

The Obstetrical Aspects of Tristram Shandy

By C. H. G. MACAFEE, M.B., F.R.C.S., F.R.C.O.G.

*Paper read at the request of Professor F. W. Baxter to the
Honours English Class at the Queen's University.*

My terms of reference, according to Professor Baxter's letter, are "the obstetrical aspects and any others you choose." The last four words are my excuse for copying Laurence Sterne and digressing at the very beginning from "Tristram Shandy" to consider for a brief period the author himself from a medical aspect.

Powys, in an introduction to one edition of "Tristram Shandy," writes: "It would be interesting to get hold of some sophisticated young writer, of the present generation of either sex, though perhaps preferably male, some writer, I mean, who has never in his life opened a volume of Sterne, and who is shamelessly free from all literary snobbishness, and to persuade such an one to record his precise and exact reactions to his first reading of 'Tristram Shandy.'"

I had read this book so long ago that I had forgotten all the details and the occasion of this lecture forced me to refresh my memory. Therefore I feel that I can, from a medical aspect, express some of my reactions to what might be described as my first intelligent reading of the book.

My first thought was that no man, who had not steeped himself to the full in the vices of the period, could have written the book. Yet compared with a modern novel, such as "East Side, West Side," which has a pornographic flavour, the plain speaking of "Tristram Shandy" does not leave the same bad taste.

My second reaction, following the reading of the first four chapters of Volume I, was that he must have been unhappily married. To a gynaecologist it is obvious in these chapters that the relations between Mr. and Mrs. Shandy were those of an oversexed husband with a frigid wife. Such chapters could only have been written by a man with personal experience.

His knowledge and description of obstetric problems suggests that he must have had close contact with some obstetrician of the period. Doran states that Sterne studied current works on obstetrics, and in Book II, Chapter XIX, he mentions "Lithopædus Senonesis de Partu Difficili." This means that he had at least read the famous letter of Dr. Burton to William Smellie, where he takes him to task for his mistake. The mistake referred to is explained by the following passage from Dr. Burton's letter:

"If anything can be added to shock human Faith, or prejudice your Character as an Historian or Translator, it is your having converted Lithopædii Senonensis Icon (which you call Lithopædus Senonensis) an inanimate petrified substance, into an Author."

Sterne has aggravated the mistake by describing it as Lithopædus Senonesis. The name "Smelvgot" really refers to Smellie, and there is good reason for concluding that he may not only have read Dr. Burton's five shilling "Midwifery," but also Smellie's current book as well.

It is unlikely that he obtained his information direct from Dr. Burton of York, in whose persecution in 1745 he took part, and whom he has savagely caricatured as Dr. Slop.

My further rapid and, I am afraid, cursory researches, have proved the correctness of my first two conclusions.

His relations with Mrs. Sterne were far from ideal, although following their marriage in 1741, the "Parson who once delighted in debauchery" (to quote his wife's cousin), led the life of a contemporary parish priest for nearly twenty years.

Mrs. Sterne was not blameless, as Quennell describes her as having "proved a prickly and sharp-tongued woman who displayed great energy in housekeeping but very little skill."

Sterne's affairs with Catherine Fourmantelle, Mrs. Elizabeth Draper, and others were probably reactions, however unjustifiable in a parson, to the attitude of his wife.

As you know, Sterne had pulmonary tuberculosis, but it is possible that he also suffered from syphilis. At one stage of his terminal illness in May, 1767, the diagnosis of venereal disease was made, but he protested that this could not be right, as he had had "no commerce with the fair sex for fifteen years." Judging by what ultimately happened, the supposed venereal infection was almost certainly tuberculous.

He illustrates well the euphoric outlook of the patient suffering from phthisis. Even when he was within a few months of death he was writing to Mrs. Draper expressing the desire to marry her when her husband and his wife would die.

Another important factor in Sterne's outlook and future was the relationship between his own father and mother. His father had married his mother to settle a debt with her stepfather, who was anxious to dispose of her. The marriage was unhappy and from the age of ten Sterne was separated from his parents, being brought up and provided for by a cousin of his father. His mother has been described as a "vulgar, tactless, grasping woman, whom it would have been hard to love" (Quennell), and she certainly appears to have been a "limpet" in her later years. Sterne's conduct, however, towards his mother was most unfilial and it is stated that she was a prisoner in "the common gaol at York" for a time before her death in 1759.

