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Cesarean Section and Religious Hierarchies in Fifteenth-Century Europe

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Abstract
In the late fourteenth and early fifteenth centuries, Cesarean section, the medical procedure whereby a child is delivered by cutting through the wall of the mother’s abdomen, was an extremely taut subject. More often that not Cesarean sections were performed as acts of desperation to save the child following the mother’s death, and as such, the procedure was embedded in the popular imagination and imbued with symbolic power. While it was promoted by the Catholic Church to save the souls of the infants through baptism, Jewish communities viewed the procedure with wariness due to its perceived unnaturalness. The coupling of divergent religious views on the procedure, a strained religious environment, and changes in the occupational landscape of obstetrics resulted in the utilization of Cesarean section by Christians as a means to demonstrate the corporeal and occupational inferiority of Jews. Mouat uses the Cesarean section as a springboard into the history of the religious tensions and hierarchies that came to define early modern obstetrics.

Keywords: Religion, science, obstetrics, motherhood, christianity, judaism, hierarchy, midwives
In the late fourteenth and early fifteenth centuries Cesarian section was entangled in a web of legal, political, religious, medical, and ideological tensions. An act of desperation to save the child after the mother died, the procedure was embedded in the popular imagination and imbued with symbolic power. While it was promoted by the Catholic Church to save the souls of the infants through baptism, Jewish communities viewed the procedure with wariness due to its perceived unnaturalness. The coupling of divergent religious views on the procedure, a strained religious environment, and changes in the occupational landscape of obstetrics resulted in the utilization of cesarean section by Christians as a means to demonstrate the corporeal and occupational inferiority of Jews. Using the Cesarean section as a point of entry, we can witness the subordination and marginalization of the Jewish midwife.

In fifteenth century Europe there was increasing fear among Christians of religious corruption by Jews, resulting in the condemnation and prosecution of Jews as a means to “protect” the Christian population. Within the Catholic Church, ideological crises of Church versus State and Cardinals versus Pope resulted in the Great Schism of the West.¹ The Catholic Church entered a period of instability as a result of two competing popes, both claiming legitimacy; this resulted in significant turmoil within the church, which in turn had great social effects. Protectiveness by its members, a reaction to the fragile state of the church, led to sweeping condemnation of those deemed “other” and a threat to the spiritual and physical wellbeing of Christians. Sweeping condemnation of Jews, Muslims, and heretics was witnessed; legal and social restrictions were placed on these populations throughout Europe.² Walter Ullman describes the Great Schism as a symptom of ‘underlying spiritual unrest’ among Christians.³ A quote from a trial that places blame on a Jewish midwife for the death of a mother and child in 1405, which will be discussed, demonstrates the fear of corruption by Jews: “... [Christians] shamefully suffer the Jews to perpetrate that which leads to the confusion of our faith.”⁴ With the increasing instability of the

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Church, Christians responded by subordinating and marginalizing religious communities deemed threatening. In this essay I will use the cesarean section procedure to reveal changing depictions of Jewish individuals and shifting occupational relations among Christian and Jewish midwives during this time of religious uncertainty.

Pertaining to childbirth, in Christian communities, a successful cesarean section was considered a miracle, while Jews deemed the procedure unnatural and relegated individuals born by this method to an inferior social status. In both communities cesarean sections were only performed in the utmost emergency – when the mother had died during the birth but it was believed that the child could still be alive. Although the communities maintained divergent views on the subject of cesarean section, Jewish and Christian midwives throughout the Middle Ages practiced side by side and possessed a high degree of uniformity in approaches to women's health. Christian and Jewish women interacted; they lived in the same areas and spoke the same language, which led to the creation of mutual knowledge and understanding through shared experiences. Medical treatises instructed midwives specifically on how to treat difficult births, and both Jewish and Christian midwives have been documented as performing difficult births, including cesarean section. However, the landscape of midwifery was changing in the fifteenth century in response to shifts in the religious and medical landscape.

