

Medical morals, illustrated with plates and extracts from medical works : designed to show the pernicious social and moral influence of the present system of medical practice, and the importance of establishing female medical colleges, and educating and employing female physicians for their own sex / by George Gregory.

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MEDICAL DICTIONARY

EDITED BY

AND EXTRACTS FROM MEDICAL WORKS

BY

GEORGE GREGORY

BY GEORGE GREGORY

NEW YORK

PUBLISHED BY THE AUTHOR

100 NASSAU STREET

1855

MEDICAL MORALS,

ILLUSTRATED WITH

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DESIGNED TO SHOW THE

PERNICIOUS SOCIAL AND MORAL INFLUENCE OF THE PRESENT SYSTEM OF
MEDICAL PRACTICE, AND THE IMPORTANCE OF ESTABLISHING
FEMALE MEDICAL COLLEGES, AND EDUCATING AND
EMPLOYING FEMALE PHYSICIANS FOR
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By GEORGE GREGORY.



NEW YORK:

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129 NASSAU STREET.

1852.

MEDICAL MORALS.

PREFACE.

The object of this publication is to present to the public a series of papers on the subject of Medical Morals, which it is believed will be found interesting and useful. The author trusts that it will be found to contain some of the most important and interesting facts and opinions on the subject, and that it will be found to contain some of the most interesting and useful facts and opinions on the subject.

Entered according to Act of Congress, in the year 1852, by

GEORGE GREGORY,

In the Clerk's Office of the District Court of the United States for the Southern District of New York.

P R E F A C E .

THE reasons for preparing and publishing this work will be best understood by reading it. The author regrets as much as any one the necessity of the publication, but the evil which it aims to expose and correct is so inveterate, so vast and appalling, as to justify any needful remedy, though it were a thousand times more severe than this.

The author entertains no ill will against the men who at present compose the medical profession. It is not persons, but the *system*, he attacks. Were the evils in question to die with us who are now upon the stage, it might, perhaps, be best to let them expire undisturbed, and be buried in their robes of secrecy and darkness. But while men die, society and customs live, and even their change or modification often requires powerful revolutionary measures. There are many physicians who feel deeply interested in the introduction of women into the profession. They have daughters, and granddaughters, and other female relatives, scattered through the land, who they desire should be able to secure the ministrations of educated female physicians, instead of falling into the hands of vulgar and vicious men, with whom they know the profession abounds.

But while it is hoped that no physician will apply to himself any censure that does not belong to him, it is also desired that individual members, and the profession at large, should appropriate whatever blame is justly their due. The plates and extracts exposing the revolting features of the occupation, it must be borne in mind, are furnished by standard medical authors, adopted and approved by the profession, and

they ought not to complain if their own weapons are turned against themselves. These plates have been for twenty years circulating among a portion of the public, doing the mischievous work of alluring young men into the profession, and sometimes being used to overcome the modest scruples of women to submitting to such indecencies, by demonstrating to them that such things are commanded and pictured in the books. And now these ocular arguments against the outrageous innovation should be put into the hands of the public generally, as an antidote.

The original plates, the title, and the plan of this work, have been shown to some thousands of judicious, substantial, and intelligent citizens, who have recommended its publication, and above five hundred have contributed money for copies for themselves, and to aid in supplying it gratuitously to clergymen, editors, and others, in order to give it an extensive circulation.

The *object* of the work ought to be a sufficient proof that the author is not an enemy to women, but their friend, willing at any peril, even that of incurring their displeasure, to stand between them and their enemies, open or disguised, and to do whatever may be in his power to promote their welfare ; and he feels confident that all of them who detest the present system of practice, and desire the change recommended, instead of stopping to complain that a severe remedy has to be administered to effect the cure, will earnestly coöperate in accomplishing the restoration.

The contents of the work afford ample evidence of the existence of a high tone of female delicacy, — a sentiment which has often remained unconquered by danger, and distress, and the fear of death itself, — a sentiment, many a martyr to which sleeps in her grave ; and, as Dr. Ewell writes, “ 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.”

MEDICAL MORALS.

THE establishment and preservation of chaste and delicate customs in society, is an object in which every good man and woman must necessarily feel a deep interest. The tone of public virtue depends chiefly upon the influence of woman; and her influence will be pure and elevating, or vicious and degrading, according as she is kept pure or is debased by man.

The existence of gross and unblushing vice in a community is not the cause, but the consequence, of the depraving of public morals in the respectable ranks of society. Revolting scenes and examples of infamy repel from vice; but the secret and silent influence of prevailing customs and manners, of immoral tendency, is what most effectually corrupts public virtue.

We should all take an interest in this subject, because our own female friends and relatives will necessarily partake of the prevailing character of the times, and the customs which we leave will be likely to pass down to those who come after us; and if there are public evils which we ought to correct, and do not, we shall be held responsible for transmitting them as legacies to succeeding generations.

The custom of confining medical and sanitary knowledge to male physicians, thereby obliging females to consult them in all their delicate ailments and disorders, and to employ them in those conditions and circumstances in which, of all others in their whole existence, women would choose to be relieved from the intervention of men, appears to the author to be a violent outrage against female delicacy, and pernicious in its influence on the social and moral welfare of society. Not that it is intimated that women may not be strictly pure in heart, in spite of these tendencies, for some of them shudder, and

feel a sickening horror, whenever they think of what they have had to pass through. A lady in Woburn, Mass., told her husband she always hated to meet her doctor in the street, and would not if she could avoid him. Mr. T., of Portland, Me., said his wife, seeing her family physician coming into his place of business, slipped out at the back door, because she had such a repugnance to meeting him.

A highly intelligent and accomplished lady, in a letter to a female friend, writes as follows upon this subject: "I may never reap the advantages of this effort, but I pray that the next generation may not regard the richest boon of Providence with the almost unmingled horror with which, from my earliest knowledge, I have done, and many I have known. Although with a skilful physician of much experience, and of as much or more delicacy than most, at the mere remembrance of my experience six years since, the blood rushes back with almost choking impulse, and every nerve is quickened to agony."

Such is the experience of thousands of others—the nobility of their sex—*every day*, in this favored land. Surely the Creator has made a mistake in giving to woman such sensibilities, or man has grievously erred in thus rudely treating them.

The Bible repeatedly speaks of women assisting at births, but nowhere in the sacred records, extending over a period of thousands of years, is it intimated that man ever rendered such unnatural services; while it is expressly asserted that "God dealt well with the midwives." Fortunately for humanity, this monstrous thing, man-midwifery, is of recent origin, limited extent, and must inevitably, ere long, be driven from the face of the earth.

In a long and able article on female medical education, in Godey's *Lady's Book* for March last, Mrs. Sarah J. Hale, the editor, writes as follows: "The intrusion of men into the department of midwifery was first permitted by the profligate Louis XIV., in case of his mistress, Madame La Vallière, in order to conceal her shame. The unnatural and degrading practice has never been prevalent on the continent of Europe, nor even now in France, where there are, in the city of Paris alone, over six hundred licensed midwives, and several hundred are every year educated by the government for the provinces. It is in England, and the northern and middle portions of the United States, that man-midwifery chiefly prevails. Yet it is but about eighty years since it was first ventured upon in America. It

cannot long continue, now that public attention is called to the subject; and it is found that in nine tenths of the world female physicians for their own sex are, and ever have been, employed successfully, and that there is actually less feebleness among women in those countries than in our own, where constitutional ill health in mothers is fast making us a nation of invalids."

The effect of this rude dealing with female modesty is not always the same as in the cases mentioned. The natural tendency is to blunt its edge, and create an easiness of character wholly incompatible with true female delicacy. A woman in South Weymouth, Mass., on approaching one of her confinements, was asked by a female present if it was not a severe trial to submit to the manipulations of the medical gentleman. She replied, that it was at first shocking to her, the severest part of her sufferings, but she had become accustomed to it, and it did not trouble her much now!

Dr. Meigs, of Philadelphia, in his "Obstetrics," says, "In my opinion, no woman can be placed in a sanitary condition, compelling her to appeal to the aid of the accoucheur, without some sense of a mortified delicacy." There is, then, *always* a wound to modesty. A flower is not wont to thrive the better for being trod upon, nor delicacy to grow keener and stronger for being shocked and wounded.

That there is a lamentable degree of indifference, on the part of many women, in reference to these exposures of themselves and their daughters to men, is proved by the fact that they have shown so little interest in providing the remedy, by encouraging and aiding the education of female physicians. For example, five years ago, in Boston, a public movement was commenced, and has been continued to the present time, to establish a Female Medical College, and provide a class of thoroughly educated and skilful female physicians. But in all this time, notwithstanding the most unremitting and self-sacrificing efforts on the part of a few individuals, all the ladies of Boston and of New England have not contributed, nor induced their husbands to contribute, for this great enterprise, so much as they gave to hear Jenny Lind sing half a dozen songs; while there are wealthy ladies enough who, with little or no inconvenience, could at once establish and endow such an institution, if they felt a proper degree of interest in this object, which has such peculiar claims upon their support. Honor to those, however, who, by sums smaller or larger, have shown their good will to the cause.

So it has been in Philadelphia, where a Female Medical College was started in 1850. The active friends of the institution have had to labor on amidst sacrifices and embarrassments, fettered and thwarted in their philanthropic endeavors by the want of means, which it would be the easiest thing in the world for the ladies of that city to furnish, or induce their husbands to furnish.

In New York, a special movement to establish a Female Medical College, with an accompanying female hospital, has not yet been commenced; but there ought to be, and ere long will be; and it is hoped that all good women will sustain it with an alacrity and liberality worthy of themselves and the object. Should not the people of Massachusetts and the other eastern states soon furnish the means of placing the New England Female Medical College, in Boston, on a permanent foundation, the efforts now making in that city may be transferred to New York, as being more central for the whole country, and, on account of its vast population, being better adapted to carry out on a large scale the plan of a Female Medical College and a hospital for lying-in women and the treatment of the diseases of females and children, thus affording the pupils of the college the most ample facilities for a thorough scientific and practical education.

