scientific accoucheurs.

It is true that our population, particularly in cities, have in their physical nature somewhat degenerated during the *vast* period of about seventy-five years, 'since,' as we are told by the 'Physician,' in his Remarks, 'females were almost the only accoucheurs among ourselves.' Grant that, in this prodigious space of time, women, by inactivity, by dosing and drugging, by vicious fashions, and other causes, have made themselves less healthy, more 'nervous,' and that thereby their sufferings and dangers in childbirth have been increased.

What then? Why, employ an accoucheur, says one of them. But what says common sense? Women are artificial, — then do not make bad matters worse by your artificial parade and unnatural interference. Women are artificial, sensitive, nervous, particularly at such times, — then let there be as much of the natural as possible, employ Nature's handmaids, midwives, the only natural attendants.

Temptations to Mal-practice.

The 'London Lancet,' a medical periodical, as the reader will understand by the name, in an item on the employment of physicians as witnesses, says, a physician having given evidence in a criminal case, the judge afterwards informed him, that he was sorry the law had made no provision for his pay as witness in a case of that nature; but if his evidence had been a little stronger, it would have made the crime a homicide, in which case he would have drawn pay.

The Lancet very justly condemns such a legal custom, because it holds out a temptation to physicians to strengthen their testimony, to the injury of the accused.

Now, reasoning from the *less* to the *greater*

if a doctor would bear false witness to the jeopardy of a man's life or liberty, for the paltry fee of a witness, would he not make a difficult or instrumental labor out of a natural one, for a *much larger* consideration? If the birth is a quiet and ordinary one, the accoucheur gets an ordinary fee. If (which the reader has seen is the easiest thing in the world) the attendant can disconcert the woman and make a protracted labor, and a case for his forceps, the pay is all the better for it. If, which also is very easy, the operator can make a case for embryotomy or dissection of the fœtus, he may charge according to his discretion and his employer's ability. As Dr. Maubray says, 'And what is most unaccountable and unbecoming a Christian, is, that when they have wounded the mother, killed the infant, and, with violent torture and inexpressible pain, extracted it by piecemeal, *they think no reward sufficient for such an extraordinary piece of mangled work.*'

The Boston fee table reads thus: 'In all cases of extraordinary detention or attendance, also in proportion to the importance of the case and the responsibility attached to it and to the service rendered, when these are extraordinary, the charges shall be increased according to the judgment of the practitioner concerned;' and, it is proper to add, according to the ability of people to pay. So that these temptations to mal-practice expose the middling classes, and most of all the higher circles, to suffering and danger. The poorer classes, also, doubtless furnish *subjects for experiments*, to afford opportunities to learn the use of instruments.

A doctor, of Waterville, Me., is now in jail for murdering a *man* for his money; and it is not necessary to suppose physicians worse than any other class, to say that some of them might stifle an unborn *infant*, by retarding its birth, or destroy it by dissection, or might put in peril the life of mother and child by hurrying nature.

Illustration.—In matters of so serious import it is important to illustrate by *facts*; and here are two in point. But, to understand the cases, the non-professional reader must know something about

Ergot.

This is a black, corky-looking excrescence, growing on the heads of rye, — spurred rye, '*secale cornutum*,' a poisonous drug, which, given in powders or as tea, is useful to excite

the action of the womb when the powers of nature have become exhausted. The abuse of ergot in the hands of accoucheurs is one of the great evils connected with the practice. But to the cases illustrating the temptations to mal-practice.

Mr. C., a teacher of a high-school in New Hampshire, said to the publisher, that he heard Dr. Mussey, when professor in Dartmouth College, relate the following fact to his medical pupils:—

A physician, said Dr. M., was about to leave town for a while, and a case of midwifery was to come on in a few days, which he wished to secure to himself, and prevent from passing into the hands of any other physician. He went to the woman, (he being the family physician,) and found her about her work. He began to talk with her, and told her he thought her time had arrived. She laughed at him, and said she had had no premonitory symptoms. However, the doctor made her believe he was right, (women have wonderful confidence in doctors,) and she sent for her female assistants, and went to bed. The physician gave her a large dose of ergot, to bring on labor. It did not have the effect he expected, but—*killed the woman!*

A physician in N., N. H., called to attend a poor woman. He had another engagement of greater importance, which *must* be attended to. To hasten matters, he gave the woman a powerful dose of ergot. That did not accomplish the object, and he left her in great distress; another physician was called just in season to save her from death.

Another case still. A midwife, in this city, told me that she attended a lady who had been previously attended by Dr. —, a physician of experience and good standing. The midwife sat by patiently waiting the slow progress of nature. At length said the woman, 'Ain't you going to give me some powders?' 'Powders, no,' replied the old lady, 'I never give any powders except in case of absolute necessity. I have an ounce at home, and there it has been for a year or two.' 'Why,' replied the woman with some surprise, '*the doctor always gives them to me the first thing when he comes.*'

'Always!—the *first thing* when he comes!' without any regard to necessity. This is a specimen of the use made of these *time-saving powders*. The midwife remarked that the poor woman looked as if she had taken 'powders'—as white as the pillow on which she lay. It is a rare thing among us to see

a matron, who has had several children, with a rosy cheek and look of health. How much of this is owing to the unnatural treatment they receive in childbirth?

Says Dr. McNair, of Philadelphia, a physician of forty years' practice, 'There is no doubt in my mind but that one half of the women attended by these men are delivered before their proper period; and that this is the reason why we see so many deformed children, and meet with so many women who have incurable complaints.'

In regard to the use of ergot, it is considered by medical authors a valuable article when judiciously employed, but to be used only in case of necessity, as the least of two evils.

Dr. Dewees says, 'So far I can safely aver, that a number of instances have occurred in which I believe I should have employed the forceps, previously to my acquaintance with the powers of the ergot; but which were terminated by this drug both promptly and safely. And further, I am certain that I do not use the forceps once now, where I used them formerly ten times.'

As to the injurious effects of ergot, Dr. Holcombe, in a letter to Dr. Dewees, says, 'Your zeal in proscribing the use of the crotchet, will doubtless obtain, as it certainly merits, the plaudits of your brethren, at least the enlightened portion of them. But if the use of the terrible instrument just named be so reprehensible, (and who will presume to deny it?) how much less so, or rather how much more so, is the intemperate use of an agent which sacrifices a four fold, if not a twenty fold greater number of victims? More children, I am satisfied, from what I have seen and heard, have already perished by the injudicious use of the ergot, during the few years which have followed its introduction into the practice of this country, than have been sacrificed by the unwarrantable use of the crotchet for a century past! This, if correct, is a most serious fact; and of its truth I do not entertain the slightest doubt.'

It may be asked, 'Will not midwives be tempted to mal-practices?' Under the administration of midwives, instruments would rarely be needed. When they were needed, midwives would not use them, but would be obliged to call in a surgeon; and hence they would have an inducement to avoid the necessity of instruments.

Nor would midwives have the same reason as doctors have for hurrying matters, by ergot or by violence. A Boston medical writer

says, 'Professor Channing told his class, that some physicians, when hurried with business, would tear away the placenta, causing the patient, as he had often seen, a great deal of suffering and misery.'

Midwives, on the contrary, not being hurried by the miscellaneous duties of medical practice, could wait nature's time; and women are naturally more *patient* in attendance than men. And furthermore, midwives would have less need to use ergot even to save time; for Nature performs her office more expeditiously when not retarded by gentlemen spectators. Men-attendants, by their presence and manipulations, embarrass the patient, check the action of the uterus, and then administer a dose of ergot as an antidote. So, extracting and propelling agents all have to be resorted to, to counteract the mischiefs of this unnatural business of man-midwifery.

There is another way in which this custom appeals to that love of money which is common to humanity. And so long as the medical profession hold on to the whole practice for the pecuniary profit of it, — many of them knowing it to be unnecessary, unnatural, and injurious, — so long is it just to believe they may be influenced by those same pecuniary considerations in *special cases*. For instance, something like the following: —

Dr. A. gets up an instrumental case. It is according to the rules to call a physician as counsel, and also for the counselling physician to receive the same fee as the attending one. Dr. A. sends out for his friend Dr. B., and, if the husband is well off in the world, perhaps Dr. C. is also invited; with the tacit understanding that the said B. and C. are to do A. as good a turn. No decent man, if he has the means, will refuse to pay any reasonable number of accoucheurs, if he thinks they have rescued his wife from death.

This plan, however, of inviting in consulting physicians is important, and should not be dispensed with, notwithstanding the trifling expense; for it prevents many a young practitioner from hastily falling to work with 'jack-knives' and other implements. But still there is a little temptation to frail humanity.

