The wet nurse:
A study in ancient medicine and Greek papyri

A. Abou Aly

Summary

This paper examines Greek medical recommendations concerning the selection of the wet-nurse, her regimen, and her duties towards the child (in particular feeding, and later weaning) in comparison with some contemporary Greek papyri concerning wet-nursing which come from Roman Egypt. It also measures the degree of medical awareness among the laity presented in the papyri. This paper demonstrates that these medical recommendations, though they were perhaps insinuated by social needs, were not necessarily always followed either by the nurse or those who selected her. Greek contracts which correspond in points with medical recommendations differ in adding more prohibitions. Yet it seems hard to prove that they were either respected or supervised. They were meant to be a deterrent to ensure the nurse's well behaviour and every possible care for the child.

Résumé

Cet article étudie les recommandations médicales grecques observées dans la sélection des nourrices, le régime médical qu'elles étaient censées suivre ainsi que leurs devoirs envers les enfants (surtout en ce qui concerne l'allaitement et, plus tard, le sevrage). L'article établit par la suite un parallèle avec les papyrus grecs originaires de l'Égypte Romaine datant de la même époque. Il étudie également à travers les papyrus la conscience médicale collective. Bien que ces recommandations puissent avoir émané des besoins sociaux, elles n'étaient observées et appliquées ni par les nourrices, ni par ceux qui les sélectionnaient. L'article souligne l'existence de points communs entre les recommandations médicales et les contrats grecs avec un surplus d'interdictions et de prohibitions dans ces derniers. Il s'est avéré difficile de prouver que ces recommandations étaient respectées ou contrôlées. Elles semblent plutôt avoir été une force de dissuasion assurant la bonne conduite de la nourrice et l'octroi de tous les soins possibles à l'enfant.

Introduction

Graeco-Roman doctors, unlike their laws which did not address the rights of the embryo to life, took an interest in what related to children from the moment of conception till they grew up. (1) They were also concerned with selecting the best wet-nurse who could bring up a child. My intention is to look at the recommendations of authors like Mnesitheus of Cyzicus, Rufus of Ephesus, Soranus of Ephesus and Galen who wrote on the nurse selection, her regimen, her milk and her duties and obligations (in particular feeding and later weaning) (2) in comparison with several contemporary Greek papyri concerning wet-nursing which come from Roman Egypt. (3) The degree of medical awareness among the laity presented in the papyri is investigated here. I shall argue that doctors, by considering these matters, were responding to social needs for recognizing the qualities of the prospective wet-nurse. Yet their recommendations were not necessarily always followed by either the nurse or those who selected her.
Medical recommendations

Classical medical authors, Greek papyri and Latin inscriptions indicate that the employment of wet-nurses was a common practice in Graeco-Roman societies. Nevertheless doctors admitted that mothers were the best candidates to nurse their babies: their milk is more suitable; babies are used to their feeding them while being in the wombs and of course mothers are more sympathetic. Yet in the case of circumstances arising that might impede the mother from nursing her own baby any of the mother’s relatives or those who are similar in physique should be employed. Concern over the mother growing prematurely old or becoming emaciated due to breast feeding provoked Soranus of Ephesus to recommend selecting a nurse. He went even further in recommending the mother only if she shows the characteristics of the best wet-nurse.

On the other hand, Greek and Roman moralists expressed their dislike of mercenary nurses. Plutarch was convinced that mothers are more affectionate whereas the emotions of paid nurses are insincere. Favorinus even feared that the emotional bond, due to mercenary nursing, between the mother and the child would relax while the emotions of the child divert towards the nurse. He compared depriving a child of the nourishment of his own mother with killing a foetus in her womb. Yet Plutarch, acknowledging that mothers, due to physical weakness or an interest in having more children, might not be able to feed their babies, advocated careful nurse selection. It seems that Graeco-Roman societies were careless in their nurse selection for both Tacitus and Favorinus criticized their society for selecting at random incompetent nurses. Such concern with nurse selection was well founded: wet-nursing was an influential and respectable job which did not require training or qualification, but only finding a woman with experience of pregnancy, labour and mothering. Evidence from papyri indicate that a woman who had defined herself as a grave digger also worked temporarily as a wet-nurse. Hence doctors were stimulated by their concern over their society to guide parents and owners of children in recognizing the moral and physical qualities of the best wet-nurse. They paid attention to her health record, number of deliveries, sex of her children and her age. Yet it is questionable how far their recommendations could stand the test of putting them into practice.