In the annual advertisement of the University of New York, Medical Department, session of 1852-3, we are informed that there is "an obstetric clinique every Monday, from 2½ to 4½ P. M. This clinique was first established by Professor Bedford, in October, 1852; and from that time, it has met with constantly increasing success. More than seventeen hundred cases of the most interesting diseases of women and children have been presented at it. So great are the facilities of New York in this respect, that it may truly be said that nowhere else do such opportunities exist for the study of this department."

Now, if young men can have such opportunities to learn midwifery, and the treatment of the diseases of women, certainly female pupils can enjoy greater advantages, because respectable women would not object to, or feel degraded by, having students of their own sex present to learn the obstetric and healing art; whereas they must or ought to object to being subjects for young gentlemen to practise upon.

In reference to most of the female portion of the community, it cannot be disguised that they are very much enslaved to the medical profession. Many seem to be as cautious about displeasing their

family physicians as if they had made them the confidants of all their privacy, or had committed improprieties with them, and feared exposure. Others have not the courage to hurt the doctor's feelings by setting him aside and employing a woman. For example, the wife of a clergyman in the city of Boston, in conversation with a midwife of extensive and successful practice, said she had entire confidence in her skill, and would like to employ her, but she was afraid that their family physician would feel hurt and displeased if she did not employ him. So, out of sheer kindness, to save wounding this man's feelings, she employed him to perform such services as are represented in the following plates!

Other women seem to be bound to their medical attendants by such a grateful and affectionate regard for services rendered in trying circumstances, that they feel impelled not only to withhold their aid and encouragement from the efforts to provide female physicians, but to oppose the movement. There are, doubtless, many others who honestly, but most erroneously, think their lives are safer under the revolting system of man-midwifery than under the natural and decent ministrations of women.

All these causes tend powerfully to retard the change of practitioners. But the greatest of the obstacles which this enterprise has to encounter is the influence of the medical profession. In a paragraph in recent medical journals, it is stated that there are, in the United States, fifty thousand physicians. Their influence is very great, and can quietly be brought to bear upon almost every man and every woman in every community; and it is, of course, with some honorable exceptions, exerted against the professional education of women, because this will transfer business and money and importance from them to females. This opposition is mostly carried on privately, with individuals, who, being ignorant of the more objectionable features of the present system, and of the fact that it is but a recent innovation, are easily convinced that there can be no improvement.

If a wealthy gentleman or lady has thoughts of making a donation or legacy to a Female Medical College, it is very natural that the medical friend or relative should be consulted upon the subject. I could publish the names of many physicians who, in such cases, have, with plausible arguments, exhortations, and deprecations, warned their friends and acquaintances not to give, but have met with comparatively few who have advised the inquirers to aid the object. An

old and very rich man in Boston, being applied to, gave a small sum, and said he would consult his medical friends about doing more. The next time he was called upon, he said he had conversed with physicians in whom he had confidence, and "they not only disapproved of, but *deprecat*ed the whole affair." Of course, he did not give any more for the Female Medical College. He, however, soon died, and left a large estate to heirs, and to objects of minor consequence. Another wealthy man in Boston, being applied to for aid in this enterprise, looked at the matter through his own common sense, thought well of it, and gave twenty dollars. But, being recently called upon with the expectation that he would subscribe liberally towards purchasing an estate for the institution, he said that he had heard the other side of the question, and had decided not to aid the object further. He had doubtless received eminent medical counsel. What if the apostle Paul had asked and acted upon the advice of the shrine makers and priests of Diana?

It is surprising that men and women of sense should forget that human nature is the same in all professions, and that medical men, like other people, are inclined to act from motives of self-interest, and are, therefore, rarely disinterested advisers upon this subject of female physicians. There are, of course, exceptions; but even physicians who approve of the object hardly dare to say a good word for it, lest they should incur the displeasure of their brethren. For example, above thirty years ago, Dr. John C. Warren and Dr. James Jackson, of Boston, interested themselves in introducing into practice in that city Mrs. Janett Alexander, from Edinburgh, where she was educated for the profession of midwifery. But it created a tremendous breeze of disapprobation among the medical fraternity, and these gentlemen soon declined to express any opinion when inquired of respecting the skill and competency of Mrs. Alexander, and the safety of employing her. "I don't wish to say any thing for or against it," as one of them replied to a gentleman who asked his opinion in reference to this movement in favor of female medical education.

This circumstance is not mentioned from any desire to place these eminent physicians in an unpleasant position before the public, but to put people on their guard against withholding their aid from female medical colleges because medical men do not recommend them. In fact, it is hardly reasonable to expect, in the present state of human nature, that they should, even when they approve of them.

It is properly the business of non-medical men and the public to encourage and sustain these institutions. There are, however, many independent and magnanimous physicians who act from motives of humanity and philanthropy, rather than from self-interest or any narrow professional considerations.

Many persons who approve of female physicians seem to consider the pecuniary and professional interests of their medical relations and acquaintances of more consequence than the physical and moral welfare of their female relatives and friends, and of society at large. But even in a pecuniary point of view, women are as much and more entitled to, and in need of, this employment and the support it will give, than are men, who can engage in occupations unsuitable to females, and better adapted to the lords of creation.

Physicians dislike publicly to oppose so decent and reasonable an object, lest they should too manifestly exhibit their selfishness and their fear of being outdone by female competitors. But sometimes they are placed in such a position as to be obliged to oppose publicly, or see the movement making formidable strides over their heads. This has been shown, during the three years past, in the Massachusetts legislature.

In 1850, the Female Medical Education Society, which conducts and sustains the Female Medical College in Boston, applied for an act of incorporation. The bill was opposed in the senate by Dr. Graves, but sustained by Mr. Dawes, who answered the doctor's flimsy arguments, and carried the bill through; and it subsequently passed the house of representatives. In 1851, the Society petitioned for a grant of money. Dr. Graves and Dr. Welch, being members, opposed the bill; and it was, by a majority of five votes, defeated in the senate, where it originated. In 1852, the Society again petitioned for an appropriation, and there being no physician in the senate, the bill granting ten thousand dollars in aid of the Female Medical College passed that branch without a dissenting voice. But in the house, it encountered Dr. Parcher, who, among other things, said he had been in practice for many years, and had never seen these embarrassments on account of the delicate scruples of women about employing male physicians! Not a very high compliment to his patients. It is said, too, that other physicians, one of whom holds a city office, busied themselves in lobbying among the representatives against the grant. For these, and other causes, the bill lacked nineteen votes of a majority.

In Philadelphia, also, the war against women doctors has been no less vigorously prosecuted. J. S. Longshore, M. D., professor in the Female Medical College of that city, in the appendix to an introductory lecture delivered by him to his class, in 1850, writes as follows :—

“The Female Medical College of Pennsylvania, while it slept in embryo, excited neither the interest, envy, nor ridicule of the profession. But since it has been brought into active existence, and taken its place by the side of its sister institutions in the city and country, based upon a legislative act inferior to none, supported by a trusteeship of twenty-four of the most reputable citizens of the city and state, supplied with a faculty capable of vying in intellect and moral character with the best, and furnished with a class highly respectable in point of ability, character, and numbers, it is made the target at which the bigotry and selfishness of the profession hurl their venom with unmeasured profusion. So dastardly are they in their attacks, that they hesitate not, *secretly*, to plot the destruction of private reputation, and attempt to immolate at once talent, virtue, and character on the altars of their miserable inquisition. A gentleman connected with the school, who occupied a respectable position as a public teacher before he entered it, whose life is unspotted, and whose character is without a stain, was secretly, without his knowledge or consent, proposed as a candidate for membership in one of the oldest and perhaps strongest medical associations in the city, for no other conceivable purpose than to wreak upon him their vengeance, and thereby blast his professional reputation, and render his name odious, as being a fit subject for rejection by their *very respectable* Medical Society. What unmitigated meanness! What low-life cowardice! The midnight clan that sends forth the incendiary with burning torch is less to be contemned than such a conclave.”

The above is an indication of a low state of “medical morals” in high places. One would hardly suppose that, in the city of William Penn, in the very middle of the nineteenth century, an association of educated professional men, claiming to be gentlemen, could be guilty of so base a transaction. But human nature is the same in all times, places, and professions.

The following narrative, which some one ought to have published at the time of the occurrence, but which now first appears in print, still further illustrates the opposition to female physicians :—

REMARKABLE PROVIDENCE.

A Female Physician vindicated from the Charge of Homicide, brought against her by three medical Men; a young Man saved from Disgrace, and the Memory of a young Woman from Infamy.

In the town of Waldoboro', Me., resides a female physician, Mrs. Lucy H. Angell, who, in 1848, attended the first term of the New England Female Medical College, in Boston, and, in the following year, commenced practice in the town and village above named. As many persons there had interested themselves in securing her residence in the place, she soon had professional calls, and gradually increased her practice, particularly in the department of obstetrics, to the manifest annoyance of the male practitioners. Though she had many friends, who deserve great praise for the firmness with which they sustained her, she had to encounter a strong current of ill will and opposition from the three male doctors of the village, and their patients and friends.

In October, 1850, Hannah R. Parker, an orphan girl sixteen years of age, entered Mrs. Angell's family, where she continued to reside till June following. While there, she suffered with pain and local inflammation, which finally terminated in an abscess of one of the appendages of the uterus. From the symptoms, Mrs. A. judged correctly of her disease, and bestowed upon her such care and professional attention as her condition seemed to require. On the 17th of June, the girl was removed to the residence of her grandfather, Jacob Hoah, four miles distant, where she was attended by Dr. Elijah R. Daggett, one of the physicians of the town. After leaving Mrs. A., it soon began to be whispered about that the girl was *enceinte*, and that by Mrs. Angell's son, a youth of fifteen years. The doctor, having visited her, gave it as his opinion that she was suffering in consequence of an abortion produced upon her, (by Mrs. Angell, of course.) He communicated his opinion to the grandmother, and wished her to make his patient confess to the charge, if possible. The poor girl was greatly astonished and distressed, and before God protested her innocence, and did so to the last. Mrs. Angell also declared to the grandfather that this was a base and groundless charge against herself, and a cruel slander against the character of his granddaughter, whom she had ever found to be a modest and retiring girl.

