



Anna Bosanquet continues her exploration of the midwives who have shaped history

'For this is an undoubted rule: if Pains do no good, they do a great deal of harm.'
(Stone 1737)

A *Complete Practice of Midwifery* was published in London in 1737. The book was written by Sarah Stone of Piccadilly, a midwife with 35 years of experience, for 'all female practitioners in an art so important to the lives and well-being of the sex'.

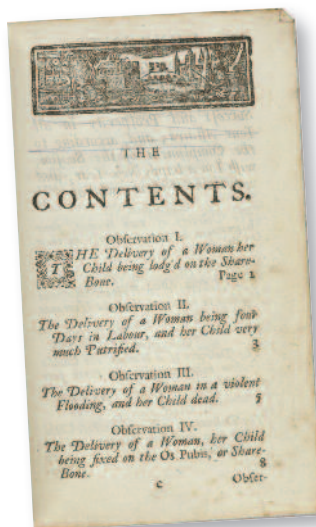
Stone's words project an image of a dedicated, knowledgeable, brave, caring, hard-working and ambitious woman, a fit role model for midwives of all times and a shining example to us all. She is rightly considered 'a champion of her sex and a disciple and advocate of the Enlightenment', who in her book 'notable as literature as well as medical history... draws on the imagery of heroic romance ... combating the dragons of ignorance and inertia' (Grundy 1994).

Early years

Sarah Stone was trained in Somerset by her mother, Mrs Holmes, 'a very experienced and respected midwife', to whom she served as a deputy for six years. Unusually for a woman, she studied anatomy and attended autopsies. She was in practice in Bridgewater by 1701 where some clients thought her 'rather young'. In 1703 she moved to Taunton, where she worked for 16 years before moving to fashionable Bristol, and finally to London in 1737 – the year her book was published. Her husband was probably an apothecary. They had at least one daughter who herself qualified as a midwife in 1726 after apprenticeship with her mother. Nothing is known about Stone's life after her relocation to London, and we do not know where and when she died (Stone 1737; Aveling 1872; Grundy 1994, 2003).

All-weather midwife

With no 'man-midwife' or obstetric surgeon available in Taunton, and due to her reputation and vast experience, Stone, in



addition to attending the normal births of her own clients, was summoned to emergencies, obstructed labours and other difficult cases. At the peak of her career she attended more than 300 births a year. She travelled long distances on bad roads, day and night, on foot or on horseback, across flooded fields and rivers, in all weather conditions, often attending more than one woman in any 24 hours. This took its toll on her health, and she moved to Bristol. Here, despite competition from male and female midwives, she gained better remuneration and the recognition she deserved.

Shared experience

Throughout her career Stone kept meticulous records, with detailed descriptions of cases, empirical observations and reflections. Her 'small treatise', based on a selection of more than 50 difficult or interesting cases, was intended to be 'instructive to some Women Professors in the Art of Midwifery; and inform them in a right, safe, and just practice of that Art: that they may be able to deliver in difficult labours, as well as those that are not so'. While outspoken about the ignorance of some local, traditional midwives, Stone believed in the power of learning, and wanted to share her experience to ignite the confidence of even 'midwives of the lowest capacity' to 'deliver their women, without calling in, or sending

for, a Man, in every little seeming difficulty'.

Male monopoly

The early 18th century saw the new breed of men-midwives, with their monopoly on the use of obstetric forceps, and 'superior' theoretical knowledge, attempting to take over the business of childbirth from female midwives (Donnison 1977, Wilson 1995, Cody 2005). Stone was openly angered by this situation. Having had good grasp of theory herself, she valued more highly the practical experience: 'For dissecting the dead, and being just and tender to the living, are vastly different'. She was critical of the 'young gentlemen pretenders' who 'undertake the Practice of Midwifery with only the knowledge of dissecting the Dead... while charging the money for looking after the Living'. These men:

...put on a finished assurance, with pretence that their knowledge exceeds any woman's... and so, if the mother, or child, or both die, as it often happens, then they die Secudum Artem; for a man was there, and the woman-midwife bears all the blame. Then it is, that our young and well-assured pretenders boast, had they been there sooner, neither should have died... (p xi, xii).

While critical of the 'young gentlemen pretenders', Stone – and her mother – had high respect for experienced doctors with whom they developed good working relationships, and this respect was mutual:

I am not in the least condemning just practitioners, men of erudition, grave and sedate, and whose judgements are unquestionable: they, without doubt, are justly to be esteemed (p xvi).