He died on March 18, 1768, and was buried in St. George's, Hanover Square. It is said that only two men attended his funeral, one of them being his publisher. Some days later his body appeared in the dissecting rooms at Cambridge. It had been sold to the University by the resurrectionists—a macabre revenge for his attack on the medical profession (Radcliffe).

Having digressed to consider the author, one must return to the novel.

Having taken four chapters to discuss his conception and intrauterine life, the effect of prenatal influences, and to prove that he is his father's son, the first sentence in Chapter V either casts some doubt on his paternity or proves that Tristram Shandy was a premature baby.

In Chapter IV it is stated: "I was begot in the night betwixt the first Sunday

and the first Monday in the month of March in the year of our Lord one thousand seven hundred and eighteen.”

The first sentence of Chapter V to which I have referred reads: “On the fifth day of November, 1718, which to the aera fixed on, was as near nine kalendar months as any husband could in reason have expected.”

In this year (1950) the first Sunday of March was the 5th, and 280 days from that date would bring us to December 10th.

According to this calculation Tristram was born at the thirty-fifth instead of the fortieth week. He takes the trouble to explain in the last paragraph of Chapter IV that he could not have been conceived in December, January, or February, so that without casting doubts on his mother’s chastity, we must conclude that he was premature. I think this has an important bearing on a thesis I intend to develop at a later stage.

In building up the details of his arrival into “This scurvy and disastrous world of ours” he gives a most interesting picture of contemporary obstetrics.

Look at his description of the local midwife and you will get a vivid picture of the type of woman who practised the art of midwifery in that period:

“She had been left, it seems, a widow in great distress, with three or four small children, in her forty-seventh year; and as she was at that time a person of decent carriage—grave deportment—a woman moreover of few words, and withal an object of compassion.”

Compare this with the qualifications recommended by William Smellie, the famous contemporary London obstetrician. “Nurses,” he says, “as well as midwives, ought to be of middle age, sober, patient and discreet, able to bear fatigue and watching, free from external deformity, cutaneous eruptions and inward complaints, that may be troublesome or infectious.”

In the same chapter, in describing this midwife, he gives what might be the definition of the ideal obstetrician: “with the help of a little plain good sense, and some years’ full employment in her business, in which she had all along trusted little to her own efforts, and great deal to those of dame nature.”

He makes a note that the parson, Yorick, “paid the fees” for the midwives licence “amounting in the whole, to the sum of eighteen shillings and four pence.” At this period it was still the practice for midwives to be licensed by the bishops, and a godly, righteous, and sober life was of more importance than a knowledge of the art of obstetrics. These women were usually qualified to be midwives solely on account of the fact that they were married women who had had children themselves and had supervised the confinements of many of their neighbours.

They were often destitute widows who were prepared to submit to the drudgery and long hours associated with this branch of medicine, so as to keep body and soul together. They knew nothing about the physiology or pathology of labour, apart from that which they had acquired as the result of years of experience and in many cases good common sense.

This type of midwife existed in these islands until well on in the 1920’s.

The fact that the midwife was secured for the area in which Tristram was born, so as to allow Yorick to keep a good horse, brings to light the fact that many

women in this period must have had babies without any assistance, apart from that given by neighbouring women.

The reason why Tristram Shandy was born in Shandy Hall under the care of the local midwife and Dr. Slop, instead of in London under the care of Dr. Manningham, is revealed when we read the article in his mother's marriage settlement in Chapter XIV, Book I. According to this article the sum of £120 was to be paid to Mrs. Shandy to provide her with a coach and cover the expenses of her confinement in London. This reveals a consideration for the expectant mother which was remarkable for the period. It means that Sterne, in writing this, realised that a woman attended at her confinement in London might receive more skilled attention than was available in the Provinces. It may, of course, have been a subtle insult to Dr. Burton of York, whom he evidently despised and insulted on every possible occasion. Doran, in his papers, also makes the latter suggestion.

There was, however, a protective clause in the marriage settlement which Tristram describes as follows: "That in case my mother hereafter should, at any time, put my father to the trouble and expense of a London journey upon false cries and tokens; that for every such instance she should forfeit all the right and title which the covenant gave her to the next turn; but to no more."