On the morning of Monday, July 7, 1851, Hannah R. Parker died; and the physicians, — Elijah R. Daggett, M. D., Hiram A. Bliss, M. D., and Andrew J. Harlow, M. D., — having asked and obtained permission of the selectmen of the town, made a post mortem examination of the body, a constable and other witnesses, male and female, being present. After dissecting a while, and examining the uterus and contiguous parts, they went out and conferred together about two hours, and then returned and exhibited the parts, and demonstrated to the non-professional persons present, that the physical proofs of virginity were wanting, and that pregnancy had existed. They furthermore declared that violent means had been employed by the woman (as they called Mrs. Angell, carefully avoiding to speak her name) to produce an abortion, in consequence of which the girl came to her death.

When this result was reported to Mrs. Angell, she expressed her astonishment, as she had not expected that professional ignorance or malice on the part of the physicians could lead them to such a decision. She solemnly declared that the accusation was utterly false, and that the only object the physicians could have was to ruin her character, and with it her practice. Notwithstanding these averments, and the earnest protestations of the dying girl, this conclusion of a medical council, based upon the previous symptoms of the patient and a post mortem examination, of course gave confirmation to the stories that the attending physician and others had set afloat previous to the girl's death. The subject was in every body's mouth, men and women, and the boys in the streets. The popular excitement was increasing, and a feeling of indignation was gathering against the female physician and her family.

Though conscious of her innocence, Mrs. Angell saw not how she could vindicate herself from a charge substantiated by such a weight of professional authority, with not a medical friend in the town, and the public sentiment strongly setting against her. She felt powerless and almost in despair. She, however, conferred with some of her friends, — for she still had friends, who had confidence in her integrity, — and expressed a desire to have a reëxamination of the body by other physicians. They advised her to do so, as she stood accused of a high crime, and was at any time liable to be arrested. She also telegraphed to Mrs. Jane R. Albee, of Damariscotta, a sister physician, who had been a classmate of hers at the college in Boston.

This was on Tuesday. Mrs. Albee arrived the same evening. The funeral was appointed at two o'clock, P. M., the next day. Mrs. Angell, with her husband, who had arrived home from an absence during the day, consulted with Mrs. Albee as to what should be done. Mrs. Albee said they must have another council of physicians and a reëxamination, for nothing else would satisfy the public mind, and the doctors there only wanted to have the body fairly buried, and then they would have Mrs. Angell arrested, and would thus soon be rid of further competition from a female practitioner. This course was decided upon; but the next difficulty was to know what physicians to summon. Mrs. Albee was acquainted with two, on whose integrity and disinterestedness she could rely — Dr. Dixon, of her own village, Damariscotta, and Dr. Chase, of Thomaston; and Dr. Kennedy, of Warren, had offered his professional counsel and assistance to Mrs. Angell whenever she might need. It was now too late to send that night, but next morning they telegraphed for two of these physicians, and sent a messenger for the third, who fortunately all arrived by noon. Much, however, was still to be done, and only two hours remained before the funeral. The chairman of the selectmen being absent, Mr. Angell had applied to one of the others to have the burial services stayed; but, about one o'clock, he learned that this officer had not attended to his request, but had left town.

By this time, the funeral procession had nearly reached the church in the village, from the place of its departure, four miles out. As the time grew shorter, difficulties seemed to increase. There was great excitement against Mrs. Angell. She was told that they were going to post up handbills warning her to leave town within such a time, or she would be arrested. Some talked of tars and feathers, riding on a rail, and other violence; and Mrs. Angell feared that, unless the examination should be had that day, the following night would bring peril to her life.

While the one party were doing their best to prevent the burial, the other, aware of the fact, seemed as anxiously hastening to bury the dead out of their sight. For, though the funeral was appointed at the church at two o'clock, the procession — in and about which there was at least one physician aiding and expediting — was, contrary to all precedent, conducted directly to the burying ground, and the body unceremoniously deposited, and the filling of the grave commenced, regardless of the services which were in progress at the

church a few rods distant! What unaccountable and unbecoming haste! What sacrilegious dealings with the dead and the solemnities of the grave!

In the mean time, Mr. Angell, having failed to secure the interposition of the selectmen, applied to Coroner William Bearse, who said the matter should be attended to forthwith, and immediately ordered Constable George Winslow to put a stop to the burial, and Constable Charles Brown to summon a jury of inquest. Though there was the utmost despatch, and Constable Winslow made all haste, the grave was half filled before he arrived at the burying ground.

The body, having been disinterred, was carried to the residence of Mr. Allen Hall, near by, who had kindly permitted the use of his house for the examination. The coroner's jury — John Balch, (foreman,) William A. Schenck, George Winslow, Lewis Winchenbauch, Abram T. Moses, and Thomas J. Simmons — being assembled, and the three Waldoboro' physicians before named being summoned as witnesses, the medical council — Abial Kennedy, M. D., C. L. Chase, M. D., and R. Dixon, M. D. — called from out of town, went through a thorough reëxamination of the body, occupying two hours; the public, in the mean time, awaiting the result with the most intense interest.

The examining physicians, as competent professional men as the county could produce, having satisfied themselves, gave in each his testimony, and all unanimously concurring; the result of which was, that there had been no pregnancy, and of course no abortion, but that Hannah R. Parker came to her death in consequence of an abscess in one of the appendages of the uterus, and not by violence or malpractice; and the jury rendered their verdict accordingly.

Thus was an honorable and useful professional woman vindicated from the charge of a double murder, her son was relieved from a disgraceful accusation, and the memory of an innocent young girl, whose last days had been embittered by a groundless impeachment of her virtue, was saved from an infamy that must have ever attached to her name, reflecting disgrace on her kindred, and abiding as a legacy of sorrow and shame with her four younger sisters, left, with herself, without father or mother.

Truly there is a God who rules in the affairs of men, helping the helpless and delivering the innocent; and "justice and judgment are the habitation of his throne."

Another mode in which medical men endeavor to injure female physicians, and prevent their obtaining practice, is to catch at every case where a patient, from any cause, dies under their treatment, or where a child is born lifeless from never having had vitality, or for other reason, or where a mother, while lying-in, or weeks after, dies from puerperal disease, or consumption, or other malady, or where, in the present scarcity of professional women, a male physician is called in council, as doctors every day call on each other for assistance, and to report such case as a proof of the incompetency of female practitioners, one physician passing it to the next, and so on, carrying it into all the families of a community, to frighten people out of their propriety, and thus secure their patronage.

This is no fiction. It is a system of tactics adopted not only by physicians of the baser sort, but professors in medical colleges, as the author knows, have amused their students with such incidents, relating them as resulting entirely from the blunders of the sisterhood. And if the doctress in question is but an ignorant nurse, who has never seen a female medical college, or received a certificate of any sort, but, like some male quacks, has taken up the business without authority, it answers just as well; she is anonymously held up as "a specimen of one of your female doctors."

Such being the condition of things, the hatred and opposition of many of those whose craft is in danger being so strong, their influence so powerful and all-pervading, and they being in possession of the medical colleges with their endowments, in possession of the practice, and the gratitude, and active or passive support of so many of their patients, and so little having been accomplished in so long a time, what is to be done? Why, a public sentiment must be awakened of sufficient strength to overcome these obstacles, and prompt wealthy men, and wealthy women, and legislative bodies to furnish the means necessary to establish and endow female medical colleges and female hospitals, and to prompt women of ability and education to enter the medical profession.

It is necessary that the non-professional part of the public should know something more of the mysteries of the present system, before they can understand the reasons of this movement. Husbands, as a general thing, are as ignorant of the nature of the doctor's duties in the lying-in room as the infants that are born to them. They suppose the medical man has merely to direct affairs, and tell the nurse what

to do on the occasion, and are not aware that their wives are subjected to a mental torture more terrible than their physical pangs. Physicians dislike to have the husband in the room, especially during the examinations; and hence the prevailing ignorance of the matter on the part of those who have not read medical works. Of course, these secrets would never reach them through physicians or the nurses, nor would their wives be likely to report such disagreeable things — and who can blame women for keeping silence?

It was sincerely hoped that this enterprise might be successfully carried forward without a fuller exposure of the revolting features of the present system than had been made in various publications. But that hope has proved vain; and it is now obvious that the disease has become so inveterate and deep-seated as not to be eradicated without a more powerful medicine.

The author has not hastily come to this conclusion. In 1844, he recorded in his note book his views upon the subject, and many facts which came to his knowledge while travelling the country, illustrative of the social and moral evils growing out of our present system of medical practice — facts that have since accumulated to a large number, and may be published, should it be necessary, in order to convince the incredulous. From materials thus furnished, and from other sources, his brother, Samuel Gregory, prepared, in 1845, a pamphlet, entitled "Licentiousness, its Causes and Effects;" among which causes, the employment of men as midwives and in the treatment of female diseases, was given a prominent place. This pamphlet was stereotyped, and published by the author of this work early in 1846. In 1847, he published a pamphlet, called "Facts for Married Men," still further showing the need of female physicians for female patients. In the same year, his brother commenced giving public lectures in Boston in favor of female physicians and female medical education. In 1848, the author of the present pamphlet published a stereotyped work written by his brother, entitled "Man-Midwifery Exposed and Corrected;" a work that did efficient service to the cause, twenty to thirty thousand copies being circulated throughout the country. Its present title is "Female Midwifery Advocated." For nearly six years, his brother has given his undivided attention and efforts to this enterprise, turning neither to the right hand nor the left, for pecuniary or other considerations, laboring for the cause in general and a Female Medical College in Boston in particular.