Soranus recommended the provision of as many wet-nurses as available so that the child would be safely and successfully nourished. Soranus’ motive was purely medical for he was concerned with the possibility of the nurse falling ill or even dying. The child in this case either would suffer from the strange milk or would reject it completely and might fall prey to hunger. His advice could have been followed by only upper class Roman families that could afford hiring several wet-nurses (Galen himself recommended in case of illness that one should change to another nurse, for "the rich are likely to have more than one"). The mother in law with whom the philosopher Favorinus had a discourse declared that nurses would be provided for her grand child. The child’s father was of a distinguished and wealthy family. Soranus’ and Galen’s statements were influenced by the wealthy social milieu in which both lived. Their medical recommendation also suggests that there were many wet-nurses available for hiring. Mnesitheus himself firstly advised, in case of any change in milk quality or quantity, to switch to another wet-nurse.

Physical appearance was one of the most important criteria Greek doctors stressed. Some of those physical qualifications can be easily examined by mere sight, while others, such as what concerns breasts are hard to check without violating the decency of the nurse. Yet those which concern the nipples are in particular theoretical or perhaps doctors were
promoting the ideal. Such an ideal medical attitude appears in their insistence that the nurse should be free from all diseases: in particular from epilepsy, "hysterical suffocation" and neurotic disorders without elaborating over the method by which the nurse health record might be examined. (23) Hearsay or perhaps appearance might be the method. Such medical interest in the nurse's health suggests that diseases could be transmitted from the nurse to the nursling. Unfortunately the mode of transmission is not clear, but presumably the nurse's milk is a strong possibility. However, singling out these diseases carries a fear of their occurrence especially in babies. Epilepsy was already known as a childhood disease. (24)

Doctors insisted that the nurse should be prudent, clean, tidy, not ill-tempered, sympathetic, merry, easy going, gentle and self-controlled in relation to drinking and sexuality. (25) Such qualities are hard to be found in one person. Yet Soranus explains that the nurse's moral characteristics have a bearing on the way she performs her duties and consequently affect the baby. Exclusive moral and physical qualifications might have been the reason behind Mnesitheus' choice of Thracian or Egyptian (or the like) wet nurses, both of whom are non Greeks. On the other hand Soranus prefers her to be Greek so that the child gets accustomed to the best language, and not for any other reasons. (26) Whether he thought that the nurse's moral qualities would be transmitted to the nursling is not defined. He only admits that by nature the child becomes similar to the nurse in disposition which means that by living together the child picks up her manners. (27) Yet if we bear in mind the Hippocratic strong link between humours and personality, the nurse's milk which is affected by humours might carry traits of her personality to the nursling. (28) Despite their claims for the value of moral qualities, doctors did not discuss the wet-nurse's optimum social status: whether she should be free or slave, married or single. This in fact suggests that doctors did not object to employing slave women to nurse the children of wealthy Roman families. (29)

Doctors opted for the ideal when Soranus recommended that the chosen nurse should have given birth twice or three times before, whereas Mnesitheus advocated that she should have nursed more children of the same sex as the baby. (30) Yet they disagreed on the length of the period that should elapse between delivery and beginning of breast feeding: Mnesitheus specified forty days while Soranus recommended two or three months so that the milk quality would be better. (31) Soranus' advice takes into consideration the nurse's health and its influence on her milk. (32) It is in the nurse's favour as it gives her time to rest before offering her services.

Medical opinion concerning the suitable age for nursing changed over time. This change might be ascribed to a new medical awareness of the longevity of female fertility in the Roman period. (33) While Mnesitheus insisted that she should not exceed thirty but could be a year or two less, Rufus preferred her to be between twenty five and thirty five. (34) Soranus allowed her to be a little older, between twenty and forty, for "younger women are not experienced in child upbringing; they are still careless and childish in their minds. Milk in older women... is more watery, while in women at their prime, every physical function is at its best". (35)

Yet medical recommendations concerning both the nurse's diet and the method by which her milk might be examined reflect traces of difficult applicability. Doctors were aware of the impact of a healthy diet on procuring a healthy milk supply. They ascribed qualitative and quantitative changes in her milk to faults in her regimen which should be rectified. (36) Moreover Mnesitheus succeeded in estimating the role of good digestion in procuring good milk supply as he recommended a nurse with a good stomach which could be satisfied with all kinds of food and
not agitated. (37) A diet should be adequate without causing repletion or stomach upsets or constipation. (38) Diet was generally a pattern of life. Edelstein has argued that only the rich and healthy could afford following the diet prescribed by Greek doctors, for only they had the means and leisure for it. (39) In the nurse's case caution is needed in maintaining her ability to follow the prescribed medical diet, given the difficulty of looking after at least one child and a household while maintaining such a diet.