He then says; "But I was begot and born to misfortune; for my poor mother, whether it was wind or water—or a compound of both—or neither; or whether it was simply the mere swell of imagination and fancy in her; or how far a strong wish and desire to have it so, might mislead her judgment."

The above is a most accurate description of a well-recognised obstetric condition, namely, pseudocyesis. In this condition the patient falsely believes herself to be pregnant, believes that she has all the subjective symptoms and produces the objective signs by abdominal distension.

This incident happened in September, 1717, the year before Tristram was born, with the result that when Mrs. Shandy was found to be genuinely pregnant in the following spring, his father insisted on the observance of the protecting clause.

Chapter XVI reveals the reaction of a cantankerous husband who has been made look a fool. The disappointment at the loss of a probable son and "the foolish figure they should both make at Church the first Sunday" are perhaps understandable. The fact that Mrs. Shandy evidently saw the funny side of the incident cannot have made Mr. Shandy accept the inevitable in any better spirit.

As Tristram says, in Book I, Chapter XV: "so that I was doomed, by marriage articles, to have my nose squeezed as flat to my face, as if the destinies had actually spun me without one."

In Chapter XVIII, Book I, we read: "As the point was that night agreed, or rather determined, that my mother should lye-in of me in the country, she began to cast her eyes upon the midwife, as the famous Dr. Manningham was not to be had."

The famous Dr. Manningham referred to above was later Sir Richard Manningham, who was the leading obstetrician of his day, and had the honour of establishing the first lying-in wards in these Islands in 1739. The house adjoining his own in Jermyn Street, London, accommodated parturient women and was the

forerunner of Queen Charlotte's Hospital. He was also famous for his exposure of Mary Tofts, who pretended to give birth to rabbits.

Mr. Shandy disagreed with his wife regarding the employment of a midwife alone, when, as described in Chapter XVIII, Book I: "there was a scientific operator within so near a call as eight miles of us, and who, moreover, had expressly wrote a five shillings book upon the subject of midwifery, in which he had exposed . . . the blunders of the sisterhood (midwives) itself." This refers to Dr. Burton's small book and also shows the rivalry which existed between the midwives and the obstetricians of the day. At this time Smellie, in London, was being exposed to vicious attacks, not only by his colleagues, but also by midwives, particularly a Mrs. Nihell, who referred to him as "a great horse godmother of a he-midwife."

At a later stage in the novel Mr. Shandy accuses Uncle Toby of distracting the "man midwife" from his duty to Mrs. Shandy. This irritates Slop, who makes the interpellation: "Accoucheur if you please."

Ultimately Mr. Shandy gains his point to a limited extent: "In a word, my mother was to have the old woman, and the operator was to have licence to drink a bottle of wine with my father and my Uncle Toby Shandy in the back parlour, for which he was to be paid five guineas." As events turned out, Mrs. Shandy and the baby would have been safer with the midwife alone, or perhaps the bottle of wine had clouded Dr. Slop's judgment. It is a pity that Dr. Slop was not aware of, and did not follow, the dictum laid down by Mr. Shandy in Chapter VI, Book II: "The doctor must be paid the same for inaction as action—if not better—to keep him in temper."

This follows a remark by Uncle Toby, who had suggested that Mrs. Shandy did not want Dr. Slop so as to save expense, but later suggests (Chapter VI, Book II) that it was modesty on her part. Modesty was probably a big factor at this period, but could not apply in Mrs. Shandy's case, as she had evidently been attended at her first confinement by Dr. Manningham. This, of course, like Dr. Slop, is an anachronism, because Manningham was only twenty-eight years old in 1718 and was younger when Tristram's elder brother was born and therefore relatively unknown.

The exact arrangement between Mr. and Mrs. Shandy is described in Chapter XVIII, Book II: "I have ordered, answered my father, the old midwife to come down to us upon the least difficulty; for you must know, Dr. Slop, that by express treaty, solemnly ratified between me and my wife, you are no more than an auxiliary in this affair— and not so much as that—unless the lean old mother of a midwife above stairs cannot do without you." Yet another example of Sterne making little of Dr. Burton. It has been suggested that Mr. Shandy's object in having Dr. Slop present was to have Tristram delivered by Cæsarean section. In Chapter XIX, Book II, there is a dissertation on the risks of a baby being born by the vertex with some misstatements.