Illustration. — A trader, in this city, told me that Dr. — attended his wife. It became necessary to use the forceps. He and his wife were consulted, and consented to the operation. The physician said it was necessary to call in another physician as counsel. The gentleman told the doctor that he had perfect confidence in his judgment

and ability to act independently. However, the physician, as was proper, called in another; who, by some accident or other, was a relative of his! This was proper too. It is pleasant to see people regardless of their relations. The operation was performed, and the gentleman paid the doctors their fee — \$20 each. This, he said, he did not consider of much consequence, — forty dollars for the delivery, — as he was tolerably well able to pay; but the misfortune was, (for he attributed it to no want of skill in the surgeons,) his wife was materially injured by the operation, and wholly disqualified from ever again bearing children.

Case 2d. — In a large village in this state resides a physician, whom I will call Dr. A. In another large town, a few miles distant, is a physician, a friend of Dr. A.'s, whom I will call Dr. B. Dr. A. attended Mrs. —; the forceps became necessary; whether in consequence of Dr. A.'s attendance, it would not of course be proper to say. The forceps became necessary; and as Dr. A. neither possessed nor had used them, another physician must be called to perform the operation. There were a plenty of doctors, and of course a plenty of instruments, in his own town; but physicians are sometimes jealous of home competitors; so the woman was permitted to remain in her perilous condition till the friend, Dr. B., could be sent for, near a dozen miles. Dr. B. came; and the attending physician, wishing some benefit to accrue to himself as well as to the patient, arranged with Dr. B. to apply the forceps and let him extract the child, — so that it might be reported about town among the women, that he had *used instruments*! This was important, as some of the women might need his services; and the reader is to understand that it is more *glorious*, as well as more *profitable*, to wield weapons than it is to serve unarmed. Well, Dr. B. applied the instruments, and his friend used them; and, as was very natural, between them both they ruined the woman for life. Her husband took her to our cities, consulted the greatest surgeons and physicians, but they told her that hers was one of those unfortunate cases for which nothing could be done.

The country abounds in unfortunate women whose lives have been made miserable by man-midwifery.

Dr. John King, of New Bedford, says, 'About four fifths of the female patients, whom I attend for falling of the womb and other diseases, have satisfied me, beyond a

doubt, that the sole cause of their afflictions was the improper interference of their men-midwives.'

Mrs. L. A. Bartlett, female physician in Newburyport, said she had been there but a few weeks, and had at least a dozen women consult her for *prolapsus uteri*, or falling of the womb.

Dr. Dewees, in his 'System of Midwifery,' speaks of 'the very many instances of injury that take place.'

These are solemn facts, which should be made known to the public, that others may avoid the causes which too often produce these calamities.

Man-midwifery in Boston at the Present Time.

The 'Physician,' in his pamphlet of remarks, published in this city, in 1820, says, 'In no place, probably, is the employment of male accoucheurs more universal, in no place is the practice of midwifery more safe.'

The first clause of the sentence is doubtless true. If it was then, it is particularly so now; for in 1820, there were but 61 doctors, and now there are 250. But that 'in no place is the practice of midwifery more safe,' is probably the opposite of the truth; and there are some reasons to believe that in no place is the practice of midwifery more dangerous and destructive. For 1845, the 'Bill of Mortality,' for the city of Boston, reports 245 stillborn children; for 1846, 303. The report for 1847 was not completed when this was written. If the increase is as great as for the previous year, it will give over 350.

Three hundred and three infants dead or destroyed in one year! To say that this was mainly the fault of nature, is to reproach the Author of nature. To charge it to the blunders of midwives is impossible; for there are very few of them in the city, and those are very successful. It must, then, to a great extent, be the result of man-midwifery; for 'in no place probably is the employment of male accoucheurs more universal.'

How many poor mothers have been destroyed, or been wounded and tortured, and doomed to the agonies of unnecessarily protracted and distressing labors, cannot be determined.

This is all explained by instruments and

ergot, and the meddling of men, — and most of these poorly qualified. There being such a host, all tampering with midwifery, each one must have a very limited number of cases, and consequently a limited experience; many unable to own a set of instruments, and much less to use them with any safety to mother or child; many students and young practitioners engaged in learning the art; — what wonder that there are three hundred and three stillborn children, with a proportionate number of maternal disasters, in a single year! Let it here be remarked, that no one, who thinks it safe to trust to inexperienced medical students, should ever say a word about the danger of employing qualified midwives.

Of course, out of the multitude of physicians in this and other cities, there are many who are thoroughly qualified for the practice, so far as *men* can be qualified for such duties. Now, suppose we adopt the custom which prevails in China, and to some extent in France and other European countries, and employ qualified midwives in the general practice, which, according to statistics and the best medical authorities, would include at least ninety-nine cases out of every hundred, — suppose women attend to all the general practice, and a few thoroughly qualified and skilful obstetric surgeons devote themselves exclusively to that branch, and stand ready to be called in when needed, — what a wonderful improvement, in point of propriety, and economy, and safety, would this system be, compared with the present ridiculous and destructive practice!

Boston can now boast of two hundred and fifty obstetric gentlemen, all engaged in 'taking care of the women;' and *such* care!

The 'Physician' in his pamphlet gives as an objection, that if the employment of midwives becomes general, physicians will not have opportunity to acquire practical skill, and would therefore be unqualified to assist in difficult cases. The evil which he fears already exists; for physicians, as a general thing, are not now competent for the management of difficult cases. If a gentleman employs a midwife, and, on account of uncommon difficulties, calls in a physician at random, he is by no means sure of getting a competent one; and perhaps the doctor is obliged to call in two or three more before any thing can be done; and among them all, they most likely make wretched work. In consequence of this evil, the citizens depend mainly on a few old and experienced prac-

titioners and professors, in case of extraordinary difficulties and dangers; so that even now we have partially adopted the system recommended, and a full adoption of it would obviate the existing and the anticipated dangers from inexperienced practitioners. It only remains to transfer the ordinary practice to midwives. If all physicians, in city and country, should, as now, study midwifery, and should have less practical knowledge, midwives would have more, and both together — the doctor with his knowledge of surgery and his muscular strength, the midwife with the practical skill — would manage difficulties quite as well as they are managed at the present time. And finally, upon this point, if no accoucheur, in the whole country, should in a single instance enter a lying-in room for fifty years to come, it would be safe to say, that not half so many injuries would be done, or half so many lives be lost, as have been for fifty years past.

'Where there's a will, there's a way.' Let the public be enlightened on this subject, and understand the advantages of *midwifery* in the true sense of the word, and there will be no insuperable obstacles in the way of adopting it. Other countries and governments find no practical difficulties, and surely we shall not.

The 'Physician' tells us that midwives are presumptuous, self-sufficient, and by their obstinacy endanger the life of the patient. It is true, as Tristram Shandy says, that 'human nature is the same in all professions;' but that women are less kind and sympathizing, less ready to sacrifice their opinions for the good of their suffering sisters, than doctors are, will hardly be credited. Some of these self-sufficient gentlemen have contemptuously rejected all advice and assistance of *aged mothers* present, till convinced of their error, and frightened at its consequences, they have supplicated the ancient ladies to help them out of their difficulties. A gentleman in Newburyport gave me a case, in which the doctor felt so grateful for the assistance afforded, that he instantly presented the old lady with a ten dollar bill. A midwife has a reputation to sustain, as has a physician; if, by obstinacy or any other cause, she does mischief, she is thrown out of employment. Moreover, the powers that be can make laws to punish the mal-practices of midwives, as they have done to punish those of physicians. We have as yet had but few examples of what midwives would be or do, if they were instructed and *diplomized*. Knowledge

diminishes self-importance both in men and women. If midwives are so successful in their present ignorance and disadvantages, what would be their success, and what would be that of doctors, if the tables were turned, and midwives had the books and the instruction, and the doctors had none?

The following fact is presented to show what it is possible for men-midwives to do even with their present advantages, and in the city of Boston, where the 'Physician' thinks the practice of midwifery is so very safe. If there is any mistake or misrepresentation, the responsibility rests on the editor of the New York Herald, in which paper the article first appeared. I copy from the 'New England Medical Eclectic,' edited by Calvin Newton, M. D., Worcester, Mass., November 16, 1846.

Case of Mal-practice in Boston.

FROM THE N. E. MEDICAL ECLECTIC.

'A poor woman, who resided at the corner of Kneeland and Tyler Streets, was *enccinte*. To assist in the delivery, Dr. P. —, was called in professionally, being a member of the Massachusetts Medical Society. When he first saw the woman, she was in labor; the child presented itself feet foremost. The doctor did not take the usual means for relief; on the contrary, he went to breakfast, leaving the poor woman to her peril. In an hour he returned, and commenced by manual force to extract the child. He took hold of the feet and body, and dragged so forcibly that he separated the body from the head, leaving the head behind. He gave it up as a bad job, and left the house. Dr. C., an eminent physician, also a distinguished member of the M. M. Society, was called in; but sent for and examined Dr. P., who was afraid to expose his butchery, and omitted to inform Dr. C., that he had left the head undelivered. Dr. C. agreed with Dr. P. that nothing could be done, and left the house. Twenty-six hours afterwards, Dr. C. was passing the house; and, as he was told that the woman was not dead, he went in to see her; and must have been horrified at learning what Dr. P. had concealed; and he immediately, by the use of the forceps, but with great ease, removed the head without injuring the woman by so doing. Owing to the murderous treatment she had received, she died the next day. The neighborhood became exas-

perated, and an attempt was made to bring the criminal brute before the legal authorities; but the Medical Society was two powerful in influence, and a successful attempt was made to conceal this barbarous deed.'