His "Letter to Ladies, in favor of Female Physicians for their own Sex," published in Boston in 1850, is a work of which a distinguished authoress says, "It is impossible to speak too highly;" and Godey's Lady's Book says, "It ought to be circulated throughout the country." It has been extensively read and commended, and has convinced thousands of the truth of its positions.

These points in the history of this movement have been alluded to merely to show the reader that efforts, somewhat protracted and persevering, had been made to effect the object in view, and some experience had been obtained in reference to the obstacles and the means required to overcome them, before the author decided on the necessity of the present publication.

These efforts and those of other individuals and associations in different parts of the country, and the ready coöperation of the public press, have done much to introduce and promote the cause of female medical education. Above seventy women have been members of the Female Medical College in Boston, coming from all the New England, and several of the other states. They are scattered over the country, not excepting California, (one of them being in practice in San Francisco,) and are making themselves useful in preventing and relieving sickness and suffering, and have attended, as nearly as can be ascertained, above two thousand cases of midwifery, and with a success superior to that of male practitioners. Several of these women, since being members of the college, have attended over one hundred cases each; one in Boston near three hundred, over one hundred of them being within the past year; whereas the physicians of the city do not, on an average, have more than sixteen cases each, annually. Some thousands of the most intelligent and influential men and women of Boston, and New England, have given the object the encouragement of their names and pecuniary assistance. In Philadelphia, also, the Female Medical College has sent out a number of physicians, and others are in a course of education.

But still not a thousandth part has been accomplished of what ought to have been, and that little by the severest efforts, under the greatest disadvantages and embarrassments. And it is the opinion of the author that the change of practitioners will not be effected for many generations, and perhaps never permanently, unless the abominations of the present system are more fully exposed. And by the grace of God this shall be done. However disagreeable the duty, it shall be performed.

For the means of exposing this monstrous outrage upon nature and decency, we are indebted to medical authors. The two pictorial illustrations are copied from a medical work introduced to the American public twenty years ago, by A. Sidney Doane, A. M., M. D., of New York. It has been, and is now, a popular work in extensive use, and can be had of most booksellers. These engravings are selected from many others, as being the most suitable for this publication, and perhaps sufficient to give an idea of the whole matter.

Some may object to these, as being shocking pictures to behold. Very true. But how much more shocking the living reality, thousands of instances of which are every day occurring! While good men and virtuous women will regret the necessity of such an exposure, they will consider it vastly preferable to the continuance of such revolting practices under cover of secrecy and darkness; but unscrupulous physicians and easy patients, who dislike to be deprived of such business and such license, will be the most clamorous against this publication.

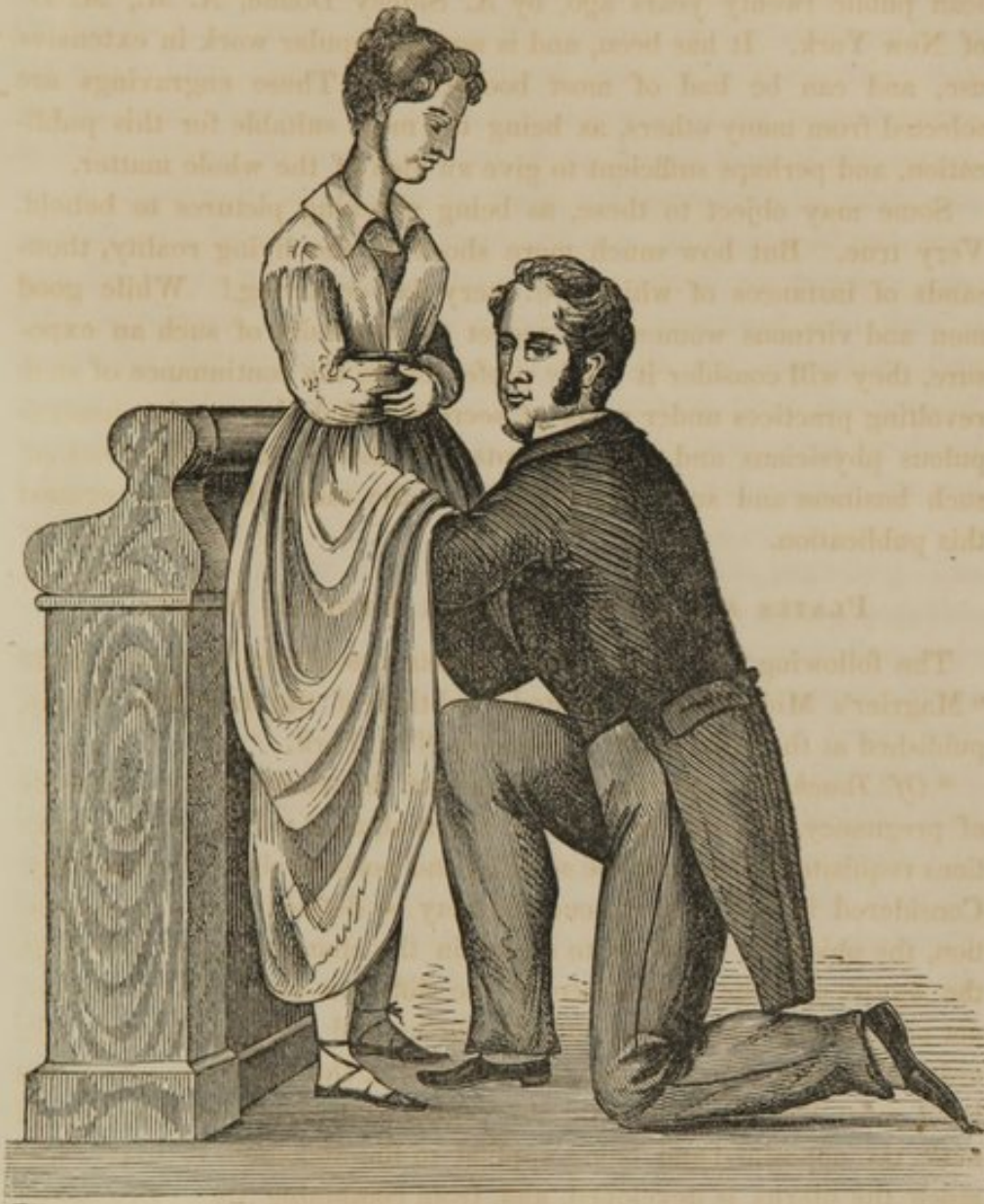
PLATES AND EXTRACTS FROM MEDICAL WORKS.

The following plates, and the extracts describing them, are from "Magrier's Midwifery Illustrated," edition of the late Dr. Doane, published at the University Bookstore, New York.

"*Of Touching.* Among the modes of determining the existence of pregnancy, *touching* is the most essential, as it unites all the conditions requisite to establish the sensible and positive signs of pregnancy. Considered in this respect, touching may be defined a manual operation, the object of which is to ascertain the changes in the situation, the figure, and the consistence of the different parts of the uterus, not only during pregnancy, but also during and after parturition. In order that this operation may be successful, the index finger of one hand must be introduced into the vagina to discover the state of the neck, the opposite hand being applied to the abdomen, to judge how much the uterus is developed, and, from combining these two modes of investigation, to form an opinion of the existence of pregnancy, and then to determine the period of gestation.

"The female may be touched in an erect or horizontal posture. The manner of touching differs in these two cases.

"*Of Touching—the Female standing.* [See plate.] This mode is advantageous in every respect. The parts of the female are in their



The above Plate, copied from "Magrier's Midwifery Illustrated" — edition of Dr. Doane, New York — represents some of the indelicate duties of male physicians.

Fifty thousand men, composing the medical profession in the United States, are engaged in such an occupation!

"The present practice of medicine, especially obstetrics, must be set down not only as having an immoral tendency, but as, in itself, a gross, abusive, and shameless immorality." — REV. WM. HOSMER, in the *Young Lady's Book*.

vertical position, and the second cannot be mistaken. The mode of proceeding is as follows: the female stands erect; her back supported by some vertical plane, should remain motionless during the operation; her legs are separated, and the feet are carried forward, the hands hang down, or are gently crossed on the abdomen; and the whole torso should be perfectly at ease. The second cannot see the laborer at her hand, introduce it by the posterior extremity within the vagina, press it up to the neck of the uterus, which is generally situated to the right and backward; by examining carefully, he determines its extent and size, its degree of resistance, and flexibility; if the os uteri be open, the end of the finger is carefully introduced to judge how much it is dilated, and thus to determine the period of pregnancy. While the second thus passes the laborer keeps within the vagina, he must place the palm of the right hand on the abdomen to judge of the changes produced by the protruded extremity of pregnancy, in the figure and size of the uterus.

The first is to be done—As the female continues (see plate, page 30.) The laborer standing while the female is reclining holds a little from the side, and must be prevented whenever the preceding mode would not afford the same results. At a very advanced stage of pregnancy, the feet should be four months or six months apart, but after parturition, the feet should be brought with the same success; but after parturition, and during the period of lying-in, the female to be touched must always be in a horizontal posture, and frequently lying down. In order to perform it successfully, the head of the female must be gently raised on the chest, the legs upon the thighs which are slightly separated. The second should stand on the right side of the female, if he touches with the right hand, and vice versa if the left hand be used; the index finger of one hand is introduced into the vagina, and the other hand is placed on the abdomen. The female exhibits no indication of pregnancy until the fourth month, but more nearly than the body of the uterus, beginning its growth between the two hands, while he examines the operation. The advantage can be derived from placing the hand upon the abdomen during labor; the laborer introduced into the vagina is then prevented from knowing whether parturition and accouchement has commenced or not. This is not the case, however, after the child is born, and during lying-in. In the latter case, it is often necessary

natural position, and the accoucheur cannot be mistaken. The mode of proceeding is as follows: the female stands erect; her back, supported by some vertical plane, should remain motionless during the operation; her legs are separated, and the pelvis carried forward; the hands hang down, or are gently crossed on the abdomen; and the whole form should be perfectly at ease. The accoucheur then oils the index finger of one hand, introduces it by the posterior commissure within the vagina, passes it up to the neck of the uterus, which is generally situated to the right and backward; by examining carefully, he determines its extent and size, its degree of resistance and flaccidity; if the os tinæ be open, the end of the finger is carefully introduced to judge how much it is shortened, and thus to determine the period of pregnancy. While the accoucheur thus passes the index finger within the vagina, he must place the palm of the opposite hand on the abdomen to judge of the changes produced by the progress and development of pregnancy, in the figure and size of the uterus.