It is stated "that by the force of a woman's efforts, which, in strong labour pains, was equal, upon an average, to the weight of 470 pounds avoirdupois acting perpendicularly upon it; it so happened that, in forty-nine out of fifty, the said

head was compressed and moulded into the shape of a conical piece of dough— Good God, cried my father, what havock and destruction must this make in the infinitely fine and tender texture of the cerebellum.”

The force exerted on the child's head is grossly exaggerated in the above statement. At the most, the force is somewhere between thirty-two to fifty pounds. Moulding of the child's head does occur in labours where there is some disproportion between the size of the head and the maternal pelvis and may cause injury to the brain as the result of small intracranial vessels being torn. Mr. Shandy's anxiety is understandable, as his first son, Bobby, was born head first and developed into what appears to be a mental deficient (“A lad of wonderful slow parts”).

We know that Mr. Shandy did raise the question of Cæsarean section as “he had read and was satisfied . . . that the belly of the mother might be opened extremely well to give a passage to the child. He mentioned the thing one afternoon to my mother—merely as a matter of fact.” It was natural for Mrs. Shandy to be averse to having a Cæsarean section. Her reactions are mentioned in Chapter XIX, Book II: “but seeing her turn as pale as ashes at the very mention of it—he thought it as well to say no more of it—contenting himself with admiring—what he thought was to no purpose to propose.” To have had such an operation without anæsthesia at a period when it was associated with a mortality of approximately seventy per cent. was more than any ordinary woman could face.

The advantages of the baby being born feet first are also discussed. At this period, and for two hundred years after, it was common practice to convert a head presentation into a breach when dealing with obstruction in labour. The risks, of course, were greater than is suggested in *Tristram Shandy*.

Again I must digress to discuss briefly the man Dr. Burton caricatured as “Dr. Slop.” Burton was the son of a London merchant born in 1710 at Colchester and educated at Merchant Taylor's School. Therefore “Dr. Slop” is an anachronism, as Burton was only eight years old when *Tristram Shandy* was born.

Burton graduated from Cambridge in 1733 and later studied under Boerhaave at Leyden. On his return from Holland he settled at York, where he became a well-known obstetrician and antiquary. Doran (1913) states: “According to Percy Fitzgerald, Burton acquired the nickname “Dr. Slop” early in his career, presumably before “*Tristram Shandy*” was written.” His philanthropic work for the poor of York resulted in the foundation of York County Hospital, against the opposition of Sterne's uncle and probably Sterne himself.

Through what appears to have been an accident and the machinations of his enemies, he was arrested and confined in York Gaol for supposedly being involved in the Pretenders Rebellion of 1745. Sterne's uncle went to great pains to try to have him executed, but was unsuccessful, and, after appearing before the Privy Council in London, he returned to practise in York.

This brief outline may explain why Sterne held “Dr. Slop” up to ridicule and contempt. This attitude is obvious from the very first introduction of “Dr. Slop” into “*Tristram Shandy*.” The rather amusing description of Dr. Slop being upset in the mud by Obadiah and that of the entrance of the bespattered doctor into the room in Shandy Hall make him appear a ludicrous figure. He is described as: “a

little squat, uncourtly figure of about four feet and a half perpendicular height, with a breadth of back, and a sesquipedality of belly which might have done honour to a serjeant in the horse guards."

When we add to this the information in Chapter X, Book III, that he had knocked out three of his best teeth through his forceps slipping at a hard labour, he certainly was an unprepossessing figure.

Is it any wonder that Uncle Toby offered the opinion, "That mayhap this sister might not care to let such a Dr. Slop come so near her . . ."

In Chapter X, Volume II, we read: "Dr. Slop's presence, at that time, was no less problematical than the mode of it; though it is certain, one moment's reflection in my father might have solved it; for he had apprized Dr. Slop but the week before that, and my mother was at her full reckoning; and as the doctor had heard nothing since, 'twas natural and very political too in him, to have taken a ride to Shandy Hall, as he did, to see how matters went."