Milk, which is the prime reason for employing wet nurses, was carefully examined by doctors who elaborated on its quality and the method by which it could be judged. Texture, quantity, froth, taste, smell, colour and appearance were the principal criteria a parent or perhaps a midwife would examine. (40) Yet it seems difficult to believe that parents or midwives when first employing the nurse would be paying attention to all these qualities. It is also difficult to believe that a mid-wife would follow Galen, who linked milk with blood, for he asserted that milk decreases because blood decreases or deteriorates. This would imply a need for blood testing to discover the cause of milk decrease. (41) Furthermore Mnesitheus specified four milk tests, one of which is oddly enough to be made in the spring. (42)

Soranus, on the other hand, suggested that milk should be tested after the nurse has had a healthy regimen and also after an unhealthy one, for the best milk is that which is not spoiled even by an unhealthy regimen. (43) Soranus' suggestion implies that in the future, as the nurse surely would not report to her employee any defect in her milk, a doctor or perhaps a midwife should accompany the wet-nurse to check her milk regularly. Yet parents and owners of nurslings might have been following Soranus' first method of recognizing the milk of the nurse by merely looking at her and her child. (44) Nevertheless all these medical recommendations, though advanced, were not necessarily followed. To see how far this might be the case, it is necessary to look at the Greek papyri from Roman Egypt and to examine the non-medical point of view.

Greek papyri

Surviving Greek nursing contracts and acknowledgments of receipt of wages for nursing from Roman Egypt indicate that free nurses outnumber slave ones. (45) The employment of slave nurses suggests that they were considered equal to free nurses in physical and moral values, or perhaps any idea of differentiation between the two was never raised. Yet it is interesting to note that a considerable number of the nurslings were also servile and the argument of the bad influence of slave women on free nurslings would not have been discussed by owners of children. (46) A large number of the servile nurslings were obtained by picking them up from the gutter. The availability of exposed children to be picked up made easier the nurse's obligation in some contracts, or the child's owners in others, in case of the child's natural death, to find another child to nurse. (47)

The majority of the surviving contracts and receipts are silent about the nurse's age except for two: B.G.U. 297,7 where the nurse is thirty while in P.Bour. 14, 5 she is forty. The latter age which is rather old agrees with the reformed medical opinion which has been noted above. (48)

Whereas doctors are silent about the place where a baby is best nursed and looked after, some contracts show that the baby is nursed at the nurse's home. (49) They clearly oblige the nurse to nurse only one baby at a time. (50) On the other hand, there is no indication that doctors insisted on the same. Soranus, when dealing with the implication of the nurse having large breasts and hence abundant milk, did not make it clear if the norm was to nurse just one baby.
Soranus said:
"...while excessively large (breasts) have more (milk) than is necessary so that after nursing if large quantity remains it will be drawn out by the baby when no longer fresh and in some way already spoiled. If, on the other hand, it is all sucked out by other children or other animals, the wet nurse will be exhausted". (51)

However one might infer, reading carefully Soranus' passage that it was only under this particular circumstance that other children were nursed by the same nurse for it is inconceivable that the nurse should nurse animals too. Yet doctors, as has been noted above, recommended employing a woman who has given birth from forty days to three months earlier. This indicates that the nurse would nurse her child as well as the nursling she was hired for.

Nursing contracts are silent about the nurse's diet. Neither contracts nor receipts assign to the nurse any ration of dietary value. Wine, which had been recommended by doctors, is missing. (52) Only in P.Bour.14,15 is wine included as one of the nurse's rations. (53) Had it been meant for the baby as well, as recommended by Rufus and Soranus, though not by Galen (54), there would have been a clause to ensure its use for the baby and a penalty in case of misuse. (57) Such interdiction and the allusion to these qualities denote the layman's recognition of the value of healthy milk for the nursling and the possible danger that the child might face if the milk is spoiled. Yet one must wonder if the nurse's milk in these contracts was really tested for cleanliness and purity. However, neither type of contract alludes to any kind of milk testing. This might lead us to assume that references to such qualities were either made by the nurse to compliment herself or given to her by those who merely looked at her and her child, a method which was recommended by Soranus for judging the nurse's milk. (58) Hence when BGU 1109 explains that the reason behind employing a wet-nurse is the spoiling of the milk produced by the baby's mother due to an illness or weakness, we might infer that the only criterion of this spoiling is the quantity which in itself offers sufficient grounds for seeking a wet nurse. (59)