“*Of Touching—the Female reclining.* [See plate, page 25.] The mode of touching while the female is reclining differs a little from that just mentioned, and must be practised whenever the preceding mode would not afford the same results. It is most advantageous during the first three or four months of pregnancy. During labor, both methods can be employed with the same success; but after parturition, and during the period of lying-in, the female to be touched must always be in a horizontal posture, and consequently lying down. In order to practise it successfully, the head of the female must be gently flexed on the chest, the legs upon the thighs, which are slightly separated. The accoucheur should stand on the right side of the female if he touches with the right hand, and *vice versa* if the left hand be used; the index finger of one hand is introduced into the vagina, as before, and the other hand is placed on the abdomen. But as the neck exhibits no indication of pregnancy until the fourth month, he must merely raise the body of the uterus, balancing it slightly between the two hands, while he executes the operation.

“No advantage can be derived from placing the hand upon the abdomen during labor; the finger introduced into the vagina is alone sufficient to make known whatever precedes and accompanies the termination of labor. This is not the case, however, after the child is born, and during lying-in. In the latter case, it is often necessary

to introduce an index finger into the vagina, and to examine if the uterus has contracted, by placing the hand, at different times, on the abdomen."

As to the *number of times* this operation is to be performed during a labor, Velpeau, Dr. Meigs's edition, Philadelphia, says, "The touch is performed at different periods of labor, for the purpose of ascertaining the position of the fœtus, the degree of dilatation of the neck, and to learn how far the head has descended. Rigorously speaking, it would be sufficient to touch three times during a labor; but generally speaking, unless the vulva and vagina are very sensible and irritable, we may repeat the operation much more frequently, and that without any ill effect."

The following quotation, from Meigs's "Obstetrics," shows how "*inevitable*" is this operation, and with what a mental struggle the patient "many times" submits to her fate. "I have many times," says Dr. Meigs, "been kept out of my house all night, in order to be near a patient supposed to be in labor; and having been refused the privilege of making the examination until morning, after so tardy an admission of my request, I have been obliged to announce not only that the patient was not in labor, but that she had not reached the full term of pregnancy by ten days or a fortnight. It is exceedingly vexatious thus to be baffled by the unreasonable backwardness of the patient to submit to an operation which she knows to be necessary and inevitable."

It is not unfrequently necessary to pass the whole hand and fore arm into the uterus to turn the child or remove the placenta or after-birth; and for this purpose a woman's hand, from its smaller size, is much better adapted than a man's, to say nothing of the greater decency of having a female operator.

This business will appear still more shocking and horrible, when it is considered that the same woman often has to employ several different professional gentlemen. The following paragraph is from the "Letter to Ladies, in favor of Female Physicians for their own Sex. by Samuel Gregory, A. M.":—

"The objection to the employment of males in the ordinary duties of midwifery is strengthened by the disagreeable necessity that women are frequently under of employing several, on different occasions, owing to removals, decease, absence, or engagement at the moment in some of the various duties of the general practitioner,



The above Plate, copied from "Magrier's Midwifery Illustrated" — edition of Dr. Doane, New York — represents some of the common duties of male physicians.

It is estimated that there are ten thousand births, daily, in the United States; and consequently ten thousand women are every day treated as above represented.

"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 the fears of their husbands; as a means of sacrificing delicacy, and consequently virtue." — THOMAS EWELL, M. D., *Honorary Member of the Philadelphia Medical Society, &c., &c.*

which are inconveniently connected with waiting upon ladies. A gentleman in Newburyport, whose family is not very numerous, stated to me that the advent of his children into the world had been presided over by *seven* different medical men. In a family of the author's acquaintance, now in this city, the same number of physicians have been employed in the capacity of midwife, (and no two on one occasion,) though there have been but nine children."

On perusing the foregoing instructions concerning the "touch," the question may be asked, What is there so incomprehensible or difficult about these examinations that women could not learn to perform them? What does the patient gain by this sacrifice of delicate sensibilities? Does it facilitate the labor, diminish suffering, and increase the safety to life? No, but it has the contrary effect. The common sense of every one must teach him that every thing that disturbs, annoys, shocks the patient, must tend to paralyze nature's efforts, and endanger life. This will be better understood by the following example, copied from the "Letter to Ladies," before mentioned.

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

Another convincing illustration of this point will here be given. It shows, too, that young wives are kept in utter ignorance of what awaits them till it is too late to escape.

A lady of great intelligence and moral worth, having perused the above-named "Letter," communicated to its author the following case for publication:—

"*A Case.* A lady of good constitution, nurtured in simple, industrious habits, and of nervous system under good control, approached her first accouchement. She was remarkably destitute of apprehension with regard to the event, and on terms of friendship with the gentlemanly physician who was to officiate. When the time arrived, quite an array of friends surrounded her; and having had no information or idea of the style of examination that was pronounced necessary, she felt a revolting and horror that it was impossible to subdue, and the vigorous action by which nature was about to pursue her operation was suspended. Pains occasionally returned, but produced no effect, seeming to be spasmodic, and wasting themselves upon the system at large. Ergot was repeatedly and copiously administered. Eighteen hours passed, and the patient seemed to be sinking. Though in a bath of perspiration, coldness seized the extremities, and sight forsook the eye. Then the physician hurriedly, and with great exertion of manual strength, used the forceps; and a very fine infant, weighing nearly eleven pounds, was brought into the world, but never breathed, its head having been fearfully compressed by mechanical force. There was here neither malformation, nor malpresentation, want of vigor, nor previous disease. The only cause that seemed assignable was the sudden overthrow and terrible revulsion of a long-cherished, deep-seated delicacy.

"Afterwards, when the same person had similar anticipations, it was her earnest prayer that she might be saved from the revolting intervention of men; and her only two living children were both happily born before the arrival of the physician."

Further information will now be presented from medical works. The public are little aware of the extent to which these professional examinations are performed on other occasions than those of midwifery practice. There are many disorders and diseases peculiar to women that cannot be understood, nor of course successfully treated, without an exploration by the touch or sight, or both. Denman's *Midwifery*, New York edition, speaks of this operation in obstetric cases, and says also, "An examination *per vaginam* may be needful to discover and distinguish diseases of the uterus and contiguous parts, *and on many other occasions.*" So that the preservation of health and of morals requires women to practise medicine as well as midwifery.

A correspondent of the *Boston Medical and Surgical Journal*, in

1844, says a case came to his knowledge where "a *physician*, after a diligent *exploration* of a *lady* suffering from a malignant disease of the pelvic viscera, in which he employed both eye and touch, gravely pronounced her to be laboring under an inflammation of the *prostate gland!*" The Italics are as in the original article, the design of which, in this instance, was to show the ignorance of the doctor in pronouncing a woman afflicted with a disease peculiar to males.

Dr. Meigs, professor in the Jefferson Medical College, Philadelphia, in his "Obstetrics," says, "There have not been wanting very good writers to show that the whole of this study and practice ought to be confined to persons of the tender sex; asserting that the relations of the sexes ought not to warrant those familiarities that are inseparable from the practice by men of the art of midwifery. . . . Many clever men have made shipwreck of their hopes by the want of a little reflection as to the course they should pursue, or by early abandoning themselves to professional habits, which, without the least intention on their part, have gradually assumed a tone of familiarity, which has been construed into impertinence or downright insult." Yes, and we may add, habits which have debased the practitioner, corrupted his patients, and resulted in downright immorality. And what else could be expected while human nature is frail and prone to degenerate under vicious influences? Parents should beware how they put their sons into such an occupation. "Again," says Dr. Meigs, "so delicate and difficult, in point of conduct and conversation, are the duties of the accoucheur, that there is nothing short of absolute good sense and tact can carry a man without reproach or misfortune through a long course of this business."

Baudelocque's Midwifery, Dr. Dewees's edition, Philadelphia, speaking of this business of examining, called, in medical phrase, the *touch*, says, "Opportunities of practising it occur frequently, especially in great cities, where women are the most numerous. . . . A wish to dissipate doubts often determines women to submit to it. . . . Sometimes a woman, whose pregnancy is still doubtful, is complicated with accidents, or accompanied by a disease foreign to it, who, not daring to employ the remedies her state seems to require, desires to remove her uncertainty. To touch with advantage in most cases, . . . we must begin by habituating ourselves to judge skilfully by this means of the natural state of the uterus. . . . In order to that, we should *touch women not pregnant in great number, and in different attitudes.*"

Think of this, reader. What a trade for boys to learn and men to follow! What is it but a vast system of legalized prostitution? Thus the medical profession is doing more to undermine public virtue than all the ministers of the gospel, and the moral reform societies, can do to preserve it.

Velpeau's *Obstetrics*, Dr. Meigs's edition, Philadelphia, says, "The touch has always been looked upon as the compass of the accoucheur; but this has not hindered some persons, Pusos among others, from vigorously objecting to its employment. Roussel says 'that accoucheurs ought to expunge from their books the impertinent directions that they give concerning the touch.' According to him, the operation is too alarming to the modesty of a respectable woman, and too contrary to good morals." This is a correct view of the matter. But, instead of expunging the directions, or dispensing with the examinations, which are necessary, the better remedy is, to place the books and this sort of practice in the hands of women.