Let me remark that I have no antipathy against the medical profession; it is a useful and honorable calling. Physicians in their *proper place* I respect as much as any one; but sincerely believing that it is neither proper nor safe to employ them as midwives, it is just and necessary to present such arguments and facts as will aid in showing others the grounds of this belief. The Medical Society was incorporated by the Legislature, from a regard to the health and safety of the citizens of the commonwealth; but when a chartered society employs its powerful influence to introduce and perpetuate a practice which is manifestly injurious to the community, and to cover up barbarities which should be known, that others may escape the like, it is high time that *somebody* should make an exposition of the matter to the public.

Ignorance, Credulity, Impositions.

If man-midwifery is improper and dangerous, why is it so general in our enlightened country?

Answer. It is owing to a most unpardonable ignorance in husbands and wives, respecting the simple and natural process of childbirth, and the plain and easy duties of midwifery—to that credulity which accompanies ignorance—and to a disposition among the profession to cherish that ignorance and to practise their impositions on that credulity.

First, let us look at that ignorance of women which makes them an easy prey to medical impositions. Mr. B., of this city, said a physician remarked to him, that 'he did not consider women capable of taking care of themselves at the time of their menses, or monthly courses, and thought they ought to have recourse to medical advice.' As preposterous as this assertion is, it is not altogether untrue. Dr. M., in this city, told me that, while attending a young woman in parturition, she informed him that till after she was twenty she knew nothing what her monthly turns meant, and thought she had 'some dreadful disease'! She had a mother, and an older sister who was married, but she was none the wiser for that, nor had she ever seen any book or pamphlet to give her any light.

She might have understood music, and French, and painting, and drawing, but of herself and the most important affairs of her life she was ignorant as a child. Mr. C., of Newburyport, told me of a young woman, an acquaintance of his, who labored under the same delusion as this last lady; she thought she had 'some dreadful disease,' and to cure it she was in the habit of standing in a vessel of cold water, direct from the well! in consequence of which she ruined her health, and died in a few years.

The same ignorance is seen in regard to childbirth. Some women imagine that every thing depends on 'skilful doctors,' those who possess knowledge altogether above the attainment of the weaker sex, such as the lords of creation only can aspire to! This compound of ignorance and credulity gives them unbounded confidence in what the doctor says, sometimes believing things they *know* to be false, — as in the case given by Dr. Mussey, the physician made the woman believe she was in labor when she *knew* to the contrary.

Mrs. —, a midwife in this city, said her services were engaged for an approaching confinement of a young woman with her first child. The lady suffered greatly from her sad forebodings, had her sister who resided in the city at her house, and sent for another sister who resided far in the country. Great parade was made; the woman was to pass through a dark, unknown, and dreadful scene, and doubted whether she should survive. The time came; the midwife was there, and sat patiently watching nature's perfect work. At length the sisters began to whisper — If the midwife understood it, why was the patient continuing in such distress? They went out into the adjoining room; they talked, they cried, they returned, and asked the old lady if she could not relieve their sister. 'No,' was the reply, 'Nature must do her work first; mine comes afterwards.' Time passed on; the ladies began to think the midwife did not understand her duty. They argued with the husband, asked the old lady if she would be willing to have a doctor called in. 'O, yes, not the least objection,' was the reply. The doctor came, and sat by, and still the woman continued in the pains of labor. She began to be surprised, the sisters alarmed. They asked the doctor if he was not going to relieve their sister. 'All was right,' he replied, 'and he could do nothing till Nature had performed her office.' 'Why,' said they, more aston-

ished than ever, 'we thought, when *you* came, it would immediately be over with!'

Poor disappointed women! They thought that, by some magic or other, the doctor was going to effect the delivery at once. Is it to be wondered at, that some women have no confidence in midwives, when they consider delivery an *art*, and should prefer doctors, whom they consider possessed of such magical powers?

Husbands and wives should read upon the subject of midwifery, and have some rational ideas respecting a subject which so much concerns them. The patience of physicians is often sorely tried, and the *teasing* of the ignorant patient and friends tempts them to hurry matters faster than they otherwise would.

People are to blame for being ignorant, and physicians are to blame for trying to perpetuate and impose upon that ignorance. That they do so, no one can deny. Doctors often endeavor to alarm the fears of husbands and wives; tell them it is very dangerous to trust to a female assistant. Perhaps the next time the physician meets the lady, he says, 'It was lucky that I got there just as I did, otherwise you would have had an awful time of it;' and he tells of hair-breadth escapes, and of frightful accidents to those who tried to get along with women's help!

Mrs. Elijah Arnold, an educated and excellent midwife, in Westfield, Mass., in a communication says, —

'A clergyman and wife came from Albany, to reside a year or two in this town. He was in favor of employing midwives; but their family physician, in Albany, had informed the wife that for certain reasons her case would probably be a *difficult* if not a *dangerous* one. This so operated upon their fears that they would not consent to employ a female attendant, though Mrs. Stebbins, a midwife of great knowledge and extensive practice, pronounced it *consummate folly* in the Albany doctor, and told the lady that she had not the least grounds for alarm. We were unwilling that a *clergyman* should set such an example; but it was all of no avail, — a physician they must have. The result of the matter was, a very easy time, and the doctor could hardly get there in season for the birth of the child. All the reason we could imagine for this prediction of the physician, was the hope of being called upon to come from Albany to Westfield, for a fee, probably of 50 dollars. How many such cases will it require to convince women that impositions are practised upon them by the medical pro-

fession? I blush for my own sex, when they are so unwilling to "look through nature up to nature's God."

ACCOCHEURS' ASSISTANTS. — Physicians are not without their *active* assistants in this business. There are multitudes of shameless old hags, who have themselves been handled by the doctors till they have lost all sense of modesty, and they then act as 'procuresses' for the obstetric gentlemen, going about and stirring up the fears of wives, especially young ones, making them believe the only alternative is *death* or the *doctor*, thus frightening the poor trembling, reluctant females into the hands of these men. Such creatures should not be allowed around among modest women. They admire to make themselves useful as accoucheurs' assistants, principally for the satisfaction of being present at these exhibitions. They take particular pains to exclude the husband, that their sociability and freedom may not be abridged. One of them said 'she always felt *ashamed* to see a young husband hanging round'!

Illustration. — The following extract of a letter from a gentleman in Norfolk county, in this state, is exactly in point; it illustrates four particulars — the distress of virtuous young women in view of their immolation, — the character of these officious matrons, (who probably were themselves distressed in view of their *first* subjection to this depraving practice,) — the forcible manner in which doctors inculcate the dangers of trusting to midwives, — and the *refined* conversation sometimes carried on upon these occasions. The writer of the letter says, —

'A young lady, who removed into our town from a place where females officiated in midwifery, was anxious to employ a midwife, (and there is a competent one here;) but she was told by the *procuresses* that, if she did, she would *die*. Her husband told me that she wept for two weeks, in consequence of being obliged, as she supposed, to be attended by a man. A gentleman who lived in the same house told me the same, in regard to the young woman's distress. On the evening of her confinement these *jackals*, who were present, in order to convince the poor victim that they had done right, said, 'Doctor, suppose your wife was to be confined, — should you be willing to trust her in the hands of a midwife?' The doctor very solemnly and emphatically replied, 'I don't know what to compare it to,' (turning to see if he had the eye and ear of the patient,) 'but if I had a

cow that was going to *calve*, I should as soon think of turning her into a wilderness of wild beasts!' We have seen that instrumental performers tear in pieces and destroy, but who ever before heard the unarmed sisterhood likened unto wild beasts?

A GROSS IMPOSITION upon husbands and wives. — One more proof will be presented on this point; for it is not just to make assertions without good and ample *proof*, and the following authority will not be disputed by the profession or the people.

The 'London Practice of Midwifery,' — mark the authority; and English authorities are much in vogue in this country, — the 'London Practice of Midwifery,' says, —

'A patient, after the waters are discharged, requires a little management. It is not just [to ourselves] to stay with her; and yet it is necessary, if we leave her, to leave her in confidence. Therefore we may give her the idea of making provision for whatever may happen in our absence, we may pass our finger up the vagina, and make a moderate degree of pressure for a few seconds on any part of it, so that she may just feel it; after which we may say to her, "There, ma'am, I have done something which will be of great use to your labor." This she trusts to; and if, when she sends for us, we get there in time, it is well; if later than we should be, we easily satisfy her. "Yes, you know I told you I did something which would be of great service to you in your labor." If the placenta has not yet come away: "Ah, I am quite in time for the afterbirth, and that, you know, is of the greatest consequence in labor." And if the whole has come away: "We are glad the afterbirth has all come away in consequence of what we did before we last left, and the labor terminated just as we intended it should."'