Here we see a doctor in 1718 (really after 1733) coming on an antenatal visit, for which one must give him credit. At this time, and indeed until well on in the present century, such a visit was not considered necessary and might, indeed, have been resented. This is probably a charitable explanation. The true explanation may be that through "marriage articles" he had secured an important patient who had previously been attended by a London colleague and he was anxious to ensure that the local midwife did not belittle him by attending the case herself without summoning him. It did mean, however, that he arrived unprepared for a confinement.

As described in the novel: "Thou hast come forth unarmed; thou hast left thy tire-tete, thy new invented forceps, thy crochet, thy squirt, and all thy instruments of salvation and deliverance behind thee."

The tire-tete is a destructive instrument; the crochet is a hook used in days gone by in difficult breech extractions; and the squirt is a syringe used for baptising the unborn infant.

The "new invented forceps" refers to "Burton's forceps" invented by himself. It was a brutal and powerful instrument as shown by Uncle Toby's remark: "upon my honour, sir, you have torn every bit of the skin off the back of both my hands with your forceps and you have crushed all my knuckles into the bargain with them, to a jelly."

Uncle Toby had evidently been allowing Dr. Slop to demonstrate his forceps, using his two closed fists to represent the foetal head.

The story of the obstetric forceps is one of the most interesting chapters in medical history, and, although not quite relevant to this paper, as Burton's forceps and the results of their use have figured so prominently in "Tristram Shandy," I feel justified in mentioning this bit of history at this stage.

The invention of the obstetric forceps was one of the most important epochs in the history of obstetrics. The instrument was invented by Dr. Peter Chamberlen, the senior son (1560-1631) of Wm. Chamberlen, a Huguenot who escaped from France shortly before St. Bartholomew's Day in 1572. Five generations of this family were eminent members of the medical profession.

Peter Chamberlen (1601-1683) and his successors kept the forceps as a family secret for the purpose of family aggrandisement, and, one regrets to say, family profit. Peter's son endeavoured to sell the family secret to a contemporary Parisian obstetrician, who, before he would buy the instrument, demanded that he should deliver a patient in whom a delivery per vias naturales must have been obviously impossible. He failed to deliver the patient and had to return to England with the family secret.

The first published account of the Chamberlen forceps was given by Dr. Chapman of South Halstead, Essex, in 1733, the year that Dr. Burton qualified in Cambridge.

Burton's forceps were not invented until long after Tristram was supposed to be born; Palfyn did not make public his *mains de fer* until 1720, and, as I have mentioned, the Chapman Essay was not published until 1733. Burton's forceps was a clumsy instrument and certainly should have caused serious injury to a child's head.

We read in Chapter VI, Book II, that, following some commotion in the room above, Uncle Toby advises Mr. Shandy to ring the bell and enquire what is amiss. Obadiah, on answering the bell, states: "my mistress is taken very badly," and, regarding Susannah the maid, "she is running the shortest cut into the town to fetch the old midwife." Obadiah was instructed to saddle a horse and "do you go directly for Dr. Slop, the man midwife . . . and let him know your mistress is fallen into labour and that I desire he will return with you with all speed."

We know that within "two minutes, thirteen seconds and three fifths" Dr. Slop arrived back with Obadiah, having been thrown from his pony after a collision with Obadiah about sixty yards from the stables. At some time in the next two hours and ten minutes (Chapter XVIII, Book III) Susannah arrived downstairs, where Dr. Slop, Mr. Shandy, and Uncle Toby were sitting, saying: "Bless my soul—my poor mistress is ready to faint—and her pains are gone—and the drops are done—and the bottle of julap is broke—and the child is where it was—you had better look at my mistress, but the midwife would gladly first give you an account how things are, so desires you would go upstairs and speak to her this moment."

Dr. Slop, however, having been superseded by the midwife, was now determined to establish his own position. "No," replied Dr. Slop, "'twould be full as proper, if the midwife came down on me." Susannah's description would suggest that Mrs. Shandy had developed uterine inertia. This is a condition where the patient appears to start in labour, but at some stage following this the uterine contractions cease and may not be re-established for hours or days.

There is another possibility, namely, that Mrs. Shandy was not in labour at all. Earlier I drew attention to the fact that Tristram was a premature baby and that on the date in question the gestation was only thirty-five weeks. It is not uncommon to see patients before full term who believe they are in labour, appear to be so, and yet do not commence properly for some weeks.