Yet one must speculate how a nurse would spoil her milk. Though contracts do not elaborate on this issue nurses would certainly understand the meaning of this clause. This might mean preserving her health and not necessarily following a particular medical diet. (60)

Nurses were prohibited not only from spoiling their milk but also from having sexual intercourse. Both doctors and laymen prohibited the nurse from sleeping with men. Whereas doctors explained the reasons, contracts remained silent. Doctors feared that sexual intercourse would diminish, spoil and even suppress milk as it either induces menstruation (Mnesitheus did not recommend the nurse whose menses had begun again) or leads eventually to conception. (61) Galen clearly advises his reader to look for another nurse if she gets pregnant or falls ill. (62) Yet it is puzzling that, though contraceptives were already known in the ancient world for Soranus himself gave lists of them (63), neither of these two parties did discuss the possible use of contraceptives to prevent
unwanted pregnancy. Doctors did not discuss it perhaps because they were interested in keeping the emotional bond strong between the nurse and the nursling. Or perhaps they were so in doubt of the efficacy of the contraceptives that they promoted what was certain and free from risk. (64) It seems that laymen shared the same stance with specialists, perhaps for the same reasons. As both doctors and laymen were primarily concerned with a continuous flow of healthy milk, sexual abstinence was the ideal. (65)

While doctors elaborated on the issue of weaning, nursing contracts did not oblige the nurse to return the child already weaned. (66) Nor was there a discussion of the child's diet during weaning, nor an indication of any penalty if a child was returned unweaned. Even in the surviving acknowledgments of receipt no evidence was given of handing the child back weaned, except for P. Oxy. 91 (18-20) where the nurse has returned the child weaned and having received every possible care. (67) Yet a bigger problem of estimating the average duration for nursing and also the proper age for weaning arises as these documents disagree among themselves on the duration of nursing; one contract is for six months, another for three years (68), while a large number are for two years. (69) This difficulty is increased by our ignorance of the nursling's age when he was first handed to his wet-nurse. Some contracts are also drawn after nursing has already started such as BGU 1110. Other contracts declare that the first six months are for breast feeding while the rest of the time, which varies from one contract to another, is for looking after the nursling. (70) Other contracts declare without specification of duration that the purpose of hiring the wet-nurse is for feeding with milk and looking after the child. (71) In other words we are ignorant of the child's age when it is returned to the original family. In short it is difficult to gather absolute information from these contracts or receipts concerning weaning. Yet it seems possible to argue that, given that contracts for two years outnumber the other types of contracts, and that doctors recommended two years as an age proper, two years was then the usual age for weaning.

Conclusion

Greek doctors helped their society in recognizing the best wet-nurse to hire by writing on the nurse selection, her regimen and her duties. Several voices were already complaining about the neglect children were receiving from their parents, who handed them down to any hired nurse. Yet medical recommendations concerning the nurse's physical and moral qualities seem rather idealistic as doubts emerge on their applicability. As regards testing the milk and letting the nurse follow a particular regimen, this would appear to have been followed only with difficulty. Nursing contracts and receipts which come from Roman Egypt correspond with the medical point of view showing their interest in her age, the nature of her milk and naturally her obligations. Both doctors and contracts prohibited her from sleeping with a man. Yet nursing contracts were more strict on the nurse by adding more prohibitions against spoiling her milk and nursing another child. They comprise penalties if the nurse violates any of these regulations. Nevertheless there is no indication of any right of inspection or how such an inspection might have been achieved. On the other hand the child's belongings which had been entrusted to the nurse were to be shown to the child's sponsor or family, if requested, and a particular penalty was to be inflicted upon the nurse if it appeared that she did not keep them unless there was evidence on the wasted possessions. (72) Yet in some documents the nurse was required to bring the child to his owner or parents to be seen for three or four days a month. (73) This would have given the child's owner or parents the opportunity to check. Yet in other documents this clause is missing and one might be driven to conclude that the child
was totally left at his nurse's home without any parental supervision. Moreover given the fact that the nurses did not necessarily live in the same household as the child's parents or owners and the private nature of some of these regulations (spoiling her milk and sleeping with men) it seems hard to imagine how a nurse could be supervised and how these regulations could be enforced. (74) In addition, though it is wrong to make sweeping assumptions, there is no evidence of a contract being annulled due to the breaking of any of these regulations.