Here it is! 'Man-midwifery exposed.' Two outrages committed under one head, — unnecessarily passing the finger into the vagina, and a base deception! For this choice bit of medical farce, laid down in the book, to be performed at childbirths, a husband pays a ticket of from five to twenty dollars.

Having presented this paragraph in one of my lectures, a physician, who, in accordance with a general invitation, replied to some of the arguments, spoke, in regard to this passage, somewhat as follows, — it was often *necessary* to do something. Women, not knowing what was necessary and what was not, would not be satisfied unless *something* was done, and, if the course recommended inspired confidence, the effect would be beneficial; and this was

on the same principle as giving *bread pills*, which have a good effect, as they *pacify* without injuring, and sometimes, from the faith in their supposed virtues, perform great cures. As I have no disposition to throw *all* the blame on the profession, I have here given the doctor's explanation; and will add, that a highly-respectable physician, in this city, told me, that he had *given offence and lost patronage* by not making examinations when *he* thought they were not necessary! These explanations divide the blame between the ignorant credulity of patients and the impositions of practitioners. But how long gentlemen will continue to purchase, and ladies to stand in need of, bread pills and such sort of midwifery as this, they can each determine for themselves.

Power of Fashion.

Many husbands employ gentlemen to attend their wives, not because they think it necessary, but because their neighbors will consider them unfashionable, and say they are niggardly, and unwilling their ladies should have the best assistance, and perhaps call their wives countrified and homespun, because they can have children without a scientific operator.

Illustration.—A gentleman of Lynn told me that a neighbor's wife was taken in labor in the night, and gave birth to a child. She and the women in the house understanding what was necessary to be done, every thing was properly attended to, and mother and child were doing admirably well. But next morning by peep of day, the husband slipped out and brought in an accoucheur, lest it should get wind, that his wife had had a child *without a doctor!*

This is a specimen of thousands who are under the dominion of 'What will they think and what will they say?' If public opinion can be so far changed as to enable these unfortunate people to act according to their views and wishes, or even to dispense with running for the doctor *when it is all over*, an important object will have been accomplished.

Some argue, with a little more plausibility, in this way: 'If I should do without a physician, and any accident should happen; if I should lose my wife or child; then, I *never* should hear the last of it; the doctors would whisper among the neighbors, and the neighbors would overwhelm me with re-

proaches, and perhaps too my own conscience would accuse me.'

But when the *truth* becomes known, that safety consists in employing qualified females instead of men; then, in case of misfortunes, (which will sometimes happen,) the husband and friends will console themselves with the thought that they had the services of those Heaven-approved assistants, midwives, and did not trust to this unnatural and dangerous innovation of employing male operators.

Even now, there is that state of opinion in some places in New England; and there are neighborhoods where a doctor would find it impossible to get into a lying-in room, unless he disguised himself in female attire, as did Dr. Vites of Hamburg. In other places things are fast tending to the good old custom.

A FAIR TEST.—Some friends of the cause, in an order to the publisher for pamphlets, dated Groton, Ct., October 18th, 1847, state, among other encouraging facts, the following:

'We are happy,' say they, 'in being able to inform you that we live in a neighborhood where there are nearly forty families who have never in any case employed men instead of midwives; nor did their predecessors, for more than one hundred years prior to this time. We need not say to you that they have been more fortunate, on these occasions, than those of their neighbors who have employed men-midwives; for such is the fact beyond successful contradiction; there have been fewer deaths of mothers and infants, fewer misfortunes of all kinds, than in the families who have employed physicians. This circumstance has caused the doctors in the vicinity, in order to retain their practice, to resort to all manner of ways to explain why it is that they are less successful than the midwives.'

No Disease, no Doctor.

Most physicians will allow that the mechanical part of a natural labor is very simple, and could be easily managed by a midwife. 'But,' say they, 'the whole system is concerned in the act of parturition; lurking diseases may then be developed and complicated with the puerperal state; therefore there is need of a physician, a physiologist.'

It is true that sickness sometimes attends or succeeds childbirth; but these are exceptions. And on this point, as on others, I will let physician answer physician. Dr.

Davis, of London, author of a work on midwifery before quoted, in speaking of Julien Clement, 'the fortunate attendant' on 'the favorite mistress' of Louis XIV., says, 'He saw the absurdity of considering puerperal women as persons diseased.' This is indeed an absurdity which ought to be seen by every man, professional or non-professional; yet, from the parade about having *doctors* to attend women on these occasions, the belief in the absurdity extensively prevails. I remember to have heard a lady give as a reason for not going on a visit from home, that 'her sister was *expecting to be sick*'!

Upon the false idea that parturition is necessarily accompanied with disease and sickness, follows the other absurdity of employing *physicians*, whose business it is to treat *disease*. But, setting aside the exceptions, puerperal women have no ailments which a good midwife and nurse cannot cure with their *domestic treatment*, better than the physician can with his drugs and medicines.

'The great doctor in these cases,' says the celebrated William Cobbett, 'is comforting, consoling, cheering up. And who can perform this office like *women*? who have for these occasions a language and sentiments which seem to have been invented for the purpose; and be they what they may as to general demeanor and character, they have all, upon these occasions, one common feeling, and that so amiable, so excellent, as to admit of no adequate description.'

Should it happen that other assistance was needed, a properly instructed midwife will understand when to call in a physician and when to call in a surgeon. In regard to distinguishing and foreseeing difficulties and dangers so as to know when to call in assistance, the author, quoted from the Encyclopedia Britannica, says that 'it consists with his knowledge that women can be taught all this.'

But says one, 'If in one case in a hundred a midwife should be insufficient, that case may be mine; therefore it is prudent to have a physician.' Now, we have seen that a labor is more likely to be a difficult one in consequence of employing a gentleman; therefore it is much better not to call the doctor till he is *needed*. There will be a plenty of time. Even now, in case of operations, the doctor must take time to call in one, two, or three others, before any thing can be done which a midwife could not do.

Dr. Ramsbotham, a distinguished author on midwifery, says 'A lancet and a female

catheter are the only instruments with which the obstetrical practitioner need furnish his pocket case; sufficient time will generally be afforded him for procuring any others he may want, even in the most urgent cases. He will find it convenient, however, especially in country practice, to carry with him two or three drachms of laudanum.'

Here we have the highest authority to show that there will be time to call in a doctor, 'even in the most urgent cases' and 'in country practice.' If the physician must be had beforehand, it would be well to manage as a very intelligent gentleman told me he did. He said his wife had a horror of having a physician in the room, would almost go into spasms if it was mentioned to her, weeks beforehand. But, not being willing to omit any thing which might possibly be necessary to safety, he hired a medical man to come and sit in his parlor as a 'reserve,' with a pledge to his wife that the doctor should not come into her room till she sent for him. The gentleman said he had been married twelve years, and had five children; and though his wife never had any other assistance than that of the mothers in the neighborhood, the doctor never had an opportunity to go in till it was all over. He was of course permitted to 'come in and see the baby'!

The above arrangement, between the gentleman, his wife, and the doctor, was admirable. And if people must employ accoucheurs, this is decidedly the most proper and profitable way it can be done. This physician, probably without being aware of it, was employed on precisely the same condition upon which Dr. Slop served in the 'Shandy family,' a century and a quarter ago. According to the compromise between Mr. and Mrs. Shandy, she was to have the midwife, and he, out of regard to his greater confidence in the 'scientific operator,' was to have the doctor in reserve. 'In a word,' says Tristram Shandy, 'my mother was to have the old woman, and the operator was to have license to drink a bottle of wine with my father and my uncle Toby, in the back parlor, — for which he was to be paid five guineas.' In the sequel, however, the Shandy family were less fortunate, for it became necessary to call in Dr. Slop, and the result, as has been stated, was most disastrous to Tristram's physiognomy and fortunes.

WHAT PROPORTION OF CASES ARE DIFFICULT ONES? — It has been stated that there

might be one case in a hundred requiring surgical aid; but according to many high authorities, there is not so large a proportion as that. Rees's Cyclopedia states one in five hundred. Dr. McNair, of Philadelphia, a physician of forty years' practice, speaks as follows: 'All that is proper to be done in a case of natural labor, from the commencement to its termination, will suggest itself to any person of common understanding; and I have long labored under the conviction that the office of attending women in their confinement should be intrusted 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 it would be altogether impossible to get over her troubles without their assistance.'