The late Middle Ages were characterized by the professionalization and masculinization of medicine. Male physicians were moving into the realm of women's health, resulting in their encroachment into the domain of the cesarean section, which had traditionally been performed by midwives. As Blumenfeld-Kosinski documents, women were forced to transition from a leading role in birthing into a position of assistance. Changes within the midwifery occupation itself, mainly the denouncement and subordination of

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5. See, Caballero-Navas, The Book of Women’s Law and the Jewish Medieval Medical Literature on Women.
Jewish midwives, occurred simultaneously with the encroachment of male physicians into the cesarean section birthing room. While most historical research has focused on the subordination of midwives stemming from the intrusion of physicians, I wish to instead highlight changes in midwifery in response to an evolution of religious relationships throughout society. For centuries, Christian and Jewish conceptions of the cesarean section had differed, undoubtedly affecting midwifery practice; however, there are no documented occupational tensions until the fifteenth century. This paper proposes that a changing religious landscape at the turn of the fifteenth century resulted in occupational tensions and the condemnation and prosecution of Jewish midwives.

Rather than focusing on a limited time period or geographical space, this paper will use the lens of the cesarean section procedure to trace the construction of religiously validated occupational and corporeal hierarchies in Europe at the turn of the fifteenth century. This is due, in part, to the lack of primary sources, and thus the necessity to widen the geographical scope. While no Jewish medical writings on cesarean section from the Middle Ages have been published, there is a good chance that these writings do exist and deserve scholarly attention. Because of the fragmented nature of documented cesarean sections, particularly those including Jewish women, coupled with the desire to understand the conceptions which the general public held regarding the procedure, this paper will rely primarily on sources outside of the medical realm, such as popular stories and religious texts. The cesarean section procedure, imbued in the popular imagination and a procedure growing in prevalence in the fifteenth century, will be used as a point of entry to the segregation of midwifery and, more broadly, the divergent religious understandings and constructions of the body.

**Context of Cesarean Section**

Cesarean section was not performed with any frequency until the fourteenth century, when ecclesiastical decrees began promoting it. A description of a public sermon given in northern Italy in April 1305 demonstrates that the salvation of infant souls through baptism was the primary goal of cesarean section, and not performing the
procedure was considered sinful:

He then spoke of women who die in childbirth with their fetus alive in their belly. He sternly criticized people who bury them thus, and he said it was a great sin. He told of a woman who was in Pisa... who dies in childbirth and had a living fetus in her belly, so that he had her opened.... And in this way we opened her and drew the boy from her belly, and he was alive, and we baptized him, and his soul was saved. Was this not a great mercy. Many [souls] are lost this way and are in Limbo, through your fault. [The women] should be opened up, and it is a great mercy. Thanks to be God. Amen.11

In the case of a mother’s death during childbirth before the child was born, additional midwives would be called in to assist with the procedure, and a priest would be brought in to baptize the infant. It first became frequently performed in northern Italy and southern France,12 where it was done in domestic settings.13 Reasons for the procedure varied, from financial to legal to religious. A successful procedure could have important bearings on inheritance and burial placement of the mother; the fate of the mother’s dowry could be contested depending on whether or not she had borne a living child and, among Christians, a woman with an un-baptized, and thus un-Christian, fetus was disallowed burial on consecrated ground.14

During the fourteenth and fifteenth century, instructions for the procedure began to appear in medical and surgical texts. The 1363 Guy de Chauliac, *Inventarium, sive Chirurgia magna*, a guide to surgery and practical medicine composed by Guy de Chauliac, Pope Clement VI’s attending physician, became an important reference manual for cesarean section. He provided instructions for performing the procedure:

> If it happens that the woman herself is dead, . . . and you suspect

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that the fetus is alive, since the Lex Regia [an early Roman law] forbids for a pregnant woman to be buried with the fetus still inside her, the woman’s mouth and uterus are held open (as women wish), and the woman should be opened with a razor by making a lengthwise cut in the left side, since that part is freer than the right on account of the liver, and the fetus should be extracted using the fingers. Julius Caesar was extracted in this way, as is recounted in The Deeds of the Romans.\footnote{Guy de Chauliac, \textit{Inventarium, sive Chirurgia magna}, 6.2.7, ed. Michael R. McVaugh, 2 vols. (Leiden: Brill, 1997), 1: 389.}