In order to quiet this alarm to the modesty of women, various deceptions and impositions are practised upon their ignorance and credulity. For instance, Denman's *Midwifery* says of this examination, "When instituted at the time of labor, it is popularly called *taking a pain*, which explains the opinion entertained of it by women"! And the "*London Practice of Midwifery*," American edition, says, "An examination *per vaginam* is the way in which medical men express it to each other, but it must never be mentioned in this way to a woman; to her it must always be called trying or taking a pain; this is at once suggesting the occasion of the examination, and the relief it will procure in taking the pain away"!!

From the same work are taken the following directions for "a little management" to save time:—

"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 that will be of great use to you in your labor.' This she trusts to; and if, when she sends for us, we get there in time, it is all 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 labor.' If the placenta is 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 is come away: 'We are glad the afterbirth is all come away in consequence of what we did before we last left, and the labor terminated just as we intended it should.'"

Now, if a woman can be so easily imposed upon, and if a physician can so easily practise such a shameful imposition from so trifling a motive, could he not, at other times, and under other circumstances than those alluded to, impose upon a patient's credulity from baser motives — to overcome a modest reserve, to break down barriers, and pave the way for seduction and adultery?

Of course, it is not every author that is base and brazen enough to write such directions as the above; and most physicians, it is to be hoped, would scorn to follow them; but among the fifty thousand men in the medical profession in our country, there are, of course, many, very many, who are none too good to take any advantages that their professional liberties throw in their way. Many, doubtless, enter this profession *because* it affords such peculiar opportunities and facilities for the exercise of their depravity; and many unfortunate families must employ such, or have no professional assistance.

Many people of wealth, or of standing and influence, suppose that because they have known of no abuses in their own families or immediate circles, therefore none exist. Dr. Gooch, of London, in his work on Midwifery, third American edition, 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." This principle in "medical morals" may account for some people's ignorance of the social and moral evils which it is the design of this work to expose.

T. L. Nichols, M. D., of New York, in an article on Female Diseases, in the Water Cure Journal for May, 1851, speaking of the general mode of treating these diseases by physicians, says, "Their daily examinations, so utterly useless, cannot fail to outrage, and, in time, to blunt, every feeling of delicacy. . . . There is now growing up a new practice, more detestable and ruinous even than the old. It was begun by a man in this vicinity, a mercenary and libidinous wretch, whose practice consists in manipulations and

anointings, managed in such a way as to stimulate the passions, and produce a temporary excitement of the organs, which his deluded victims mistake for a beneficial result. These have to be repeated until the effect is lost, and the disease remains not only uncured, but in a worse condition. This has been the lamentable experience of thousands of women in this city; and, as the practice is extremely lucrative, it has been taken up in other places. No words can add to the contempt and detestation every honest man and every pure-minded woman must feel for such shameful practices."

Does Dr. Nichols allude to a celebrated female infirmary in Brooklyn, N. Y., to which multitudes of women have resorted, and hundreds of wealthy men have sent their wives and daughters to be treated? If so, these ladies and these gentlemen should forthwith interest themselves in the education of female physicians to practise in such female infirmaries.

TESTIMONY OF DR. EWELL.

Thomas Ewell, M. D., of Virginia, "Honorary Member of the Philadelphia Medical Society, and former Surgeon in the Navy Hospital, Washington City," 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 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. 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 and violent 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.”

Dr. Ewell thinks that the existence of such things “is a fact that will scarcely be credited in a Turkish harem, or by the Christians of some future and purer age.” We speak with commiseration of the degraded condition of women in heathen countries; but where shall we look for a custom among them so revolting as some of the features

of our system of medical practice? Surely charity should begin at home, in this particular, at least. Christian men and women, who are so liberally and so commendably giving their efforts and wealth to educate young men as ministers and missionaries to the heathen, ought to interest themselves in educating female physicians as missionaries at home.

The following paragraph is from "Moor's Oriental Fragments." "A *man*-midwife is a thing unheard of in *India*—in *Asia* probably. Such a thing cannot enter the imagination of a Hindoo. And as to a Mohammedan!—let such of my readers as are acquainted with Mohammedan gentlemen fancy, if they can, the effect of such a proposition. A Hindoo would receive it probably with mingled astonishment and meekness. The feelings of the Mussulman I can scarcely analyze. I should not volunteer the suggestion of such an attendant in any case, however urgent, within reach of his cimeter."

Physicians prefer to have women attend their own wives. One of the leading medical men of Boston, being obliged to leave the city for some days, engaged a female practitioner to attend his wife in case she should, as was probable, be confined before his return. Yet this same physician is now engaged in attending other men's wives in childbirth, instead of recommending them to follow his example, and employ a woman. He has, moreover, discouraged wealthy gentlemen who have asked his advice in reference to their rendering pecuniary aid to the efforts for educating female practitioners. And yet he would be one of the first to be pointed out as a *disinterested* Christian physician. Since perfect disinterestedness is so rare a commodity, even in the best specimens of humanity, it is encouraging to know that it is fast becoming a matter of *expediency* for physicians not only not to oppose, but even to speak favorably of this enterprise, when among its friends, who are becoming very numerous. Physicians are unfortunately situated in reference to cultivating a habit of philanthropy, inasmuch as their comforts depend upon others' sufferings, their living upon others' dying.

In my note book, under date of Hartford, October 6, 1845, I find the following memorandum: "A physician in this city remarked to me to-day, in conversation upon the evils of employing men in midwifery, that I was correct in my views; said the practice belonged to females, they could learn and attend to it without any difficulty; said his wife had had two children, was waited upon by a female, and

he did not go near her." And yet he was very willing to attend the wives of other gentlemen.

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

Dr. Bard says, "From motives of delicacy alone, this easy operation should be in the hands of women." Dr. Ewell says, "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, that, while a child in its senses, of six years of age, blushed in submitting to the operation, it would declare its ability to perform it on another."

And yet there are physicians who will visit a woman on this errand twice a day, month after month, instead of following Professor Meigs's advice, and putting a catheter into the hands of the patient, and instructing her, in a few moments' time, how to apply it for her own relief.

A case was this day (November 2, 1852) communicated to me of a cruel imposition of this kind practised upon a delicate and confiding patient. A clergyman, whose name and residence I have, has a daughter, who, five years ago, was taken sick a few miles from home, where her father has a farm and other property. Her disease caused a urinary difficulty, accompanied with suppression, and the necessity of the continued use of the catheter. She became well enough to return home; but she told her father that she could not endure the thought of being obliged to employ another medical man to attend upon her; it was more terrible than death itself. Consequently, for *five years*, she has been supported away from home, at great additional trouble and expense and discomfort, by a father in moderate

circumstances, to save her the horrible trial of passing into the hands of another medical man.

It is not a few unscrupulous doctors who alone are guilty in this matter. The authors, the professors, the leading men of the faculty, are mainly responsible. The fee table of the Boston Medical Association lays down the following charges for this operation: "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." Please mark the words, "*when frequently repeated, and for that purpose only.*"

In case of the clergyman's daughter, above mentioned, had the change been from the hands of one *female* physician to those of another, her whole mental difficulty would have been removed. And so in thousands of other cases, where females endure the greatest sufferings, and permit their diseases, unexplored, and therefore uncured, to carry them to their graves, because there are no medical counsellors of their own sex to whom they can apply. Dr. John Ware, of Boston, in a published lecture delivered in the Harvard Medical College, speaks of "the agitated and often agonized condition in which she [the female patient] is placed," and adds, "It is certain that many females suffer for years, from causes which might be easily removed, for want of courage to speak of them to their medical attendant." Dr. Meigs writes, "I confess I am proud to say that in this country generally, certainly in many parts of it, there are women who prefer to suffer the extremity of danger and pain rather than waive those scruples of delicacy which prevent their maladies from being fully explored. I say it is an evidence of the dominion of a fine morality in our society." Why do not these gentlemen, who seem to have so correct an appreciation of female delicacy, encourage the education of female physicians, and thus save those scruples of delicacy and the lives of women also?

Another duty of the medical man is the application of the pessary, an instrument worn internally in case of *prolapsus uteri*, or falling of the womb—a common complaint among feeble women, who do not preserve their health and the tone of the system, by sufficient exercise, and among women who have had protracted and distressing labors in consequence of the indecent presence and meddling of men. And then there are various displacements of the womb to be rectified by some simple mechanical means. Dr. Meigs says to his students,

in his work on Female Diseases, "You will find such weak, pale women complaining of pains and obstructions after delivery, that make you infer a deviated womb. I think, in such case, a physician is in duty bound, even where the signs are doubtful, to ask for the examination, and, if requisite, to assign his motives for such a request. I have a patient whose uterus was retroverted a few years ago, after her confinement, since which time she has had two children. She has had it turned over so many times since, that she now knows perfectly well when the accident takes place, and sends me word. If I ask her if it is retroversion again, she replies in the affirmative, and asks to be relieved. I am sure I have repositied it more than a dozen times."

What pitiable, infantile helplessness on the part of a woman! how degrading to the whole sex that, for the want of female physicians, they should have to call upon men for such services! how selfish and wicked in medical teachers and authors to oppose the admission of females into the profession, in order to perpetuate such impositions upon the ignorance and credulity of women and the public!

Another professional operation is the use of the "speculum," a tube which is passed into the vagina, and through it observations are made with the eye. Dr. Meigs, in his work, "Woman, her Diseases and Remedies," page 268, thus writes: "I am convinced that a very experienced or erudite Touch — a *Tactus eruditus* — can often report to the practitioner's intelligence all that he shall require to know of the case. Yet, when that same Touch leaves him in doubt, let him settle the question by referring to the report of a metroscopic investigation. That alone can yield a clear information as to the hue or tint of the affected parts, and aid him to fix with precision the therapeutical or chirurgical indications. I advise you not to make use of an artificial light in your metroscopic operations. It is to the last degree humiliating to the patient to be examined with a candle; and I never see a doctor so engaged without thinking of the woman in the Testament who had lost a penny, which she searched the whole house for, having first lighted a candle; and I feel a propensity to ask, 'Do you see the penny?'" Dr. Meigs then gives directions respecting the operation — the position of the patient, the bed, the window, the adjusting of the instrument, etc., — all of which must be *sufficiently* humiliating to the patient, if not "to the last degree," — and then adds, "This I conceive is the least flagrant performance of a

flagrant act — one inexcusable save under the duress of a conviction that it is needful for the safety of the sick woman.”