The publisher states, that a Unitarian clergyman, in Bedford, in this state, in conversation with him upon this subject, remarked that he thought midwives the proper assistants, as a general thing; he had often talked with his wife about the matter; said there might be cases when other assistance would be needed, but very rarely; said that an acquaintance of his, Dr. Gould, of Reading, who had probably had three thousand cases, told him he had not met with a single case of any peculiar difficulty among the whole.

As to instruments, according to their reports some doctors have used them as often as once in a dozen times, others once in a hundred, two hundred, and so along to once in a thousand cases. Dr. J. C. Bliss, of New York, reports 820 births, and in three of the cases only were instruments used. Dr. J. G. Metcalf, of Mendon, reports 932, of which five were instrumental cases. Dr. E. Woodward, of Quincy, reports, in the Medical and Surgical Journal, 1846, that he had attended 1200 cases, and in only three of these were instruments employed. There are some midwives who have had their thousands of cases, and never handled an obstetric instrument.

Dr. Beach, of New York, after near thirty years' practice, speaking of instruments, says, 'I have never had occasion to use them during all my practice, from its earliest period to the present time; and I have never lost but two cases in my life.'

Says Dr. Ewell, in his 'Letters to Ladies,' '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 human 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.'

Men-Attendants in Female Complaints.

The Boston 'Physician,' in his 'Remarks,' in speaking of the delicate scruples of females, says, 'Yet even separately from the practice of midwifery, it becomes absolutely necessary that these feelings should be subdued. For even the ordinary attendance of physicians in female complaints, requires at least as great a sacrifice, I think greater, or at least it is more felt, than that in cases of midwifery. But it is sufficiently obvious, if the employment of female practitioners [in midwifery] becomes fashionable, that it will create a fastidious nicety of feeling, which will make it be thought indelicate to suffer the attendance of a physician in any of these complaints.'

What an argument to present to the descendants of the Puritans! Female delicacy *must be subdued* by the attendance of men upon them in their peculiar complaints; therefore women should be kept sufficiently humiliated, by a continuance of man-midwifery, to enable them to submit to greater outrage upon their feelings on other occasions!

There can be no doubt that 'the sacrifice is more felt' on other occasions. If a woman omits to procure a midwife beforehand, and waits till the hour of distress and peril, she of course submits to any attendant, even a man, and to any treatment which he may say is necessary; not because the sacrifice of feeling is actually less, (for the *thought* of it tormented her day and night for months before,) but because, for the time, all nice feelings are overborne by more powerful ones. But calmly and deliberately to explain to a doctor all the symptoms of her delicate

ailments, and perhaps submit to an examination, is a thing that many a woman would not do to save her life. As Dr. Ewell says, 'There is scarcely a day in which some poor female does not suffer greatly, constantly enduring her disease from shame of exposure to physicians. Were they to know that they could be cured by one of their own sex, they would speedily apply for relief.'

The application of the catheter, in case of suppression of urine, is an operation which female physicians and midwives ought to understand and perform. Dr. Bard, president of the first medical college founded in New York, says, 'From motives of delicacy alone, this easy operation ought to be in the hands of women.'

Dr. Ewell says, 'There is no complaint to which females are subject more manageable among themselves. Nevertheless, this little knowledge, this ability to perform the simple operation of introducing the catheter, has been so neglected, that not only innumerable females have had to exhibit themselves to doctors, but many of them have actually expired for want of relief. In my undisguised opinion, it is a disgrace to the sex that a man should be called upon to perform an operation so indelicate, and so simple in its nature.' — 'Nevertheless,' says a Boston medical author, 'there are physicians who have been in the habit of visiting female patients daily for weeks in succession to evacuate the bladder.'

As to the reward for this service, or this piece of indelicacy, as Drs. Bard, Ewell, and others call it, the Boston Fee Table says, 'For a visit and passing the catheter, \$5. For a visit and passing the catheter when frequently repeated, and for that purpose only, \$1.50.'

How long will physicians endeavor to monopolize all the knowledge of the means of relief to the suffering, and impose upon their confiding patients? How long will the public submit to be imposed upon, and women consent to remain in ignorance, and be made the dupes of custom and of crafty men?

It would, of course, be unsafe for women to attempt to treat this or any other complaint without sufficient knowledge of the subject; but by the aid of such knowledge as they could readily obtain they would be spared the disagreeable necessity of calling on male doctors, in this and many other ailments equally improper to be treated by a man, and equally 'manageable among themselves.' We ought, therefore, to have in

structed midwives and female physicians competent at least to render women those little services which, as Dr. Ewell says, 'it is a disgrace to the sex that a man should be called upon to perform.' If this can be done, the 'Physician's' outrageous argument in favor of man-midwifery falls to the ground.

This point, however, is by no means so important as the main subject, midwifery; nor would it be advisable, as the 'Physician' intimates, to continue man-midwifery in order to prevent females from getting too much 'fastidious nicety' to submit to the greater trial of their feelings. For, if all the cases of female diseases, and all the cases of unnatural labor, were attended by doctors, they would not together amount to a tenth, probably not a hundredth part of the number of the *ordinary* cases of childbirth. If, then, the cases of natural labor alone were attended by midwives, it would be a wonderful improvement upon the present system of indiscriminate and almost universal sacrifice of those delicate sensibilities, 'upon the preservation of which,' as this physician truly says, 'the honor, the dignity, the virtue of the sex depend.'

Inhalation of Ether in Labor.

THE EFFECTS OF ETHER. — The rage for inhaling the vapor of sulphuric ether to relieve pain is likely to result in serious harm, before the public are made aware of its injurious effects. European medical journals report many cases of death by the use of ether. The very manner in which the vapor produces its happy effect — insensibility to pain — is injurious, necessarily so. Dr. Pickford, in the *Edinburgh Medical Journal*, says, 'It produces a chemical change in the constitution of the blood itself, of which the state of insensibility is but the natural consequence.' The ether inhaled passes into the circulation in place of the oxygen of the atmosphere, whose office is, to purify and vitalize the blood; in consequence, 'a black, vitiated blood circulates through the system, analogous in many particulars to that in putrid and malignant fevers.' The blood may not be entirely purified for weeks. The smell of ether in the breath has been noticed more than a week after *etherization*.

The effect of the ether is much like suffocation from charcoal gas, and life is as certainly destroyed by it, if the inhalation is continued a sufficient length of time and to

a sufficient amount. Animals, if made to breathe it after having passed into the insensible state, soon die from its effects, as has been proved by experiments in Paris and other places. Persons of delicate lungs have had fatal disease of those organs excited by inhaling the poisonous vapor. In others, existing pulmonary disease has been hastened to a fatal termination by this cause. Chloroform also is a noxious agent.

In severe surgical operations, where, in addition to the pain, the shock to the system might be perilous to life, the use of ether would be advisable. But this suffocating one's self to avoid a trifling pain is no mark of prudence or courage. Professor Siebold, of Gottingen, in a report on the use of ether, made to the Royal Scientific Association, in May, 1847, remarks that 'inferior surgeons and dentists are prohibited by law from the employment of this remedy, except with the concurrence of a physician.'

It will be seen, by the following fact, that there is a possibility of an evil which, perhaps, has not occurred to the minds of some. The *Gazette Médicale* states that a young woman in Paris went to a dentist to have a tooth extracted. To avoid pain, she inhaled the ether, and, while under its influence, she was violated. The dentist was arrested. — This possibility would of course be prevented by the presence of a friend; which would not seem an over-nice piece of propriety, even if the ether was not to be used.

THE USE OF ETHER IN CHILDBIRTH. — The use of ether to mitigate the pains of labor, would of course be advisable when the suffering and danger were likely to be greater without it than by its employment; where its agency is the least of the two evils.

The editor of the *Boston Medical and Surgical Journal*, in an article on the subject, says, 'It is not required, in our opinion, except under the most difficult and trying circumstances,' and 'we are inclined to believe that there is not more than one case in a hundred where it would be advisable to resort to this agent.'

From the great parade made about midwifery, and the world of books written upon the subject, it would seem to be the most complicated and incomprehensible of all the sciences; one which womankind cannot grasp, and should not aspire to!

And from the acclamation with which this new alleviator, ether, is hailed, the idea is derived that parturition is the most horrible of all human woes. The sentence, 'In the

sweat of thy face shalt thou eat bread,' is one of the greatest blessings to man in his present condition. As the poet Young says, 'Our curses are blessings in disguise.' So the sentence, 'In sorrow shalt thou bring forth children,' is not unmingled with good. If women would, by activity and a proper course of life, preserve their health and vigor, and follow the dictates of reason in conception, pregnancy, and parturition, ether would be unnecessary, for they would experience no more pain than is actually favorable — as is proved in cases of childbirth among the humble and healthy classes, and more particularly among the native women of the forest — no more suffering than is salutary. 'Pain,' says Dr. Pickford, 'is the mother's safety, its absence her destruction.' 'These pains,' says Professor Siebold, 'are natural phenomena, produced by contractions of the uterus for the purpose of expelling the child; they are intimately connected with the whole process of the wonderful act of parturition, and are therefore endured without detriment. Unlike surgical pains, they are rendered tolerable to the system by a gradual increase in severity, and even the most severe ones disappear, as if by a charm, as soon as the child is born.'