In addition to texts outlining how to undertake the procedure, there is documentation of it being performed. A pamphlet in the Frankfurt city archives describes that a midwife named Guetgin performed seven cesarean sections in 1411.\footnote{Dyre Trolle, \textit{The History of Caesarean Section} (Copenhagen: C.A. Reitzel Booksellers, 1982), 34.} This demonstrates both the execution of the procedure itself and the fact that it was performed by a female midwife. While male physicians were becoming more prominent in the birthing chamber throughout this period, particularly during dangerous births, midwives continued to perform cesarean sections. However, no cesarean sections are described in detail until 1610.\footnote{Ibid, 34} Cesarean section, at this time, was always performed post-mortem and it was rare for the child to survive; it was an act of desperation.\footnote{Blumenfeld-Kosinski, \textit{Not of Woman Born: Representations of Caesarean Birth in Medieval and Renaissance Culture}, 2.} The uncertainty surrounding the procedure resulted in divergent conceptions, with some communities viewing it as unnatural, and others as miraculous.

**Cesarean Section in the Popular Imagination**

Before the practice of Cesarean section became a regular medical occurrence, the procedure was embedded in the popular imagination due to its depiction in religious texts and stories. In the Mishnah, an important Jewish text dating from 140 BC, the diminished social status of twins born of cesarean section is documented:

\begin{quote}
In the case of twins, neither the first child which shall be brought
\end{quote}
into the world by the cut in the abdomen, nor the second, can receive the right of primogeniture, either as regards the office of priest of succession to property.\textsuperscript{19}

Currently, this is the only story of cesarean section attributed to the Jewish community prior to the sixteenth century. However, the Mishnah’s continued significance in the Jewish community, and its influence on everyday life, indicates that the Jewish population did not view the procedure positively.

In contrast, the Christian community was familiar with the procedure because of its prominence in historical stories, which fantasized the procedure and heroicized the individuals associated.\textsuperscript{20}

The Bible says nothing about cesarean section, so the Christian community was influenced instead by popular stories disseminated at the time. Katharine Park demonstrates that, among Christians, the child born by cesarean section was considered uncontaminated by the inferior mother, who was passive, weak and submissive; this placed the child in a position of non-dependence and thus superiority.\textsuperscript{21}

Stories of a heroic individual born by cesarean section circulated in a variety of Medieval texts, many of them in the vernacular, such as Golden Legend by Jacobus de Voragine,\textsuperscript{22} and Romance of the Rose by Jean de Meun.\textsuperscript{23} Both painted images and woodcuts that depicted the procedure were included in the manuscripts. The most famous story, and the one most likely to have had the widest circulation, was the Roman imperial story Li Fet des Romains, which purportedly portrayed the birth of Julius Caesar.\textsuperscript{24,25} While it is known that, in fact, Caesar was not born by cesarean section due to the presence of his mother in later stories and the impossibility of her surviving the procedure, this story nonetheless had a significant impact on the popular imagination.\textsuperscript{26}

\textsuperscript{19} Mishnah Bechorot 8:2
\textsuperscript{20} MS Barroso, “Post-mortem Cesarian Section and Embryotomy: Myth, Medicine, and Gender in Greco-Roman Culture.” \textit{Acta med-hist Adriat} 11 (2013): 6.
\textsuperscript{22} Figure 1: Jacobus de Voragine, \textit{The Golden Legend, Birth of the Virgin}, translated and printed by Caxton, Westminster, 1497, No. 51 (JRULM, Inc. 12018.1), p. 84a.
\textsuperscript{24} Li Fet des Romains, 1213-1214
Texts depicting cesarean section were written as early as the start of the thirteenth century, although they gained popularity in the fourteenth and fifteenth centuries, with rates of transcription increasing. These texts demonstrate not only that the cesarean section was entrenched in the popular imagination long before it became a regular medical procedure, but that Christian and Jewish conceptions of the procedure differed. These deviating conceptions were the foundation on which Christians in the late fourteenth and early fifteenth centuries built a hierarchy, which subordinated the Jewish population corporeally and Jewish midwives occupationally.