Here, then, according to the admission of a distinguished medical author, is a flagrant performance of a flagrant act, excusable only by dire necessity. Who is to be the judge of this necessity? The patient? She knows nothing about it but what the physician tells her; and the physician may be one of those who, as Dr. Ewell says, have “great curiosity about women,” or have some baser aims in prospect, and, under the pretence “that it is needful for the safety of the sick woman,” may practise abuses to an unlimited number and extent. Dr. Meigs, in the following sentence, intimates not only the possibility, but the probable frequency of professional abuses: “He is an unchaste man who ruthlessly insists upon a vaginal taxis [examination by the touch] in all cases of women’s diseases that, however remotely, may seem to have any, the least connection with disorders of their reproductive tissues.” And again he says, “Do not compel the young girl to submit to the debasement of a vaginal examination except on a well-founded opinion of its necessity for her — and for you.”

Some may suppose these speculum examinations are of rare occurrence; but not so. An elderly physician, who has resided in different cities and sections of our country, and who probably has had as good opportunities of knowing as any other man in the profession, says, such has been the rage for performing this operation, that almost every physician, even to the striplings in the profession, had his speculum, and was anxious to secure every possible opportunity of using it, some of them seeming hardly willing that a female patient should escape being subjected to their shameful and debasing performances. To such an extent, said he, was the matter carried in London, that the better part of the profession themselves became alarmed for the public morals, and, in some measure, put a check to the infamous business.

These are but a few of the professional services which none but a female physician ought to perform, relating to a few of what Dr. Meigs terms “the great host of female complaints.”

Some persons may wonder how such transactions could be carried to such an extent, and the public be so ignorant of the fact. But such things seek the shade, and could exist only under the mantle of thick darkness. The unhappy patient would, of course, never divulge

them ; and "the medical man is under the strongest obligations of secrecy," as will be seen by the following extract from the "Code of Medical Ethics, adopted by the National Medical Convention, in Philadelphia, June, 1847 :"—

"Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important, as many diseases of a mental origin stimulate those depending on external causes, and yet are only to be cured by ministering to a mind diseased. A patient should never be afraid of thus making his physician his friend and adviser ; he should always bear in mind that the medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences."

Such is the code of medical ethics. The extract is taken from the article of the code, headed "Obligations of Patients to their Physicians." Doubtless many a distressed and demurring female has had this paragraph pointed out to her as being the high authority of the "National Medical Convention." Other female patients have had medical works containing plates put into their hands, to show them that various *examinations* were "according to the book," and that they should, therefore, without scruples, submit to them. Other sensitive patients have been constrained to yield their "modest reserve" in reference to their conversation and their persons, by being told by the physician that "no truly virtuous woman would entertain any such objections ; it is only women that are no better than they should be who exhibit such affectation of modesty"!!

According to the extract from the above-named medical code, females are to confess to medical men their mental ailments (including, of course, their family troubles) and their bodily infirmities, and are told never to be afraid of thus making a medical gentleman their confidant. Of course, an honorable man would not abuse such confidence ; but poor human nature is a weak guaranty of safety, and the patient is thus very much in the power of her "friend and adviser"—a power that is sometimes abused, as will appear by the following paragraph from the Boston Journal, of September, 1852:—

"*High Life in Missouri.* Dr. T., of Bethany, Harrison county,

Mo., being a little jealous of his wife, and probably without cause, abandoned her for a time, but a few days ago returned. The Savannah Sentinel says he was seized by a number of gentlemen, whose wives the doctor had also slandered, who, forming a circle in the street, prevented his escape, while a number of ladies castigated him with cowhides to the tune of one hundred and fifty lashes. The doctor soon left for parts unknown."

But slander is not the principal thing to be feared, when female patients fall into the hands of unprincipled medical men. The physician has a most familiar and confidential intercourse with his patient; he learns her disposition, her tastes, her whims and weak points; he visits her when sick and sensitive, and peculiarly alive to sentiments of gratitude; his profession gives him a perfect knowledge of the female character and the female heart; he is attentive, devoted, sympathizing; this is the more highly appreciated, as her husband, being confined by business, is absent the livelong day, or for weeks and months, or, as in case of seafaring men, for years. The visits are continued; he calls when he pleases, and the neighbors ask no questions; he walks in without ringing or rapping, and is closeted with the lady daily without witnesses, because he is her family physician. He continues his visits; the husband's footsteps seem less welcome than his. The spider has woven his web, thread by thread, around his victim; the serpent's charm has *fixed* the prey. So with this human victim: resist she cannot, she would not; she can refuse nothing — all is lost!

There are many illustrations of this subject among all classes of the community; but for the want of space, a few examples only can here be presented. Dr. Ewell says, "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." In 1847, Dr. S. S. Perry, of Gainesville, Ala., seduced the wife of Colonel Winston, state senator. 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." About the same time, Alderman James Noe, of Lafayette, La., shot Dr. Easton for the same cause. The Boston Post of June 7, 1852, says, "Dr. F. Becher has been arrested at Frederic, Md., for an outrage upon a married woman, his patient." In February, 1852, Dr. Andrew Stone, of Worcester, Mass., was arraigned for committing adultery with an

unmarried patient. It was one of those cases, of which the author has learned of a number that have never yet come out to the public, and which are doubtless not uncommon, where the object was effected under the guise of a *prescription*. The physician was bound over in the sum of one thousand dollars, to appear at the May term of the court. But when the term arrived, he had left the city, and he forfeited his bonds by non-appearance. In the summer of 1852, Dr. Milo, of Vevay, Ind., eloped with the wife of Jacob C. Smith, while Mr. S. was presiding in court. If these abuses and actual immoralities are not unfrequent among those protected by wealth and influence, and position in society, how much more are they liable to occur among the less fortunate and less protected portion of the public. Though numerous cases are made known through the newspapers and the courts, and in other ways, it is not to be supposed that a thousandth part ever become public.

There are many men and many women of an ordinary degree of virtue and moral firmness, who pass safely through life if not needlessly exposed to vicious influences; while the best and the strongest, not excepting the saintly king of Israel, have fallen before temptation. So that, unless medical men are better than King David, they are unsafe while in the usurped province of female physicians. And however pure they may themselves be, their business is demoralizing, and *cannot be otherwise*; it is a blight and a mildew upon domestic happiness, and upon the social and moral welfare of society. Think of fifty thousand men in our country, of all shades of character, from the best to the worst of the human kind, being engaged in such ministrations and operations as are described in the preceding pages! Think of the ten thousand births which it is estimated there are daily in the country, and all the familiarities and personal liberties that precede, attend, and follow these occasions—occasions which ought to bring unmingled joy to a household, and increase the mutual attachment between husband and wife, but which, in consequence of these shocking accompaniments, bring shame and grief, and oftentimes alienation and domestic misery.

The performance of these midwifery duties by men tends also to blunt the modesty and debase the moral sense of the females who are present, and witness these shameful exhibitions. And if there are daily ten thousand such exhibitions in the country, there are doubtless thirty thousand female spectators of them. Many excellent

women refuse to be present on these occasions, even among their friends, on account of the intervention of men. Indeed, so revolting are the ceremonies, that not only the husband, but the female relatives are often excluded. Velpeau's Midwifery, Dr. Meigs's edition, says, "None should be permitted to remain in the room except those persons who are indispensably necessary; that is, one, or, at most, two friends, the nurse, and accoucheur. . . . The accoucheur ought to understand that the mother, the aunt, grandmother, or sister, are not always considered as the most agreeable attendants in this painful moment."

So objectionable, then, is man-midwifery, that not only is the husband not wanted in the room, but it is often disagreeable to have even the female relatives present; and the poor patient, in her pains and perils, is given up to strangers and mercenary comforters.

This is a crime against woman, and nature, and the sacredness of married life — a great social and public evil, the correction of which ought to engage the attention of all philanthropists, and legislators, and moralists, and especially ministers of the gospel. And it is a matter of great encouragement that many clergymen have been and are earnestly laboring for this object. The following letter the author received, at the time of its date, from the late Rev. William Miltimore, a venerable and highly-intelligent Presbyterian clergyman. If any think his language too strong, let them consider with what horror young wives, led blindfold into the snare, learn, when escape is impossible, the abominable ceremonies of man-midwifery; let them remember that impositions and stratagems are resorted to, that advantage is taken of the moment of labor pains and distress, and the fear of death, to procure submission, and even *force* has been employed. A gentleman informed me that a case occurred in N——, Mass., where a young woman about to be confined absolutely refused to submit to the examination. Persuasion and entreaty were of no avail. She was told that, if she persisted, the child could never be born, and she would die undelivered. "Well," said she, "then I will die." All art and argument having failed, the female assistants, or, we should rather say, accomplices, held her by main force, while the gentleman accoucheur professionally effected her humiliation. When it was over, and she had time to sigh a few deep-drawn breaths, and recover her thoughts, she turned to her mother, who was present, and, with a look and tone of mingled grief

and indignation, said, "Mother, is this the way you have taught me to preserve my chastity?" But to the letter of the Rev. Mr. Mil-timore:—

Litchfield, N. H., July 22, 1847.

