

wifery, why not for Medicine and Surgery also? Have the present Medical Practitioners failed in their duty to lying-in women? Has the Obstetric art advanced or receded since it was incorporated as a part of Medical education? Have not the lives of many pregnant women been saved since then? Are not medical fees going down yearly, while at the same time the wages of the industrial classes have, according to Giffen, increased by thirty per cent?

Has not the Medical Act of 1886, enacted that the medical student—be the student male or female—must be trained in Medicine, Surgery, and Midwifery, must be examined in these three subjects, and must be guaranteed to be competent to practise Medicine, Surgery, and Midwifery? Our legislators, therefore, have wisely enacted that Medicine, Surgery, and Midwifery are a trinity, and that they must not be disassociated. If it were otherwise, the death rate of lying-in women would be as high as it was before Midwifery was placed upon the same level as Medicine. I am not one of those who seem to think that women should have as little attention given to them during their confinement as is given to the brute creation. Yet this seems to be the feeling which actuates some; and this the desire of a small clique of women's rights agitators, and of those who make a few hundred pounds a year by selling diplomas to Midwives.

However, this effort to establish a new order of Obstetric Practitioners must fail if the Medical Profession is in earnest in carrying out the traditions of our predecessors, and if the General Medical Council does its duty in seeing that the Medical Act of 1886 is not practically repealed. We must remember that the practice of Midwifery has been taken from a very obscure place, and that it required very great efforts on the part of a few men to raise it to the position which it now occupies.

At first the nickname of "man-midwife" was given to Medical Practitioners who dared to practise Midwifery, and thus tried to save the lives of women. The Royal Colleges also blackballed those who practised Midwifery. Thus the Royal College of Physicians of Ireland refused to examine Fielding Ould for the degree of Doctor of Physic of the University of Dublin, because he practised Midwifery, and on the ground that being a "man-midwife," he should not be given a medical degree. (To understand this, it is to be remembered that the R.C.P.I. up till 1695, acted as the Medical Board of Examiners for the University of Dublin, the College agreeing to admit none but Doctors of Physic to its diploma.) But in 1761, Dublin University constituted its own examiners, and for one reason, because the R.C.P.I. had refused to examine Ould, the "man-midwife" for the degree of Bachelor of Medicine, and upon the "ground that the practice of Midwifery was derogatory to the dignity of the profession of medicine." The R.C.P.I. in 1753, although they examined and granted a diploma entitling the owner to practise Midwifery, ordained that no one practising Midwifery should be examined for their diploma to practise medicine.

Speaking on this subject, Sir Charles Cameron, in his work, "History of the Royal College of Surgeons in Ireland," p. 59, writes: "It seems strange that so late as the fourth decade of the present century, eminent Physicians should be so unenlightened as to regard Midwifery practice as one which, to a certain extent, degraded a Medical Practitioner. When Sir H. Hallford, President of the Royal College of Physicians, London, was examined in 1834 by the Select Committee of the House of Commons on Medical Education, he stated that it was not desirable to repeal that bye-law which excluded from the fellowship of the College persons engaged in the practice of Midwifery."

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