**Images of Inferiority**

Beginning in the fifteenth century, the subordination of Jews, both corporeally and occupationally, is witnessed in popular accounts of cesarean section. Images of the procedure, often associated with the Apocalypse, depict Jewish midwives as devils and the Jewish cesarean body as the Antichrist. While the Christian cesarean body continues to be associated with heroism, the Jewish body is diametrically opposed. Stories and images associating the Antichrist with cesarean section date back to fourth century apocalyptic texts, but were not popularized until the fifteenth century.

In these texts the devil is materialized; rather than represented as an abstract figure, the Antichrist in depicted as an individual, specifically, a Jew. The Antichrist is represented as an imitator and antithesis of Christ. In the tenth century story Libellus de ortu et de tempore Antichristi, by Adso of Montier-en-Der, the Jew is depicted in images as the devil being born by cesarean section and is described as a false Messiah. In this text, the procedure was used as a means for the devil to deceive the Christians into believing he is their savior, while disguising his evil purpose to corrupt the Christian faith.

The Jewish cesarean body was, in these texts, represented

27. Barroso, “Post-mortem Cesarian Section and Embryotomy: Myth, Medicine, and Gender in Greco-Roman Culture,” 6.
29. Tiburtine Sibyl.
31. Ibid, 144.
as innately inferior to that of the Christian. Correspondingly, the midwife performing the cesarean section is often depicted as the devil, as seen in the twelfth century Serivias (1142-1152) by Hildegard von Bingen, and late the fifteenth century German woodcut Endkrist. Not rooted in truth or lived experience, these images instead are a visual representation of the fear of religious corruption present throughout the Middle Ages, but especially pervasive during the late fourteenth and early fifteenth centuries. Images such as these, which placed the Jewish body in a position of inferiority, functioned to polarize Jews and Christians and worked to subordinate Jewish midwives. Depicting the Jew, which during that time period was considered a threat to the fracturing Christian tradition, as the devil functioned to subordinate the threat and thus control the fragile religious environment.

**Condemnation and Prosecution**

In Jewish cesarean depictions, the midwife assisting with or performing the procedure is represented as the devil. Images such as these worked to justify, to the Christian public, the condemnation of the Jewish midwife. Deteriorating relations between Jewish and Christian midwives, which had historically been cordial and integrated, is demonstrated by Monica H. Green in her translation and analysis of a 1405 trial of Jewish midwife Floreta, deemed responsible for the death of a mother and baby. The reasoning given for the midwife’s practical wrongdoings in the birthing chamber, represented as murder, is her lack of Christian values: “...the accused did not have a thought toward the fear of God nor was terrified in any was by His vengeance.” The theme of the necessity of Christian faith and, specifically, the fear of God, to restrict an individual from committing crimes, is witnessed throughout the court document: “Not believing that the things below that were committed by her through an impious and horrible crime would result in any penalty for her.” The happenings of this trial were not an isolated event;

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34. Hildegard von Bingen, *Serivias* (1142-1152)
38. Ibid, 208.
Joseph Shatzmiller has demonstrated that Jews were over-represented in accusations of medical misconduct, and Michael McVaugh has extensively studied medical malpractice suits and determined that the two most substantive cases in late fourteenth century Spain were both brought against Jews. This demonstrates that Jewish midwives were not only portrayed as inferior in stories, they were actively prosecuted. In addition to being portrayed as a threat against the patient, the Jewish midwife was represented as a threat to Christian midwives. The fear of religious corruption of Christian midwives by the “other” is demonstrated in the court documents from the 1405 trial against Floreta:

The customs of the Jews and our own in no way accord. And these same Jews, thanks to ongoing exchanges and persistent friendship, easily sway the souls of the simple towards their superstition and perfidy, they who in a partnership of the evil often corrupt the good.

The fear of religious corruption and evildoing without the protection of Christianity are themes that were translated into the medical sphere from popular depictions of cesarean section. The theme of the Jewish midwife as the devil, purposed to aid in the dissolution of Christianity, is witnessed in both popular stories and historical accounts. Depictions of cesarean section that associated the Jewish midwife with the devil functioned to justify their condemnation and prosecution.