If these interdictions were in practice difficult to follow or be inspected, why were they included in nursing contracts? Parents and owners of children entrusted nurses with their dearest. They needed every kind of legal protection against any transgression on the nurse's part. Economic strain was, as Bradley argued, behind accepting these stipulations. (75) Nevertheless nurses were aware that there would be no inspection on them to put their life in jeopardy. These penalties were meant to be a deterrent to ensure the nurse's good behaviour and every possible care for the child.

Notes

1. Husbands filed law suits against wives who aborted themselves, not because they killed the foetus but because they denied the husband his heir. The women's act was considered against society for it denied it its prospective citizens. Etienne (1976, 133-134). Bradley (1986, n.19, p.223) noticed that Soranus, though "assumed that infants had no inherent right to be reared, was amazingly punctilious about the care of those worth preservation". Soranus (II, 6) did not discuss or allude to any rights for babies to live. He was interested in drawing attention to which infant is medically fit to survive, and which is not. He should not be grouped with those who exposed children or believed in doing so.

2. Mnesitheus apud Oribasius, Collectiones Medicæ, lib. incert. 15; Rufus apud Oribasius, ibid, 13-14, 20; Galen apud Oribasius, ibid, 16; De Sanitate tuenda I, 9-11; Soranus Gynaikêia (Gynaecology), II, 12-15, 21 (References are made for the CMG's edition throughout unless it is otherwise indicated) (chapters 32-25, 41 Rosein's edition). It is important to note that Rufus’ authorship of these chapters is disputable. However because of their closeness to some Arabic fragments which are attributed to Rufus by the Arabic authors, al-Baladi and Ibn al-Jazzar, I shall be using them as Rufus’ own.

3. BGU1297; IV 1058,1106,1107,1108,1109, 1110, 1111,1112, 1153; P.Bour14; P.Cairo Preis. 31 V 17-28, XVI71-84; P. Grenf. II, 75; P. Meyer 11; P. Mich V 238; P. Oxy I, 37, 38, 91, XIV 1717; P. Rein II 103, 104; P. Ryl. II, 178,342; PSI III 203, IX1065; P. Tebt. II, 399; AegyptusXIII p. 563 f.

4. For medical works and papyri see supra. For inscriptions see Bradley (1986) and Sandra Joshel (1986). Bradley's study of inscriptions has led him to maintain that hired nursing was known to the lower classes as well as to the upper classes at least in Roman society. Bradley (1986, 201). Soranus' recommendations of different types of exercises according to the nurse's means as well as the low wages of some nurses in nursing contracts seem to support Bradley's argument.

5. Soranus, II, xi, 18; Orib., Coll. Med., lib. incert. 15, 7; Galen, VI, 35; XV, 394.


7. Soranus, II, 11, 18.

8. Plutarch, De liberis educandis, 5; Favorinus apud Aulus Gellius, XII, 1, 9.


10. Aulus Gellius, XII, 1,21-23.

11. Ibid., XII, 1, 9.

13. Tacitus, *Dialogues*, 29; Aulus Gellius, XII, 1, 17. Quintilian advocated choosing a nurse, with good character, who could speak correctly. Quintilian, I, 1.4.


15. P. Grenf II, 75, 1. Her employer is also a grave digger called Cassianus. He housed and paid for four nurses. Yet it is not clear if he employed them for his own services or for somebody else, and who could it be?


18. Orib. , lib. incert. 16, 3. One should not take Soranus' advice of employing as many wet nurses as available as contradicting his recommendations of particular types of exercises to the poor nursing women (II, 14, 24) for Soranus was interested in helping all the social strata.

19. Aulus Gellius, XII, 1.5.

20. Mnesitheus recommends changing to another nurse if milk stops. Yet he admits if this is not possible one should treat the case. Orib. ibid., 15, 17.

21. Mnesitheus apud Oribasius, ibid, 15, 2, 8; Rufus apud Oribasius, ibid, 13, 3-4; Soranus, II, 12, 19.

22. I disagree with Temkin (Soranus 1956 xxxiii) in explaining Soranus' choice of particular nipples (neither too compact nor too porous) as a consequence of Asclepiades, theory of atoms and pores, which the Methodists had reinterpreted. Rufus, who was not a Methodist, recommended exactly the same type of nipples. Soranus, whose choice is theoretical, is mainly concerned with the milk flow. His object is to keep the nursing from harm by illness or suffocation.