"Cases of Inhalation of Ether in Labor.

By WALTER CHANNING, M. D."

Such is the title-page of a pamphlet the second edition of which was published in this city, in July, 1847. It presents in a very favorable point of view the beneficial effects of ether, in protracted and distressing labors. Professor C. advises caution in the use of the ether, as its mode of action and possible effects on the health of the patient were not then understood, and 'the trials were to be regarded as "experimental."' As the agency and effects of ether on the system are now in a measure understood, and known to be injurious, there is still greater need of caution.

On a careful and candid perusal of these reports of cases of inhalation of ether in labor, its greatest benefit would seem to be that it puts women's modest sensibilities asleep, so that Nature, unimpeded by those 'mental emotions' of which Dr. Dewees speaks, can perform her office in the presence and under the diligent attentions of

gentlemen. Six of the seven cases detailed are those of young women 'in first labor;' whose nice feelings had not been previously 'subdued,' and who were, therefore, particularly liable to be unfavorably affected by this their first 'sacrifice,' and by those 'mental emotions' which, acting through the nervous system, may, according to Dr. Dewees, retard or suspend labor, from *two days to a fortnight*. It does not appear that in these cases there were any remarkable obstacles to delivery by the unaided powers of nature, had not the labors been protracted till strength became exhausted and suffering intense.

No disrespect is intended to the eminent professor, or reflection on his humane endeavors to mitigate suffering in these cases; for in most of them, it appears, he was called in to relieve from difficulties which already existed or had been created.

The first case given is that of 'Mrs. H., in labor for the first time,' a patient of Dr. W. E. T., 'whose pupil, Mr. J. D., was present, and who also from the beginning had faithfully attended to the case.' 'Ointment had been used,' 'the bladder had been carefully attended to, [by the employment of the catheter,] and the least possible amount of examination, I was told,' says Dr. C., 'had been made during the whole attendance on the case. The child had been dead some hours.'

Here, then, a young lady, in first labor, 'was faithfully attended to' by a 'pupil,' a young, unmarried man, of course; and these various appliances had been diligently put in requisition. After being made acquainted with these facts, the reader will not be surprised to learn—that the labor had been protracted 'forty-two hours,' that the child was dead and unborn, 'the vagina was swollen, rough, hot, especially about the urethra, or anterior portion of the pelvis,' that 'the woman could speak only in a whisper, and with difficulty even so, that 'she complained of great distress, and most earnestly entreated to be relieved from her terrible suffering;' and, finally, that ether, forceps, and even perforator, and hook, became indispensable!

Of course no special blame attaches to the men employed in this case, for they proceeded strictly according to the usual practice, and the rules of man-midwifery. It is not individuals or individual cases, but the shameful, detestable, and dangerous custom that this work is designed to expose.

In case sixth, given by Dr. Channing, he

says, 'On reaching the address, I learned that Mrs. G. was 24 years old; that this was her first labor; that she had been in labor about sixty hours, and such was the severity of the symptoms, that her physician had passed the last forty-eight hours constantly in her chamber, both nights and most of both days!' (People have been 'killed with kindness.') She had endured 'between two and three days of suffering, sleepless days and sleepless nights;' and there were 'obvious symptoms of exhaustion.' The medical gentleman employed had, of course, rendered the usual *assistance*, and 'from the beginning had faithfully attended to the case;' and 'the child remained just where it was ten hours before my being called,' says Dr. C. The ether was used. 'The uterine efforts increased very soon after the inhalation began. The pains grew stronger and stronger, and advanced the child slowly and steadily.' 'The child was born alive, a boy weighing seven pounds.'

The uterine action 'increased.' Since, as we are informed, ether does not, like ergot, directly excite or increase the action of the womb, this effect in this and other cases must have been produced *indirectly*, by annulling sensation and preventing 'the voluntary shrinking from pains;' and more especially by narcotizing those 'mental emotions,' shown to be so inconvenient and unfavorable to facility of labor. The beneficial effect of ether, as an antidote to man-midwifery, was very striking in this case; 'for in two hours' of insensibility by its use, 'that was accomplished which whole days did so little to advance,' while the patient was in her natural state. 'In this way, it did excellent service in diminishing exhaustion, or further waste of power.'

This unfortunate woman had endured 'between two and three days of suffering,' notwithstanding an *accoucheur* 'had passed the last forty-eight hours constantly in her chamber, both nights and most of both days.' In view of the terrible sufferings of childbearing women under the domination of man-midwifery, we may well exclaim with Dr. Dewees, when speaking of 'the very many injuries that take place,' 'How ill is this confidence repaid! a confidence which has cost the female so severe a struggle!'

As to the happy results of ether in these cases, precisely the same have been obtained by the aid of 'animal magnetism.' Sensation and consciousness may be overpowered by that peculiar influence communicable from

one person to another, as from one piece of metal to another, both being in the right condition. In this state, bashful females have had teeth extracted before great assemblies, and sensitive women have given birth to children in the presence of a party of gentlemen, and 'without the least apparent consciousness of the event on the part of the mother at the time, or memory of it afterwards.' Complete intoxication will also produce indifference and insensibility.

Many children are lost in consequence of protracted and exhausting labors, made such oftentimes by men-attendants. In detailing his case second, Dr. C. says, 'The head was born, the child breathed, and every thing promised well. But pains did not occur for some time. As happens not unfrequently after the accomplishment of delivery thus far, after very severe labor, contractions cease as from exhaustion, and the child remains in great peril. Perhaps as many children are lost in this way as from any other accident in delivery.' This will very naturally account for some of the *three hundred and three* stillborn children, under the administration of men-midwives, in Boston, in 1846.

Whatever the facts in Dr. C.'s pamphlet may prove in regard to the use of Ether, they are certainly strong proofs of the impropriety and danger of employing men to attend women in childbirth.

These various interesting discoveries and 'improvements' are useful and necessary accompaniments of man-midwifery; but if physicians would look beyond 'anatomy and physiology,' and make a little more account of the laws of the mind and their influence over the body; and more especially, if they would pay some regard to the laws of pro-

priety, and refrain from unnecessary intrusion into the lying-in room, and permit the ladies to assist each other, — protracted, distressing, and exhausting labors would be less frequent, fewer stillborn children would be reported in the bills of mortality, much less need would there be of ether, and ergot, and ointment, and antimony; and knives, hooks, and forceps, perforators, excavators, and other obstetric implements, would for the most part be permitted to *rust* in peace in their green baize bags.

Though much has already been presented on the question of the comparative safety of employing male and female attendants, much more might be added in the way of argument, facts, and testimony, if space permitted. Among others, the publisher has received a communication, of twelve manuscript pages, from Mrs. Sarah Crosby, of Groton, N. H. Mrs. C. is an excellent and intelligent lady. Seeing the impropriety and injurious effects of employing men in the practice of midwifery, she has labored unweariedly to encourage the employment of females; and has herself attended women in five different towns, and been sent for from more distant places. Her communication contains her personal testimony, and relates instances of sad misfortunes which she has witnessed in case of females attended by accoucheurs; and is, altogether, quite a complete train of argument and proof against man-midwifery.

In order to avoid man-midwifery, it must be rendered unnecessary. For this purpose, as an author remarks, 'All women ought to be instructed in midwifery, and those of a proper turn of mind should be qualified to act in the capacity of midwives.'

IMMORAL TENDENCY AND RESULTS OF EMPLOYING MEN AS MIDWIVES, AND IN OTHER DELICATE DUTIES.

Having endeavored to show that the employment of male instead of female assistants, is injurious to the physical well-being of individuals and the community, we now come to a still more important consideration — domestic and social happiness, and the moral welfare of society.

Some thoughts and facts have incidentally been given upon this point in the preceding pages, and from them the *manner*, in which this practice wears away delicacy, and consequently virtue, will appear evident; but something more directly upon this topic will now be presented.

A New York medical author in a late work on Midwifery, in speaking of the employment of men, says, 'The practice has an immoral tendency. The great intimacy and confidence which exist between the physician and the patient give the most unbounded liberties and temptations to the unprincipled and licentious'

ASTOUNDING ACKNOWLEDGMENT, by an advocate of man-midwifery. — In the Boston pamphlet, 'Remarks on the Employment of Females as Practitioners in Midwifery, by a Physician,' so frequently alluded to in the preceding pages, is the following startling testimony: —

'I know nothing,' says this medical author, 'which conduces so much to the security of the patient, and the satisfaction and happiness of the physician, as the existence of a mutual confidence, let me say affection, between them'! [Some women are attended by a half a dozen different doctors — how much 'affection' is left for the poor husband?] 'To the existence of these mutual feelings nothing contributes more than attendance of physicians in cases of midwifery. [Precisely so.] Women seldom forget a practitioner who has conducted them tenderly and safely through parturition. [What wonder that they *seldom forget* to argue for the doctor, and discard midwives, and train their daughters in the same sentiments, and for the same satisfactory custom!] They feel a familiarity with him, [nearly as much so as with their husbands,] a reliance upon him, [more than on husband or Heaven,] which are of the most essential mutual advantage in all their subsequent intercourse as physician and patient.