In Chapter XVII, Book III, we are permitted to hear the interview between the doctor and the midwife. Dr. Slop says: "And pray, good woman, after all will

you take upon you to say, it may not be the child's hip, as well as the child's head? "'Tis most certainly the head," replied the midwife.

This dialogue is followed by a discussion with Mr. Shandy regarding the danger of injury to the male genitals if forceps are applied to a male breech presentation.

The poor father's reaction to this appallingly bad psychological treatment by the doctor was to say: "but when your possibility has taken place at the hip—you may as well take off the head too."

Dr. Slop's departure to the patient is described as follows: "So taking the green bays bag in his hand, with the help of Obadiah's pumps, he tripped pretty nimbly, for a man of his size, across the room to the door, and from the door was shewn the way, by the good old midwife, to my mother's department."

Sterne, who revealed the secrets of the conjugal bed in the first chapter, has kept his readers out of the lying-in room. Allport suggests that Sterne realised how far he might go with his irreverent imagination without being unfrocked. In spite of this we can reach certain conclusions from details given before and after the delivery.

At the beginning of Chapter XVIII, which follows the departure of the doctor to attend Mrs. Shandy, we read: "It is two hours and ten minutes—and no more—cried my father, looking at his watch, since Dr. Slop and Obadiah arrived—but to my imagination it seems almost an age."

If one is to judge from the time that Obadiah was dispatched for the doctor and Susannah ran for the midwife, Mrs. Shandy cannot have been in labour for more than about three hours, and yet Dr. Slop proceeded upstairs with the evident intention of delivering the patient.

Even at a second confinement three hours in most cases would be a very short labour, and for such a patient not to be delivered at the end of this time could not be regarded delay in labour. Neither could it justify any meddlesome midwifery such as Dr. Slop evidently intended. That he was most anxious to display his skill with the forceps is revealed in Chapter IX, Book III, where he is having difficulty in disentangling Obadiah's knots. (It is on this occasion that he misses his front teeth!!) "'Tis God's mercy, quoth he (to himself), that Mrs. Shandy has had so bad a time of it—else she might have been brought to bed seven times told, before one half of these knots could have got untied." And later, following some commotion upstairs, "By all that is unfortunate, quoth Dr. Slop, unless I make haste, the thing will actually befall me as it is."

There is no indication in the text as to the interval between Dr. Slop's departure upstairs and the time that Trim announces that the doctor is in the kitchen making a bridge. Uncle Toby, who had been asleep, takes this to mean a drawbridge until Trim cries "God bless your honour 'tis a bridge for master's nose. In bringing him into the world with his vile instruments he has crushed his nose, Susannah says, as flat as a pancake to his face, and he is making a false bridge with a piece of cotton and a thin piece of whalebone out of Susannah's stays, to raise it up."

Undoubtedly Dr. Slop's forceps could have crushed the child's nose, but if I am correct in stating that Tristram was premature, it is most unlikely that a

premature child whose nose was "crushed flat as a pancake" could have survived. Such an injury would almost certainly have been associated with a serious and fatal fracture of a thin plate of bone at the base of the skull.

It is more likely that the nasal deformity was evidence of congenital syphilis, and this might be supported by what we know about the mental condition of Tristram's elder brother and the possible fact that Tristram was premature.

The reactions of Mr. Shandy and the sympathetic Uncle Toby are vividly portrayed. Uncle Toby, in Chapter IX, Book IV, tries to comfort Mr. Shandy by saying, "It might have been worse." "I don't comprehend," said my father, "suppose the hip had presented" replied my Uncle Toby, "as Dr. Slop foreboded." After reflexion and understanding that he referred to the danger of injury to the boy's genitals he agrees.

Having recovered from his distress and being rather casually treated by Susannah on the stairs, Mr. Shandy makes the following interesting and very true observation. "Of all the riddles of married life—of all the puzzling riddles in a married state—there is not one that has more intricacies in it than this—that from the very moment the mistress of the house is brought to bed, every female in it, from my lady's gentlewoman down to the cinder wench, becomes an inch taller for it; and give themselves more airs upon that single inch, than all the other inches put together."