23. Mnesitheus apud Oribasius, lib. inc. 15, 3. According to Rufus parsley and the nurse's thick milk lead to epilepsy (Orib., ibid, 13, 13, 28). Children fall into epilepsy if they are bathed while digestion is not yet complete or after having been filled with much food (Orib. lib.inc. 20, 8). Rufus warns against great noises, shouting and frightening with dreadful scenes as they lead to the disease known as "children disease" (Orib.lib.inc. 20, 27). Soranus' on the other hand, declares that babies who are fed wine prematurely fall into epilepsy (II, 14, 27). He warns if the nurse's milk is spoiled the babies'and nerves are harmed, both epilepsy and apoplexy occur (I, 17, 38).

24. Rufus apud Oribasius, lib.inc. 20,27.

25. Orib., ibid., 15, 4 ; 13, 5 ; Soranus, II, 12, 19. According to Soranus, coitus cools the nurse's affection toward the child. It spoils her milk and eventually leads to pregnancy. Drinking harms the nurse in soul and body. It puts the child in danger when the nurse goes to sleep leaving the baby unattended. The baby might fall ill through her spoiled milk. It seems that Soranus thought that the sense of smell in babies at that tender age is so developed that the odour of the swaddling clothes which are not frequently changed due to the nurse's untidy mindedness upsetsthe baby's stomach.

26. On another occasion Soranus differentiates between Greek and Roman women; the former looks after her children while the latter neglects them (II, 20, 44).

27. Soranus, II, 12, 19.

28. Favorinus claims that the nurse's milk which is a variation of her blood carries the traits of her character. He tried to prove his point by drawing attention to the influence of the foster mother's milk on animals. He also drew attention to the effect of a new soil on transplanted plants. He furtheracknowledged the influence of the nurse's disposition on the child. Aulus Gellius, XII, 1. 10-20. Bradley (1986, 214) argues that the objection of Plutarch and Favorinus to mercenary nursing was perhaps due to snobbery more than to biological reasons.

29. Favorinus claimed a corruptive influence of the nurse on both the body and mind especially if she were a slave or of a servile origin, a foreigner, dishonest, ugly, unchaste orwine drinker (Aulus Gellius, XII, 1,17). It is interesting to note that Sandra Jeshel (1986,
8) has noticed a resemblance between Soranus' instructions for nurse selection and treatment and "the judicious purchase and use of property of an object for one's control".  
30. Soranus, II, 12, 19; Orib., ibid., 15, 5. Soranus criticizes those who say so for they do not pay attention to the fact that mothers who have twins, one of whom is male and the other is female, nourish them with the same food. Moreover animals use the same nourishment which does not make either of the two sexes more feminine or less masculine. Soranus II, 12, 20.  
31. Orib., ibid., 15, 6; Soranus, II, 12, 20.  
32. Soranus, II, 11, 18.  
33. Rufus agrees with Hesiod on eighteen as the age proper for getting girls married (Orib., ibid., 2, 1-4). Rufus compares the present and the past in favour of the past. This leads us to think that girls in his time married even earlier. On the other hand Soranus thinks that 14 is a suitable age of girls for defloration (I, 8, 33).  
35. Soranus, II, 12, 19.  
36. Mnesitheus apud Oribasius, ibid., 15, 20; Rufus, ibid., 13, 22-34; Galen, ibid., 16, 3-13; Soranus, II, 15. Galen also declares that milk quality depends on the nurse's regimen (De sanitate tuenda, I, 9). It is interesting to note that Soranus, who is a Methodist, follows Hippocrates in using diet as a therapeutic measure. He refuses folk practices to induce milk which has stopped in wet-nurses because they cause stomach upsets, deterioration and double the atrophy.  
37. Orib., ibid., 15, 2.  
38. Rufus apud Oribasius, ibid., 13, 6. Diet normally consists of exercises, rubbing, anointing, baths, (both warm and cold) and certainly food which consists of bread, soup, fish, meat, birds and wine. When the baby grows diet changes. The wet-nurse has to eat particular kinds of food while avoiding others. Exercises should be for all the parts of the body. Rufus apud Oribasius, ibid., 13, 6-22; Soranus II, 14. Soranus' exercises are not only for the humble as Bradley suggested (1986, 203) but for all backgrounds.  
39. Edelstein (1987, 303-316)  
40. Orib., ibid., 15, 9; 16, 1; Soranus, II, 13, 22; Galen, De sanitate tuenda, I, 9.  
41. Orib., ibid., 16, 3-4. If blood decreases one changes the whole diet into humid and warm. It it deteriorates one purges, and uses medicaments. See also Galen. De sanitate tuenda, I, 9.  
42. Oribasius., ibid., 15, 10-14.  
43. Soranus, II, 13, 23.  
44. Soranus believed that there were three ways by which milk was judged : by looking at the nurse; by looking at the child for if he is in a good condition the milk is then good; and finally by testing the milk.  
45. Free nurses : BGU 297, 1106, 1107, 1108, 1110, 1153; P. Bour. 14; P. Grenf 75; P. Meyer 11; P. Oxy. 37, 38; P. Ryl. 178++; P. Rein 103; P. Rein 104; PSI 203; Aegyptus XIII, p. 565. Slave nurses : BGU 1058, 1109, 1111, 1112; P. Oxy. 91; PSI 1065; P. Tebt. 399. Bradley's study of inscriptions from Rome indicates that the majority of nurses were either slaves or freed (Bradley 1986, 203).  
46. Slave nurslings : BGU 297, 1058, 1106, 1107, 1108, 1110, 1153; P. Bour. 14; P. Grenf 75; P. Meyer 11; P. Oxy. 91; PSI 1065; BGU 1109 (son of a freed woman). Bradley's study of inscriptions from Rome indicates that nearly half of the nurslings are from distinguished families while a "good proportion of nurslings seem to be slaves or children of slaves of freed status". Bradley (1986, 203).  
47. BGU 1058, 19-22; 1106, 20-26; 1108, 11-12; P. Ryl. 178, 3-6. There is a legal differentiation between the two types of contracts given by Johannes Hermann (1959, 494-497).
48. In P. Meyer 11, 3 and P. Cairo. Preis. 31, XVI, 71 the age was previously indicated but is no longer legible.