[Who have not heard their mothers speak kindly of *the doctor*?] On the other hand, the physician takes a deeper interest, [often an *affectionate* one,] and feels a more intimate personal connection [!] with those whom he has attended in this scene of suffering and danger, than with patients of any other description. [Some two or three years since, Dr. B., of Manchester, N. H., took such a deep interest in a lady patient, and she in him, that they *mutually* forgot, she her husband, and he his wife, and jointly eloped. Other ladies have more cruelly remained at home, after having sent away their hearts with the dear doctor.] It is principally on this account that the practice of midwifery becomes desirable to physicians. [!] It is this which insures to them the permanency and security of all their other business.'!!

This is an honest 'Physician;' unaccountably so. Had he been put under oath and dissected by a lawyer, he could not more correctly have divulged the secret motives of this whole business! Midwifery creates 'a mutual confidence, let me say affection, between physician and patient.' This results in 'essential mutual *advantage*.' 'It is this that insures to them the permanency and security of all their other business.' 'It is *principally on this account* that the practice of midwifery becomes desirable to physicians.' This is frank as it is true, and true as frank. Who ever believed that a regard for the safety of women and the good of the public brought into existence, and now continues, this absurd and immoral custom? Dr. Beach says, '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.'

It is in this way that man-midwifery has created the fashion of having a '*family physician*,' so prevalent at the present day. Probably half or three fourths of the families in the community would never have occasion to employ a doctor at all, if physicians were to give up the business properly belonging to midwives and nurses. But now, people having introduced the doctor into the family in the capacity of midwife, they think it incumbent on them to be unwell occasionally so as to extend patronage and keep up the

mutual good feeling. Indeed, in the present state of things, this second gentleman is nearly as essential to the perpetuity of a family as is the husband himself.

The 'Physician' speaks of the mutual attachment created between the practitioner and patient, by his attendance on her through 'this scene of suffering and danger.' The truth of this statement may be illustrated by an incident related in connection with the explosion and wreck of the steam-packet 'Pulaski,' on the coast of North Carolina, a few years since. The gentleman, concerned in the incident was a Mr. Ridge, of New Orleans, the lady a Miss Onslow, from one of the southern states.

By the frightful explosion the vessel was shattered; many of the passengers and crew went down; others remained on the wreck or took to the boats and planks. Mr. R. had secured himself upon some floating body. He saw the young woman struggling in the waves, and instantly rescued her. Again the surge broke over and separated them; again his strength and intrepidity saved her from the devouring sea. Some days and nights they were together on their frail raft amid the perils of the deep. At length they drifted ashore, nearly exhausted by watching, and hunger, and exposure. He was an ordinary man, and the wreck had made him a beggar. She was an accomplished young lady, and an heiress to an immense fortune. Yet such was her feeling of gratitude, affection, love, for him, that she married him; though he protested against making his services any claim for such a favor.

Now, take the parallel case of a woman rescued from a still more horrid death, by the physician's wonderful skill and devoted endeavors, as she naturally supposes. Perhaps, as in some of the cases given, he has constantly hung over her, or been by her, one, two, or three, days and nights; and at length, worn and exhausted with watching and suffering, 'they all come safe to shore.' Is there not deep gratitude, and, as the 'Physician' says, 'affection,' and if cherished by continued kindness and intimacy, may it not grow into love? It would be *unnatural* if it should not. Then farewell to domestic bliss!

So in cases of protracted illness, where professional duty brings physician and patient together daily for weeks and months. Women, like men, when they are sick, are feeble, irresolute, sensitive, susceptible; and they appreciate kindness from whatever source it comes. The following sweet and truthful

sentence is taken from the Boston Medical and Surgical Journal, in which it stands as a quoted item: 'There is, perhaps, no quality attached to a correct professional character, more fascinating to the generality of mankind, than a bland, gentle, humane mode of examining and prescribing for the sick. It steals like the sweetest notes of music into the bosom of the unhappy sufferer, and imparts a presentiment that all will go well.'

Now, this 'fascinating' attention does not 'steal into the bosoms,' and steal out the hearts, of females alone. *Men* yield to the potent spell when it is exerted by the opposite sex. It is said that Howard, the philanthropist, under the influence of this fascination, married the nurse who had attended him through a season of sickness. To avoid harm, then, great prudence should be observed when either party is under previous contract!

It is not to be supposed that, in a Christian community, every woman will allow herself to fall in love with every ill-looking doctor; or, if she should, that she will allow any symptoms of it to appear. But such is the *tendency* of the system, and the legitimate effects will appear, unless they are counteracted by *stronger* influences. Virtue and morality may regulate the *conduct*, but moral sentiments cannot restrain the spell-bound affections from going where they ought not. The Needle may not bolt from its pivot, but it will assuredly turn towards the object of attraction.

These confidential and affectionate feelings are very proper to exist between the parturient woman and an assistant of her own sex; but it is contrary to reason and scripture that they should exist between one man's wife and another woman's husband. The Bible commands, 'Let every man have his own wife, and let every woman have her own husband.' Not the body alone, but the soul. These customary improprieties at home, doubtless, are to many a husband a plausible excuse for going abroad. Mrs. P., a midwife in East Boston, said she formerly resided in the city proper, and sometimes acted as an assistant to women attended by doctors; and, after the child was born and the woman comfortably in bed, she had in several instances seen physicians take leave of the lady by an affectionate kiss.

Now, this was a very kind and innocent act in itself; but kisses have a language; and for that reason *non*-professional gentlemen are liable to heavy damages for kissing other people's wives. And if these ladies, who re-

ceived this seal of affection, had heard that their husbands were seen kissing other ladies, they would have had sad forebodings that improper sentiments at least existed between the parties.

An honorable physician would not *designedly* do any thing to bring about an unhappy result; but in the medical profession, as in others, there are all sorts of men. Many a one, of course, base enough to gratify his vanity by making a conquest of another man's wife. Many others, in Bible language, 'having eyes full of adultery, and that cannot cease from sin; beguiling unstable souls; a heart have they exercised with covetous practices; cursed children.' Various hypotheses have been offered to explain why the study and practice of medicine tend to irreligion, infidelity, and consequent want of principle, as has been observed by moralists, and medical authors themselves. Some suppose the constant dwelling on the material part of human nature creates an indifference to the spiritual and moral portion. A truer explanation would be, the nature of the physician's duties, the great intimacy now required between physicians and the female population. It operates unfavorably both by drawing depraved men into the practice, and by depraving men who were upright and honorable when they entered upon it.

Clerks and cashiers in banks, in consequence of handling so much money, look upon it as cheap, and, as the temptation is constantly before them, they are very liable to make unlawful appropriations. So the physician, by constant familiarity, comes to consider female delicacy and reserve as not worth preserving, and even fidelity and virtue are perhaps considered of as little consequence as bank notes.

Quite as bad is the effect on the patient. Many a daughter of infamy could date her ruin from some customary professional intimacy. That was the time she passed the Rubicon. No man ever suddenly became a drunkard, a debauchee; no woman without a preliminary *moral* prostitution ever became a harlot.

William Cobbett, an acute observer and widely celebrated author, in speaking on this very subject, the great intimacy of physicians with the female population, says, 'We have this conclusion, this indubitable *proof* of the falling off in *real* delicacy; namely, that common prostitutes, formerly unknown, now swarm in our cities, and are seldom wanting even in our villages; and where there was one

illegitimate child only fifty years ago, there are now *twenty*. And who can say how far the employment of *men*, in the cases alluded to, may have *assisted* in producing this change, so disgraceful to the present age, and so injurious to the female sex? The prostitution and swarms of illegitimate children have a natural and inevitable tendency to lessen that respect, and that kind and indulgent feeling, which is due from all men to virtuous women. And many a man is disposed to adopt the unjust sentiment of Pope, that "every woman is at heart a rake." Who knows, I say, in what degree the employment of *men*-operators may have tended to produce this change, so injurious to the female sex?—This was spoken of man-midwifery in England, but it is strictly applicable to our own country.

Buffon, — whose one hundred and twenty volumes, on the Natural History of the earth, minerals, plants, animals, and man, testify to his comprehensive mind and his vast research, and who, for his gigantic labors, was honored by his king with the title of 'Count,' — the intelligent observer of nature, Buffon, says, 'This species of folly, which considers female chastity merely a *physical* existence, has given rise to many absurd opinions, customs, and ceremonies, and to the most illicit abuses, and to practices which shock humanity. In the submission of women to the unnecessary examinations of physicians, exposing the secrets of nature, it is forgotten that every indecency of this kind is a violent attack against chastity, that every situation which produces an internal blush is a real prostitution.'