We can conclude that the delivery was difficult—it was almost certain to be if carried out prematurely, and we can also conclude that the child did suffer, because it is recorded that it had a fit early the next morning. Susannah rushes into her master's bedroom: "Sir, the child's in a fit—the child is as black as my shoe."

This description would fit in with either the cyanotic attacks frequently seen in the twelve to twenty-four hours following delivery of a premature baby, or might be accounted for by cerebral irritation following an intracranial hæmorrhage, the result of injury. At any rate, the confusion and haste to have the child baptised resulted in it being christened Tristram instead of Trismegistus.

In Chapter XX, Book I, the subject of baptism is considered at considerable length. He makes his readers conclude that his mother was not a Catholic, because of the statement, "It was necessary I should be born before I was christened." Following this is the Memoire presented to the Doctors of the Sorbonne on the question of prenatal baptism.

The Catholic ritual directs the baptism of the child in cases of danger before it is born, provided that some part of the child's body can be seen by the baptiser. The Doctors of the Sorbonne in 1733 enlarged the powers of the midwives and doctors by determining that baptism can be administered to the child by injection. Hence the presence of a squirt or syringe in Dr. Slop's equipment.

Like Dr. Slop himself, the Memoire to the Doctors of the Sorbonne is an anachronism, as this incident occurred twenty years after Tristram was born.

In discussing the obstetric aspects of Tristram Shandy, I have so far confined myself to a large extent to the text of the novel, but in conclusion I should like

to take a broader view of these aspects in the light of contemporary medical history.

In this work of fiction Laurence Sterne has given us a relatively clear picture of the obstetrical customs of his time. "Tristram Shandy" was published in 1759 and during the previous twenty years a gradual revolution had been occurring in obstetric practice. Prior to the advent of the Chamberlens and Smellie, and, indeed, during their reign, midwifery had been in the hands of uneducated midwives. The invention of the obstetric forceps and the teaching of Smellie resulted in a slow and gradual change, which was not secured without one of the fiercest discussions that ever took place in medicine. Sterne, in "Tristram Shandy," brought this discussion to the knowledge of the general public of his day and, to a certain extent, threw a beam of light on the prevailing iniquities of both sides taking part in the debate.

He revealed, perhaps unconsciously, the great dangers to which the expectant and parturient woman of his day was exposed. Admittedly, he has done so in an exasperating and irreverent fashion, and, in doing so, he reveals the latitude permitted by the authorities of the Church of England of that period. It is hard to tell if Sterne was trying to be the Dickens of his generation by exposing these prevalent evils.

One is inclined to think that his exposure was unwitting and only resulted from his spiteful caricature of Dr. Burton. If this is so, then at least one can say "out of evil came good."

I wish to acknowledge with thanks my indebtedness to Professor Miles H. Phillips, Laugharne, Emeritus Professor of Obstetrics and Gynæcology, University of Sheffield, for reading the paper and for his helpful criticism.

REFERENCES

- DORAN, ALBAN: "Burton ("Dr. Slop"): His Forceps and His Foes," *J. Obstet. and Gynæc. Brit. Emp.*, Vol. XXIII; 1913.
- ALLPORT, W. H.: "Tristram Shandy and Obstetrics," *Amer. J. Obstet.*, Vol. LXV; 1912.
- RADCLIFFE, WALTER: "Dr. John Burton and His Whimsical Contrivance," *Medical Bookman and Historian*, Aug.-Sept.; 1948.
- QUENNELL, PETER: "Four Portraits," *Studies of the Eighteenth Century*.

REVIEW

HANDBOOK OF ENCEPHALOGRAPHY. By Robert S. Ogilvie. Addison-Wesley Press Inc., Cambridge 42, Mass.

THIS is a very good little book, of some 129 pages, for anyone interested in this comparatively new subject. The author was technician to Dr. and Mrs. F. A. Gibbs and is thus well equipped to pass on valuable experience. After a brief history of the subject, the author describes the setting up of a laboratory and follows the various steps to the interpretation of the tracing. The book will be particularly interesting to people with a basic knowledge of modern electricity and who wish to take up this fascinating branch. It will also be useful to medical men who do not require too technical a knowledge of the subject. The book is essentially American and no British workers are mentioned in the bibliography. The list of manufacturers of the electro-encephalograph apparatus is useless over here.

H. H. S.