MR. GREGORY: Dear Sir,— Never did a communication give me such pleasure as yours of the 15th inst. It is true, as was there stated, that, for many years, I have felt interested in the reform of man-midwifery. It is, as the Bible would say, *a heinous crime*. It is worse than sodomy; every act of the kind is a rape. A virtuous wife, in her parturition, would rather see the devil come into her apartment than a man she supposed would use more freedom with her than her husband. Moral reform, brother! much is said about moral reform; but, sir, there never will be an entire moral reform till man-midwifery, that base, that indelicate, that most abominable practice, is done away. Adultery is a crime, and God has pronounced a woe on the adulterer; but for a man to approach a woman in her pangs, is a crime which, humanly speaking, God never anticipated. *It is a thing which God commanded not, nor spake it, neither came it into his mind.*

Mr. Gregory, for many years I have occasionally borne my testimony against this shameful practice. I once, incognito, saw a man in the place of a midwife. And O, sir, to this day I never could efface the scene from my mind. The sight! how revolting! I wonder the sun shone during the transaction. Surely, if the stars had sensibility, they would have blushed at the sight. In the sacred Scriptures, mention is made of midwives; but we nowhere read that men should supplant them and take their office. Think me not an enemy to the fair sex; I am their friend. Their cries in childbearing have often rent my heart; but their loudest cries have been caused by the coarse, unfeeling operations of man-midwifery. You have no need, sir, to be reminded of the way this obscene practice was introduced. The first man that invaded the province of the midwife was sentenced to the gallows; the next that assumed the office was branded; then, step by step, the villany has passed into a custom. But does custom establish what is right or wrong? If man-midwifery was condemned a century ago, does the continuation of the practice render it any more justifiable?

My space for expressing my thoughts on this subject being circumscribed, you will excuse the breaks and abrupt leaps I make in this

scrawl. You wish me, it seems, to furnish you with some materials for your next pamphlet. Had I talents, sir, superior to any other man, they should be employed in your service ; but I know not what to say till I see the pamphlet you have already published, and learn your train of reasoning. I will venture, however, to send you a short extract from a sermon I once preached, after the death of a venerable lady who for many years sustained the honorable title of midwife.

“ We deplore the removal of a character of so much worth. She was a blessing to her sex. For more than forty years she performed the duties of a midwife with great skill and good success. And we have to lament that, as her sun goes down, the works of darkness spring up. Modesty vanishes, driven from the female cheek by a more than brutal custom of placing a man where a woman only ought to be seen. But may a phoenix arise from her ashes—a set of female officers who will restore purity to future generations.”

I can only say, sir, I am truly glad you have undertaken a work of such merit. I have ever believed 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. With profound respect,

WILLIAM MILTIMORE.

Such is the testimony of a venerable preacher of righteousness, who, though dead, yet speaketh. His words of earnest and unsparing denunciation remind one of the “burdens” of those glorious old prophets, who, in the name of God, denounced the “abominable things” which “vexed their righteous souls from day to day.” Father Miltimore sleeps in his grave ; but hundreds and thousands of the sons of the prophets will take up his denunciations, which will grow deeper and heavier till this monstrous crime against nature shall, as he says, “be exposed and extirpated from the earth.”

In a communication dated July 31, 1847, Mr. Miltimore says, “Your letter and pamphlet have been received, and read with interest. The ideas expressed in the pamphlet are an exact transcript of my own views and feelings. May the productions of your pen be perused by all.” He then relates a case that occurred in his parish, of a physician who became crazed by his professional attentions upon “a pretty-faced woman, and, supposing he had got her affections, jumped into bed with her. By her screams, she brought in friends

for her relief. Her husband made attempts to get redress, but, being a simple man, was persuaded to desist." Mr. M. then exclaims, "O, the mischiefs perpetrated by men-midwives! A thousand tongues could not express half the enormities done by these sly usurpers!" He then continues: "Before I close my answer to your very polite letter, suffer me to mention a little occurrence. When my sentiments on the atrocity of man-midwifery began to be somewhat publicly known, a teacher of the art in Brunswick College [Me.] took occasion to reprimand me for my audacity. After making my defence, and looking him sternly in the face, where guilt flashed in every direction, he passed off by saying, 'We have got the business in our own hands, and we will keep it.' Your writings, sir, I hope, will disappoint him and all his coadjutors."

It is this resolute determination on the part of so many of the teachers and disciples of the art that obliges us much, against our inclinations, to draw the veil, and let the public look in upon the hideousness of their occupation, that thus the only effectual power, public sentiment, may be applied to put an end to this marvellous innovation, so secretly and successfully introduced by these "sly usurpers."

The following is an extract from the "Young Lady's Book," by Rev. William Hosmer, Auburn, N. Y. Mr. H. is an able and distinguished author, and a prominent clergyman of the Methodist denomination, being the official editor of one of their widely-circulated journals, through which he has done much to promote the cause of female medical education. We wish his Young Lady's Book might be read by all ladies, young and old, and by gentleman also.

"By far the most important consideration connected with the medical education of females, is the protection which it affords to their moral character. The distinction of sex, so immutable in the constitution of society, is entirely overlooked in the modern practice of medicine. The regular practice is exclusively in the hands of men, and no attention whatever is paid to the fact that female delicacy and virtue must suffer by such an unnatural arrangement. Physicians are a privileged class — a class whose privileges are the ruin of society. There is something indescribably horrible in this abuse. Under the name of humanity, and shielded by professional usage, the sacred barriers of morality have been broken down. A profession that might have been useful, had it confined its labors within proper limits, has, by overstepping those limits, and thereby profaning the sanctity

of female character and of conjugal vows, rendered itself one of the severest scourges that ever afflicted mankind.

“If these remarks require any justification, let it be remembered that the practice of obstetrics, which involves every thing in female delicacy, is left wholly to physicians. Never was there such a mistake as this since man began his career of infatuation and folly. Here is a ‘violation of the instincts of nature,’ a ruthless and effectual subversion of modesty, without even the shadow of an excuse. What would be thought of a man who, in any other sphere, should assume the fearful and diabolical office of depredation? Under other circumstances, the same conduct would cost a man his life; and is it worse to invade matrimonial rights in health than in sickness? Does the mere incident of illness furnish any sufficient reason for a disregard of modesty and virtue? The distinction of sex is laid in human nature, fixed by the creating hand, and on it are founded many of the most interesting relations and duties of life; it must, therefore, be preserved inviolate, or the social fabric will be overthrown. God has decreed that every man shall have his own wife free from mercenary or other pollution, and no tampering of the medical faculty can for a moment be permitted without destruction to the marriage compact. Nor is the unmarried woman less dependent on her immaculate sanctity for a passport to connubial life. Let it be known that she is accessible to the physician, and who that pays the least regard to virtue would notice her? Nature groans under the infamous innovation. The female shrinks from the polluting touch of hireling corruptors, and scarcely knows which most to dread, the primal cause or the modern practice. She shrinks, but at last submits, overpowered by ignorance, made the victim of the faculty through a base denial of necessary knowledge. She is compelled in the hour of need to dispense with all medical assistance, or to sacrifice her modesty in receiving aid from men.

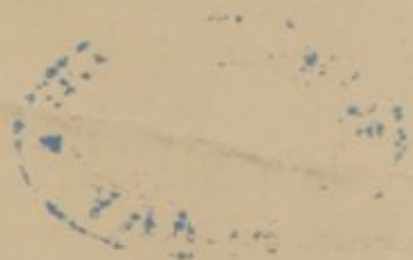
“Society has unequivocally condemned all virtual disregard of sexual distinctions. Its laws require an absolute non-interference with personal sanctity. But medicine has overleaped these barriers, and has found means to achieve all that the most villanous and debauched could desire; and what is the price? Verily, secrecy. Physicians are permitted to lay unholy hands on forbidden objects, with one simple restriction, namely, secrecy; and that, it is well known, they do not always respect, as indeed they are under no

obligations to do. Why might not any or all other men be elevated to the same familiarity with women? Will not they readily agree to the easy terms of secrecy? And will not other men be as likely to neglect further abuse and defilement as is the physician? Do the laws of morality know any difference between a physician and any other man? Does the fact that a man practises medicine give him any right to invade his neighbor's wife, or make his polluting intercourse with her either more decent, or moral, or safe? When the faculty have answered these questions to the satisfaction of intelligent and candid men, we will acknowledge them as public benefactors, and confess to the injustice of these remarks. But answer they cannot; and in default thereof, the present practice of medicine, especially obstetrics, must be set down not only as having an immoral tendency, but as in itself a gross, abusive, and shameless immorality."

In the Massachusetts Legislature, in 1851, the Committee on Education presented an able report in favor of a grant of money to the Female Medical College in Boston; in which report, after offering a variety of other considerations, the committee say, "It is, moreover, a matter of grave importance to encourage such *customs* in the community as shall not tend to weaken, but rather cherish a proper reserve between the sexes—as shall not rudely assail, but sacredly respect those sentiments so honorable to the female character, and so indispensable to the social and moral well being of society."

In view of the facts, arguments, and authorities presented in these pages in favor of the introduction of females into the medical profession, it is hoped that many may be induced to aid in effecting so important and desirable an object. Let the people of the great and populous state of New York establish in their great and populous city an institution for this purpose on an extensive and liberal scale. Let the people of New England at once complete the establishment and endowment of the New England Female Medical College in Boston, the metropolis of the eastern states. Let the people of Pennsylvania sustain the Female Medical College in Philadelphia. These, with an institution of the kind in some great western city, and another in some southern city, would, for the present at least, be an ample supply for the whole country.





FEMALE MEDICAL EDUCATION.

OPINIONS OF EDITORS AND OTHERS.

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

New York Observer.

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

Godey's Lady's Book.

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

Rt. Rev. Bishop Potter.

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

Rev. Edward Beecher, D. D.

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

Northern Christian Advocate.

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

New York Tribune.

Reason, common sense, and common decency plainly require that females only should be allowed to practise.

Salem (Mass.) Advertiser.

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

New Hampshire Patriot.

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

Christian World.

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

Boston Traveller.

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

Boston Post.

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

Christian Witness and Church Advocate, (Boston.)

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

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

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

Hartford (Ct.) Courant.

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

Philadelphia Saturday Post.

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

Portsmouth (Va.) Pilot.

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

American Journal of Medicine.

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

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

It is unquestionable that in that great country, [alluding to this movement in the U. S.] and among a great people, reforms are in progress which, while they startle us by their magnitude, strike at the root of many social evils, and lay the foundations of improvements of which the universe will reap the benefits hereafter. *Sharpe's London Magazine.*