

## The Midwife.

### An Old Japanese Book on Midwifery.

Little is known of midwifery in Japan two hundred years ago; it was almost wholly in the hands of ignorant women, who based their treatment on tradition; the doctor's province lay solely in the administration of drugs, to which most wonderful properties were attributed, *e.g.*, one was prescribed to rectify transverse presentations. Some of the primitive customs were ridiculous, others were unintentionally cruel; all reveal a complete ignorance of Nature's processes and of anatomy. During the later months of pregnancy the woman was kept in the squatting position with legs crossed, at night a tight band was applied round buttocks and knees so that during sleep the same posture was maintained; the idea was the child's legs might slip down into the thighs of the mother if she stood or walked! After delivery the woman was placed for seven days in a curious kind of chair covered with a mat; it was composed of five planks arranged in such fashion that movement was impossible; it was considered fatal for the patient's head to fall forward. She was therefore watched night and day. It was little wonder that she became exhausted from want of sleep and the cramped position. The Empress and the poorest of her subjects were alike subjected to this torture.

In the eighteenth century arose one Kagiva Genyetsu, who waged war against these and similar customs. He wrote a work on midwifery in 1767 known as the "San Ron," which is even to-day widely read in Japan. It has been considered worthy of translation into German. Dr. Mikaye, Interpreter to the Medical and Surgical Academy at Yedo, undertook the task. To him we owe our knowledge of Japanese midwifery before it was revolutionised by the introduction of Chinese and European methods. Kagiva belonged to an agricultural family; he was self-educated. Devoting himself secretly to medical studies and particularly to the phenomena of parturition, he became the pioneer of Japanese obstetricians. Naturally, his ignorance of anatomy makes his book an absurdity; at the same time, when the period at which he lived is considered, his descriptions are often surprisingly accurate and his ideas most ingenious. In 1765 his adopted son and pupil wrote an ex-

planatory treatise on his father's work known as the "San Ron Yoku." Both these books make most curious reading. The "San Ron" was divided into four books, the last of which was devoted to the diatribes on the "chair." The author strongly disapproved also of the so-called "girdle," still worn by many Japanese women during pregnancy. This custom dates from as early as the second century. The Japanese were then engaged in war with Korea. The Empress, who had military gifts, and was wont to wear full armour, was pregnant at the time. This, however, did not debar her from taking an active part in leading the army; but she substituted an abdominal bandage for some of the heavy accoutrements. At the end of the campaign a son was born to her, she being in perfect health and excellent spirits. Henceforward all women have worn the girdle that their lot might be like hers. Kagiva thought that one of its disadvantages lay in the danger of a malpresentation being produced. He counselled his pupils not to be content with the writing of prescriptions, but to be present at the delivery and to actively interfere when indicated. He considered pregnancy a feverish condition, and advised the physician to place the tips of his four fingers on those of his patient. If there were throbbing, quick pulsations, in all probability she was pregnant; but he did not wish this sign to be relied upon utterly; his custom was to confirm it by gentle abdominal examinations. Great stress was laid upon "gentle." There was an idea that a fetal vapour pervaded the body of the mother acting as a protective; to disturb this was an evil, therefore in all manipulations no vigour was to be expended. External version was practised by Kagiva in transverse cases; if the feet presented, he taught that rapid extraction was indicated. He held that in head presentations the child was always in the same position, the occiput under the pubic arch, the back in the mid line. He denied the popular notion that males lay to the left and females to the right, but he fell into an equally erroneous statement that girls lay on the back after birth and boys on the abdomen.

During the second stage it was customary for the woman to sit with the heels against the buttocks. The Doctor sat before her. At the moment of delivery she bent forward and was supported on his shoulders; he guarded the perineum with the right hand.

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