Effective but tender

Stone attended many labours complicated by malposition, malpresentation, or cephalo-pelvic disproportion, and successfully managed to complete such births by manually turning or shifting the baby in-utero. Throughout the procedure, Stone was attentive to the needs of the woman, as seen in this case of turning a baby presenting by shoulder:

I was obliged to let go my hold; but kept my hand still to ease it, and give the Woman rest; for, this to be observed, when the hand is in the body, and in motion, it creates great pain to the Woman. Therefore they who ▶

Sarah Stone, the Enlightenment midwife

undertake such deliveries, must be endowed with great patience, justice, good judgement, and full resolution, with God's blessing, to go through such deliveries (p 43).

While in Taunton, in the absence of any male practitioners, Stone resorted to the use of obstetric forceps. She found the instruments of 'very little use', and reports using them only four times in her life. She declares 'I am certain, where twenty women are delivered with instruments (which is now become a common practice) that nineteen of them might be delivered without, if not the twentieth'.

Unfortunately Stone was called to the complicated cases often too late to save the baby – typically the woman was in labour for about 60 hours, with the fetus already dead or dying. But in most cases she saved the mother from certain death. Out of the difficult labours that Stone chose for her book, 25 babies and three out of 47 mothers died, either in or just after birth. In some cases of stillbirth she performed dissections.

Power of touch

One of the many skills that Stone possessed was her 'secret' treatment of obstetric haemorrhage. Unfortunately, no details can be found about the technique, other than this was done 'by touch': possibly by bi-manual compression of the uterus (in the 18th century the term 'touch' was used to describe vaginal examinations). In Case 41 she describes how she stopped 'violent flooding':

As soon as I touched her, I stopped her again, as I have done in my practice, and always succeeded in ten minutes, or less, after touching a woman. I have been with many women that have flooded prodigiously, some in miscarriages, and others at their full time; but, thank God, I never lost any life in that case through all my practice. It is a secret I would willingly have made known, for the benefit of my sisters in the profession (p 148).

Promoting normal birth

Although, for instructive purposes, she chose to write about difficult cases, Stone emphasises that trouble-free childbirth is the norm. She clearly differentiated between gynaecology and midwifery, and wanted to separate the two. She believed that all midwives should spend at least three years in

training 'with some ingenious woman practising this Art. For if seven years must be served to learn a trade, I think three years as little as possible to be instructed in an Art where life depends'.

In addition to attending women in labour, Stone also offered antenatal and postnatal advice and care, and frequently recorded long-term outcomes. She determined exact gestation, considered women's previous labours, their occupation, constitutional factors and psychological well-being, and discussed their fears and anxieties. She touchingly promised a poor woman in her care who developed a craving 'for something' to purchase it for her, independent of price.

Sense of duty

Let us finish with Stone's own words, describing a particularly difficult case of turning a baby in transverse presentation. She made a few attempts at turning the baby to feet position, but found it very hard. A few times she had to withdraw her hand as it became numb. She felt 'very uneasy, knowing such attempts put the woman to fresh pain', and managed only in third attempt. Then, while holding the hand inside the woman's uterus, and searching for the feet to get hold of them, she discovered that the child was still alive, as it sucked her finger. Stone was very concerned by it:

...fearing it impossible for the poor Infant to be born alive due to the mother's weakness, and the child's largeness... Recovering my thoughts, I resolved to do my duty for the poor Woman's sake... obliged to be exceeding careful and slow, yet resolved with all my strength, and full resolution, to accomplish what I was about.

She had great difficulty pulling the feet out. Once the baby's legs were up to the knees out of the uterus, she wrapped them 'in a linen cloth, and gave them to two strong Women, and desired them to draw in a straight line', while Stone herself 'took care of the Woman's body, to prevent any injury, and secure the Child that it might be brought off whole', which she completed. The child was dead, but the woman 'did well'.

Stone was shaken by this experience: *The Child had not the least appearance of life, it was impossible it should: this delivery being at least an hour and half's*

hard work, which seldom happens: for in common wrong births it is very rarely more than half an hour, and often not fifteen minutes. I don't remember above four such terrible labours, in all my practice... I could not turn in my bed, without help, for two or three days after, nor lift my arm to my head for near a week; and forced to bathe my arm with spirit of wine several times a day (p 79-80).

As we read today the words written by this most exceptional, inspiring midwife, we pay homage to her, and to other midwives of the past who remain unknown and silent. Sarah Stone would be delighted to know that, 272 years after its publication, her 'little treatise' serves, as intended by her 'to encourage Midwives, that they may with justice and safety go through the most difficult part of their work, as well as that which is easy'. **TPM**

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■ **NEXT MONTH:** Elizabeth Nihell, the 'anti-obstetric' midwife who, despite her royal connections, passion and erudition, died in a London workhouse.

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