While some historians suggest that this period witnessed a segregation of midwifery along religious lines, the primary sources to validate this have not been discovered or analyzed. While their subordination is evident, and incidences of prosecution have been documented, widespread segregation has not been demonstrated. Nevertheless, this framework would fit into the existing knowledge regarding the condemnation and prosecution of midwives at that time. The prosecution of the Jewish midwife functioned to

demonstrate her supposed threat to the Christian community and, thus, to force the persecuted individual to discontinue practicing as well as to dissuade other Jewish women from pursuing a midwifery occupation. If the prosecution of the Jewish midwife were a widespread occurrence, this undoubtedly would have led to a drastic shift in the religious profile of the midwifery community. Surprisingly, there is no evidence of prohibitions of Jewish midwives practicing on Christians in France; however, licensing procedures for Christian midwives were implemented in northern France by the early fourteenth century to address concerns about baptism. These licensing procedures could have easily excluded Jews from the occupation, similar to the way in which women were excluded from acting as physicians with the rise of university education and licensing requirements. Most Jewish communities would not have been able to support a Jewish midwife who was disallowed from practicing on Christians, due to the small size of Jewish communities, except in large cities such as Marseille. Therefore, their exclusion from the Christian birthing chamber due to diminished popular opinion could have worked to restrict their ability to practice as midwives. Most likely, the presence and stringency of midwife licensing varied between communities and over time, resulting in a constantly shifting status of the Jewish midwife.

The turn of the fifteenth century was a time of great uncertainty; the fraught religious landscape resulted in the escalation of historical hierarchies, which had profound effects on the Jewish community. Jewish midwives, who once had practiced alongside Christians without friction, were being prosecuted. Contrasting Christian and Jewish conceptions of the cesarean section body and procedure had coexisted for centuries; however, in the fifteenth century, the creation of a corporeal and occupational hierarchy that placed Jews in a position of inferiority was facilitated by the presence of historically divergent views on the cesarean section procedure. The conception of the inferior cesarean body, a view historically held by Jews, was used by Christians to demonize the Jewish population through texts and images. Representative of far more than a simple medical procedure, the cesarean section was imbued with meaning.

42. Ibid, 191.
in the popular imagination, resulting in its utilization in the condemnation of Jews.

The goals of this essay have been to use Cesarean section as a point of entry into the consequences, in the medical realm, of the changing societal relations between Jews and Christians, and to add complexity to our understanding of the role of birth practitioners in late fourteenth and early fifteenth centuries Europe. I hope that this paper has demonstrated the interaction between religious beliefs and medical practice, and the functioning of the popular imagination as an intermediary between the two. While the situation of birth practitioners at this time has often been oversimplified and represented as solely an occupational struggle between physicians and midwives to claim jurisdiction over the cesarean section, I have attempted to add texture to this view by demonstrating a bifurcation in the treatment of Jewish and Christian midwives that took place simultaneously. I hope that, in the future, some will partake on the mission to connect this divergence within midwifery to the tensions between midwives and physicians, providing a broad picture of the birth practitioners at this time.

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Primary Sources:


Giordano of Pisa (Giordano of Rivalto), Prediche del Beato Fra Giordano da Rivalto, dell’Ordine dei predicatori recitate in Firenze dal MCCCII al MCCCCVI, ed. Domenico Moreni (Florence: Magheri, 1831), sermon 1, vol. 1, p. 5-6.


Li Fet des Romains, 1213-1214.

Mishnah Bechorot 8:2.


Secondary Sources:


Figure 1: Jacobus de Voragine, The Golden Legend, Birth of the Virgin, translated and printed by Caxton, Westminster, 1497, No. 51 (JRULM, Inc. 12018.1), p. 84a.
Figure 2: Les Faits des romains, Birth of Julius Caesar. National Library of Norway, SchoyenCollection, f.199r Source: Blumenfeld-Kosinski, Caesareans, p.71.