The ancient origins of obstetrics, 
a rôle for women

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Summary

Ancient literature, epics and medical texts well testify the existence of a female competence in Obstetrics since the time of Hippocrates. Until the Imperial Age, both in Greece and in Rome, women were the only ministers of the rites involving birth and death: in particular, delivery was the special moment in which a specific female competence was required.

Résumé

La littérature, les poèmes et les textes médicaux anciens confirment l'importance de la femme en obstétrique depuis Hippocrate. Tant en Grèce qu'à Rome, les femmes étaient associées aux rites de la naissance et de la mort. L'accouchement faisait l'objet d'une attention particulière où la compétence féminine était requise.

Introduction

Mythography, ancient taies, and epics all testify since earliest times to the existence of a female knowledge of obstetric tasks. This compétence ranged between the world of magie and the practical expérience of natural remédies; especially plants and flowers endowed with a mild healing power. The opium poppy was probably used as a narcotic during the most painful phases of delivery. Moereover, myths such as that of Agnodike, reported by Igninus (1 ), funeral inscriptions and médical writers, both in the Greekand Roman world, undoubtedly testify to the existence of medically compétent women. Thèse were able to assist other women during delivery and to cure some of the most common female diseases, often connected to a lack of menstruation as a conséquence of difficult childbearing.

On the other hand, the possible identification of historical-epigraphic sources leads us towards more cultural problems testifying, at least in a classical area where Hippocratic medicine was practised and developed, to the existence of some form of médical or paramédical féminine éducation.

Diseases of women and médical féminine éducation

A useful approach to the problem may be found in Soranus’ text Gynekia (On diseases of women), written by the famous methodist physi-cian in the 1st century A.D.. According to récent historiographical discussion, this work was mainly addressed to médical students and to the pater familias who had, among others, the task of choosing the médical staff destined to practise a domestic profession. Soranus states that a fundamental attitude of the good midwife is study and learning,so that the propersubjectisone who has received an éducation, which allows her to learn practice after theoretical préparation. "The excellent midwife issh... who acquired theoretical knowledge and reliable expérience" (2).
On the other hand, the more recent compilation of Muscione (3) may be better interpreted as having had a didactic destination toward a partially female public, which would need such theoretical medical and obstetric basic knowledge, otherwise unobtainable in the absence of schools and formal educational training. Indeed, until the age of Soranus, Greek and Roman women were homely ministers of those mysterious rites and who officiated in the oikos (house) during the opposite, but deeply connected phases of birth and death (4).

Assistant in pregnancy and delivery

The specific connection between feminine diseases and female obstetric tasks is justified on the theoretical grounds that the existence of a secret homeostasis of the female body is supported by mechanisms quite dissimilar from those which, by heat, feed the male body. Women know that the vase-like hollow of their own bodies allows the male semen to mature, as in an oven, in virtue of its intrinsic heat, thus transitorily abolishing during pregnancy the coldness typical of the female body (5). Pregnancy and delivery represent the unique roles that society allows Greek women to play, except in the restricted sphere of religious ritual. In fact, Aristophanes’ Tesmophoriazouses mentions the honours that the community should bestow upon women, who alone can generate strong men. Whereas the opinion both in Aristotle’s texts and tragedies points to an entirely male generative process. In these texts, women have only the task to safeguard “the small plant they bear” in their wombs as an extraneous object (6).

Therefore, only women are admitted to assist in delivery, sharing its peculiar impurity, from which oikos men are preserved (7). They mimic the forced virginity of Artemis, needing a ritual purification for both the puerperal and the assistant women (8).

These, generally elderly women, often are never mothers themselves, thus best reflecting the image of the goddess patroness of delivery, and are excluded from the diffusion of knowledge. Although Plato’s Republic also suggests the possibility of some medical education for women, they have no access to any formal medical culture (9).

Therefore, obstetrics - according to a module destined to last until the Middle Ages and Modern Times - arose as a practical and technical competence, probably learned from a male physician working in a restricted domestic ambit (10).

This mainly practical competence is well testified in some texts of the Corpus Hippocraticum, which considers midwives or akestrides, (the women able to calm) (11) as the soothing women, who by overcoming the obstacles intended to preserve female decency (12), allow the physician to get knowledge of any pathological signs before the illness becomes incurable. In this context it is noteworthy that Plato’s Teetethes places maiae (obstetricians) in an intermediate sphere between real technical ability and experience in magic arts. No medical school provided such a competence. On the contrary, the schools reversed their statutes, as testified by the Corpus Hippocraticum using midwives and prostitutes as qualified sources to obtain useful information in order to treat cases of abortion, difficult delivery or gynaecological disease (13).
Hippocratic texts are therefore one of the few valuable testimonies of the existence in ancient times of an obstetric professional competence in women, which is also confirmed by the metaphor of Phaenaretes, Socrates’ mother (14).

The case of Sais

An exception to this view - although chronologically and geographically too distant to allow a real comparison - is shown in the case of the Egyptian town of Sais, where between the XXI Vth and XXVI Nth dynasties, in particular under Darius I, a medical school was reorganized. This had already been considered as one of the best Egyptian schools in the Vth century, as testified by the inscription on Udjahorresne’s statue in the Vatican Museum (522-483 B.C.). This school was probably located near the Life’s House in the temple of Neith, a local transposition of the cult of cow-shaped Isis - according to Herodotus - the future Greek Demetra.

The characteristics of the goddess, strictly linked to the extreme moments of birth and death, induced some authors to hypothesize that this school, according to the typical subdivision in specialties indicated by Herodotus, had mainly a trend towards obstetrics. Moreover, when one considers that the cult of Neith was probably diffused among women, the hypothesis can be advanced that the school at Sais was open only to women, who reiterated the obstetrical action of Isis-Neith, carrying the newborn in her arms (15).

Physician or midwife?  

The ancient world generally excludes the presence of a specifically trained physician near the parturient woman, unless in the case of a dystocic delivery. The contrast between the professional figure of the physician and that of the midwife is revealed by the behaviour of Agnodike showing her female nature at the Areopagus, vindicating the right to a female sphere of therapeutic intervention (16).

In Rome, the midwife would be replaced by the physician, where the generic technical competence of an entirely female staff had to be supported or substituted by a theoretically based ability, including the use of specific instruments. Thus the physician would intervene, questioning both the midwife and the patient and controlling the midwife’s inopportune initiatives. He was ready for every dangerous difficulty, leading as an extreme measure to the use of some surgical technique (17).

The transition of medicine as a practical art to that of a professional activity needing a formal training based on an academic literature (starting from the XIth century), did not seem to concern the field of Obstetrics (18). Female empiricism may be formally pursued as "charlatanism", while theoretical knowledge and "scientific investigation" of female pathology remained the privilege of certificated physicians. The gynaecological literature of the Middle Ages is written for an exclusively male public, but delivery, as well as examination of the female body are still the domain of women. Men may understand theory, but practice is far from their competence. The recent discussion about the real existence of Trotula as authoress of gynaecological writings, well testifies the case of a substantially "male literature" which was transmitted under the name of a woman to make easier its diffusion among a female public (19).
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Notes

Classical texts are quoted from the following editions :

2. Sor. Gyn. I, 4. 7-8
3. Muscio Gynaecia. R. Radicchi (ed), Pisa, Giardini, s.d.
11. CH, Caro 19, Li VIII, 614
15. Horodotus Hist. II. 175. Brooklin 47.218.48; Hearst 214, 14, 4-7: Smith 19, 2-14, as concerns Neith.

Biographies

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