49. BGU 1106, 10; 1107, 6; 1108, 6; 1109, 7; Aegyptus XIII, p. 565, 11-12. Bradley (1986, 213) has maintained that no separation occurred between the mother and her baby as the employed wet-nurse lived in the same household. This could be the case at Rome, but the above-mentioned documents from Roman Egypt warn against the general applicability of this inference.

50. BGU 1058, 31; 1106, 30; 1107, 14; 1108, 15; 1109, 19; P. Ryl. 178, 1: P. Bour. 14, 19-20; Aegyptus XIII, p. 565, 27. They might not have meant the nurse’s own child but being employed to nurse another child.

51. Soranus, II, 12, 19.

52. Both Rufus and Soranus listed in detail what kind of wine might to be taken, when to be taken and for how long. Wine is prescribed for its good effect on the nurse’s strength, digestion and milk which benefits the baby. Rufus apud Oribasius, ibid., 13, 10-12; Soranus, II, 14, 26. The nurse usually receives her wages in money and oil which were not recommended by doctors, while wine is missing: BGU 1106, 15-16; 1107, 10-11; 1108, 8-9; 1109, 12-13; P. Meyer 11, 13-15; P. Cairo Preis. 31 XVI, 75-76; PSI 203, 5; P. Rein. 103, 10-16; 104, 11-14 (oil is no longer legible). In Aegyptus XIII, p. 565, 19-25 oil is for the child. In BGU 1058, 13-15 she is paid with money and morsels of dark bread. In both P. Tebt. II 399, 3-4 and P. Oxy 91, 13-15 she is paid with money to cover clothes, oil, caring and other expenses. In BGU 297, 13-14 she is paid with money, oil, clothes and other things. In BGU 1110, 13; 1111, 9 she is paid with money. In BGU 1112, 6-7 she is paid with money and other expenses. In P. Grenf 75, 10-11 she is paid with money and clothes.

53. Four birds monthly are also mentioned as part of her wages.

54. Orib., ibid., 20, 19; al-Baladi, Tadbiral-Habala, Ms. Royal College of Physician n° 8, Maq. II, bab. 38, 44; Soranus, II, 21, 48; Galen, De sanitate tuenda, 1, 11. Soranus warns against its removal during weaning. He in general warns against preventing the child from having access to whatever he has been accustomed to before weaning such as water, cold and hot food, and fatty things. Soranus, 11, 21, 46, 48.