If the opinion of this eminent man be correct, man-midwifery, with other 'indecenties,' is a great system of fashionable prostitution; a primary school of infamy — as the fashionable hotel and parlor wine glass qualify candidates for the two-penny grog-shop and the gutter. Who wonders at the present rage of women for exhibiting themselves upon the stage, in a state of semi-nudity, so that the public generally may be entertained, without the trouble and expense of studying medicine!

The advertisement of the Medical Lectures for 1847, in the New York University, says, 'During the past five sessions, more than 1200 cases of midwifery have been attended by the students of the university.' Procuring and prostitution go hand in hand. This institution is bound to flourish, affording such facilities for information.

Physicians make great account of the fact,

that there is not usually an exposure of person to the eye. Professor Bedford, in his edition of M. Chailly's Midwifery, says, 'I hold it to be a rule which the pupil should ever keep in memory, that the feelings of the patient are always to be sacredly regarded, and on no account should there be an unnecessary exposure of her person.' This rule, if observed, mitigates the impropriety a little, and but a little, and the immoral tendency of the occupation still remains. The professor's sacred regard for the feelings of patients would be better manifested by encouraging the education of midwives.

Dr. Bedford's rule is very liable to be disregarded. Indeed, Dr. Gooch, another professor, says, 'We can examine patients in humble life as we please.' Mr. R., in a large town, some twenty miles distant, said an old doctor, late of that place, famous in midwifery, used to come joking into the lying-in room, and throw the lady's dress over her head with the utmost good humor. The young doctors, occasionally with him, were put to the blush; but it appears they have become less sensitive since, as two of them have made trouble in families, by improprieties. It would seem, too, that the freedom of this obtuse old man-midwife and the younger ones had depreciated the morals of the place, by making *easy* mothers and, consequently, easy daughters. For a physician there stated publicly, to show that doctors were no worse than the rest of the community, that *in one case* in thirteen the young married people there had an heir unlawfully soon after the wedding ceremony.

As to exposures, Dr. Ramsbotham, in speaking of the *Bandage*, to be applied after the delivery, says, it should be fitted next to the skin, and be so wide as to reach from the pubes almost to the ensiform cartilage; and, thus requiring exposure, he thinks, 'that there is something highly indelicate in its being applied by a man,' and that it should be applied by the nurse; and that 'the nurse must know very little of her duties,' if she could not do so. On the contrary, Dr. McPheeters, in the St. Louis Medical and Surgical Journal, copied into the Boston M. & S. Journal, says, 'Too much attention cannot be paid to the subject of bandaging. In the first place, it should be applied and properly adjusted by the physician himself.'—A doctor, in this city, recently attended a young woman, and applied the bandage. Afterwards, in conversation with another lady on delicate topics, he significantly remarked, that 'Mr. C.'s

wife was a very *pretty* woman.' It came back to Mr. C. and wife, that the doctor thought her a specimen of symmetrical beauty. They do not intend further to trouble curious doctors to do midwives' and nurses' work. Another doctor of this city visited a young woman, of 17, three days previous to her first confinement, and examined her each day. She felt wretchedly about it, wept, and asked the older women if such things were usual and necessary.

When lecturing in Lynn, last fall, several of the citizens spoke before the audience, approving of my course, and corroborating my statements with additional facts. Among others, a gentleman, known in the literary world, said he thought the business should be in the hands of women; said a doctor there, on seeing a beautiful lady *enceinte*, passing in the street, elbowed a friend, and said, 'I shall like to attend that lady by and by, to see her handsome person.'

Mrs. Ruth Stebbins, before spoken of, said the young doctors of Suffield, Ct., when speaking of attending the young wives on the first occasion, called it 'halter-breaking them.' And, rejoicing in their occupation, 'There,' they would say to each other, as they looked out into the street, 'there goes one that I halter-broke a few weeks ago—and there, yonder, comes another that I shall break in soon.' Suppress your indignation, reader, and go earnestly about correcting this libidinous system.—Dr. K., of M., in this state, remarked to the publisher, that he had heard young physicians, in their confidential chats, boast of having committed adultery with women, when their husbands were in the house at the time.—The other professions together do not furnish a tithe of the minor and gross improprieties that grow out of the present medical practice. I have matter on this head sufficient for quite a volume. Yet, of course, comparatively little leaks out to the public, and but a small part of that would fall in the way of any one person. Well does Dr. Ewell call it 'the secret history of adultery.' When there grows up a 'mutual confidence, let me say affection,' other things follow naturally.

Dr. A., from this city, located in the western part of the state, had an intrigue with the landlord's wife. The husband remained ignorant of it for some years. It came to his knowledge, crushed his spirit. He lived on a few years in wretchedness, and committed suicide. This system is the deadly Upas to domestic happiness.—Dr. B., of Salem, hav-

ing attended a woman, as man-midwife and physician, was detected some time after in the act of adultery with her. It became public through the city. There are many men, and many women, who have virtue enough to protect them if let alone; if assailed, or thrown into temptation, they fall.

Developments since made show that Dr. V. P. Coolidge, of Waterville, Me., was in a measure the victim of the depraving influences to which young physicians are exposed, before he became the hardened and deliberate murderer of his friend Mathews; and all remember what a passionate sympathy many of the ladies manifested for him at his trial — a depth of devotion due only to kindred or the dearest of friends.

Rev. Wm. Miltimore, a Presbyterian clergyman, of Litchfield, N. H., states, in a communication, that a 'physician, in his parish, having attended a pretty-faced woman during confinement, presumed upon his intimacy, and attempted to obtain unlawful favors.'

The public papers of June, 1847, state that Dr. S. S. Perry, of Gainesville, Ala., representative to the legislature, attended, as family physician, in the family of Col. J. A. Winston, state senator. Dr. P., as is not surprising, became a paramour, then an adulterer. Winston shot him through, in the Post-office, and exclaimed, 'Thank God, I have killed the seducer of my wife and the destroyer of my own peace!' Dr. Ewell speaks of 'the melancholy tale of the seduction of the wife of a member of congress from Carolina, by her accoucheur.' The papers of Nov. 1847, state that Alderman James Noe, of Lafayette, La., shot Dr. Easton. Cause — improper intimacy between Dr. E. and Noe's wife. The alderman was tried and acquitted.

A Dr. in Lowell told the publisher, that he knew a man and his wife who had just parted, in consequence of too great intimacy between her and her medical attendant. A physician told an acquaintance of mine, that, having attended a woman in her confinement, she afterwards called at his office and solicited him; and, as he had the hardihood to refuse, he proved as base as the woman. Mr. C., of this city, said a sailor's wife attempted to seduce her doctor, who fled. I was informed that a woman, in Fowlerville, N. Y., entered a complaint against her family physician for attempting improper liberties with her. The doctor testified, on oath, that the woman summoned him to call, took him into a private apartment, as if for professional advice, and then endeavored to bring him to her purposes; but he maintained his integrity. It appears that the woman had commenced and was carrying out the character of 'Potiphar's wife.' The physician was acquitted; and Madam Potiphar was balked in her vengeance.

A doctor in P., in this state, attended as accoucheur to a woman, and, apropos to the occasion, he attempted liberties with the female assistant. Being a member of a church, he was called to an account. Another doctor, in a large town, in this state, attended as man-midwife, and also, according to the promptings of the occupation, meditated freedom with the female assistant. It being in the early stage of the labor, he gave the patient a sleeping potion, and then commenced his endeavors with the other woman. The patient, however, did not sleep, but heard, saw, reported.

Humanity and morality demand that there should be a supply of female practitioners.

NOTE TO THE SIXTH EDITION.

Some have found fault with this work, as being calculated to cast suspicions on the whole medical profession. The history and facts presented are no more than were necessary to show that the statements were not groundless assertions; but the evidence of the evils of the present practice will not injure the *well-established* reputation of any physician. If the term *doctors*, or *physicians*, has been too often used without the prefix *some* or *many*, the reader is requested to make all due limitations, and not lay blame where none belongs.

The author has no desire to impair public confidence in the skill and fair fame of an intelligent, laborious, and honorable profession; he has been happily disappointed in finding so many of them, contrary to their pecuniary interests, ready to give their influence and aid in introducing females into practice.

On the other hand, the author would deem it unpardonable to cast reproach upon ladies who cannot yet feel sufficient confidence in the abilities of their own sex to trust their lives in the hands of female practitioners. But those physicians who improve their private interviews to alarm the fears of women, and ridicule this movement, and in all prudent ways show their hostility to it; and those females who join in this unbecoming opposition to the qualification of their own sex, and their employment by those who do prefer them — those are the ones for whom the tone of this work is altogether too mild.