55. BGU 1106, 11; 1107, 7; 1108, 7; 1109, 6-7.

56. BGU 1110, 8; P. Rein II, 103, 8; 104, 8-9; P. Cairo Preis. 31, V 18 : P. Bour. 14, 9.

57. BGU 1058, 29; 1106, 29; 1107, 13; 1108, 14; 1109, 18; 1110, 9-10; P. Bour. 14, 20; P. Rein. 11, 103+P. Ryl. 178.


59. Despite all these recommendations concerning milk, it seems that children under their nurse’s care suffered from emaciation due to hunger or dietto which the proceedings of a lawsuit recorded in P. Oxy 37 allude. An owner of a two year old slave child testified that he had taken the child away from his nurse after the child having become emaciated. The nurse claimed that the mentioned child had died whereas the one who had been taken by that person was her own child.

60. The nurse is obliged to look after herself and the child in every sense of the word: BGU 1058, 28-29; 1106, 27-28; 1107, 12; 1108, 14; 1109, 17-18. In P. Bour. 14 the clause of looking after herself and the child is incomplete.

61. Mnesitheus apud Oribasius, ibid., 15, 5; Rufus, ibid., 13, 19; Soranus II, 12, 19; Galen, De sanitate tuenda, I, 9.


63. Soranus, I, 19. On ancient doctors who discussed contraceptives see Keith Hopkins (1965). Suder (1991), on the other hand, takes the medical prohibition against sexual intercourse as an indication of failure to recognize the contraceptive effect of lactation on nursing women.

64. Ann Hanson (1992) and Gigi Santow (1995) argue that coitus interruptus as a contracep-
tive measure was also known in the ancient world. Yet it seems as my study tries to prove that both doctors and laymen might have been sceptical about the efficacy of contraceptives. They both promoted the safer and ideal method which was abstinence.

65. Bradley (1980), though he acknowledges the influence of medical opinion, ascribes such regulations to economical motivation. Slave-owners employ nurses for slaves’ babies lest work might be interrupted. Nurses, on the other hand, accepted such terms under the pressure of need.

66. Soranus believed that weaning should take place in the third or fourth half-year of the child’s age when teeth are grown. Soranus and Rufus disagree on the season that should witness the process of weaning; Rufus chooses autumn as it precedes winter which is the best season for digestion; while Soranus avoids autumn for its sudden changes in weather which is the most harmful and chooses spring for it is a well-tempered season. Weaning should be gradual starting from six months by increasing solid food and decreasing milk. Soranus was against the common practices of anointing the nipples with bitter materials for its sudden and injurious effect on the baby’s stomach. He also prescribed the child’s food during weaning. It is interesting to note that Rufus agrees with Soranus on the age two as the age proper for weaning. Orib., ibid., 20, 23-24; Soranus, II, 21.

67. In PSI 203,9 the word *apogegalaktismenon* (weaned) appears but it is difficult to understand the sentence because of the fragmentary nature of the papyrus. In P.Oxy 37, which is a record of the proceedings of a lawsuit filed by a child owner against his ex-nurse and her husband because of the child’s death, we learn that the nurse received the child after having weaned her own.


69. BGU 1058, 8; P.Bour, 14, 9; PSI 203, 4; P. Rein, 103,8-9; 104,9-10.

70. BGU 297; P.Cairo Preis. 31 V 22. Herrmann (1959 f.n. 25, 493) draws the attention o P. Ross. Georg. II 18 XVI, 72.

71. BGU 1058, 1106, 1107, 1108, 1109, 1112, 1153, I : P. Ryl 342; P. Cairo,Preis 31 v : P. Rein. II, 103,104; AegyptusXIII p. 564 f; P. Bour. 14; PSI 203, 1065; P. Meyer 11.

72. BGU 1058,32-36; 1106,31-35; 1107,14-16; 1108, 16-17; 1109,20-22.

73. BGU 1106,49-52; 1107,27-29; 1108,25-26; 1109,29-30.

74. BGU 1058,37-41; 1106,35-39; 1107,19-21; 1108,18-20; 1109, 23-25; P.Bour, 14, 24-27 (the clause of clothes mentioned above in other papyri is missing here); P.Ryl. 178, 8-12.

75. Bradley (1980)

Abbreviations

BGU : Berliner Griechische Urkunden
CMG : Corpus Medicorum Graecorum
P. as in P.Oxy : Papyrus

Bibliography


Galen. (1821-32) *Opera omnia*. Edited by Kuhn CG. Leipzig.


* I am grateful to Professors Mustafa El-Abbabi, Helen King and Vivian Nutton for their valuable comments on this paper.

**Biography**

Amal Abou Aly. PhD, lecturer in the department of Classics and Classical Archaeology, Faculty of Arts, University of Alexandria, Egypt. She has studied some aspects of Graeco-Roman medicine. She is also interested in the history of Arabic medicine.