PERINATAL LESSONS FROM THE PAST

Charles White (1728–1813) and natural birth

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Charles White was born in Manchester in 1728. After an apprenticeship with his father Thomas, an eminent surgeon and man-midwife, he trained with William Hunter in London, and after a further year's study in Edinburgh returned to Manchester where he helped to found the Manchester Infirmary in 1752. Such was his distinction that he was admitted to membership of the Royal Society at the age of 33. In 1773 he published his most important work, a treatise on the management of pregnant and lying in women.¹ This book written 70 years before Pasteur and Semmelweis is especially remarkable for its observations on puerperal fever. White recognised that the condition was contagious and that there was a need to isolate affected patients and to disinfect their rooms and bedding after use. Above all he stressed the importance of prevention by strict cleanliness, good ventilation, and the encouragement of the free drainage of lochia by nursing the mother in a sitting position and by early ambulation. After 21 years' practice and at a time when one in 25 parturient women died from puerperal sepsis, he was able to claim with modesty that he had never lost a patient from this disease.

The second half of the 18th century may be regarded as the golden age of British obstetrics. Men like White preferred whenever possible to observe and admire nature rather than intervene, except when necessary. As he wrote:

'I might say it is inconceivable that Nature should suffer her most important process to be the least complete, and that she should need the help of art in an operation, almost prior to art itself. In her inferior productions we find that, in fact, she does not require it. The process of renewing the species, in the vegetable creation, is performed entirely by her unerring power: and the fruit when it becomes fully ripened, drops off spontaneously without the hand of art to separate it. In the whole animal race this process is equally distant from disease (there are exceptions). Why then should the human species alone, her noblest production, undergo her unkindness and neglect in so material an object?'

It therefore seems appropriate to include as an example of White's writing this extract from his chapter on natural birth and fetal adaptation to extrauterine life.

'In the beginning of the labor I would be so far from confining my patient to any one position,

Charles White of Manchester, 1728–1813.

that I would not even confine her to a single room, but would let her walk about from one apartment to another. Whenever a pain should oblige her to lie down I would take that opportunity of examination, that I might know whether the child was in a right position, and how fast the labor was advancing. During the whole time of her travail she ought to enjoy the fresh air; she should not be crowded with more friends or attendants that necessity required . . . Where the accoucheur is satisfied that the labor is natural, and that every thing is proceeding well, the patient should not be teased by attempting to hasten her delivery, nor even by too frequent examinations.

When the business is so far advanced that there is reason to believe the child will soon be born, it is in my opinion of great consequence that the woman should be in an horizontal position, and it will be most convenient if she lies upon her side with her back towards the practitioner . . . When the perineum begins to protrude, the pressure of a hand against that part will give great ease to the patient; the degree of pressure must be left to the judgement of the person employed, but if the pains are very forcing, it ought to be such as will prevent a too

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hasty delivery. If this caution be observed, and the patient be kept in an horizontal position, there will be no danger of a laceration of the perineum.

As soon as part of the head is produced . . . leave things to nature, and in general she performs her work the best, without assistance. After the patient has recovered herself a little, the pain will return, the shoulders will make their proper turns and be properly expelled . . . After a child is expelled in this gradual manner by the force of the woman's pains, the womb by degrees contracts itself . . . Where nature is very slow in relieving itself, assistance ought to be given, but not till it is seen how far she is able to do without it.

The common method of tying and cutting the navel string in the instant the child is born, is likewise one of those errors in practice that has nothing to plead in its favour but custom. Can it possibly be supposed that this important event, this great change which takes place in the lungs, the heart, and the liver, from the state of the foetus, kept alive by the umbilical chord, to that state when life cannot be carried on without respiration, whereby the lungs must be fully expanded with air, and the whole mass of blood instead of one fourth part be circulated through them, the ductus venosus, foramen ovale, ductus arteriosus, and the umbilical arteries and vein must all be closed, and the mode of circulation in the principal vessels entirely altered—Is it possible that this wonderful alteration in the human machine should be properly brought about in one instant of time, and at the will of a by-stander? Let us but leave the affair to nature, and watch her operations, and it will soon appear that she stands not in need of our feeble assistance, but will do the work herself, at a proper time, and in a better manner. In a few minutes the lungs will be gradually expanded, and the great alterations in the heart and blood vessels will take place. As soon as this is perfectly done, the circulation in the navel string will cease of itself, and then if it be cut no haemorrhage will ensue from either end; notwithstanding this, it will be always adviseable to tie it, as an haemorrhage might come on if the circulation should be quickened by the warmth of the cloaths and the bed. If the funis be cut

immediately after the birth of the child, or before the pulsation in it ceases, that end next to the placenta will bleed about three or four ounces, and if that end next to the child was not tied it would in probability bleed to death. Whatever method be pursued it is better not to tie that end next to the placenta, for the more it is lessened by the blood being drained from it, the greater liberty is given to the uterus to contract.

By this rash, inconsiderate method of tying the navel string before the circulation in it is stopt, I doubt not but many children have been lost, many of their principal organs have been injured, and foundations laid for various disorders.

When the infant is removed, the secundines are sometimes found wholly expelled; sometimes the placenta is extruded from the womb and lying in the vagina, in which case it is to be handled gently, and with great care gradually brought away . . . Sometimes an interval of eight or ten minutes succeeds the birth of the child, when a pain coming on, the secundines will be easily extracted by gently pulling the navel string, and here an easy pressure upon the abdomen by assisting the uterus to contract will be of service. If the placenta is very large, a finger may be introduced to bring down one edge of it as soon as it is within reach. In this manner I have proceeded for several years, and during that period I can with satisfaction declare that in natural labors I have never had occasion for the manual extraction of the placenta; I have never left my patient till it came away, nor have I ever been detained a single hour by it . . .

In 1790 Charles White resigned from the Manchester Infirmary after an argument with the Board of Management and founded the Manchester and Salford Lying-In Charity, which later became St Mary's Hospital for Women and Children. Finally, in 1813 after 'a long life of unremitting exertion of great and extensive usefulness' he died at the age of 84. St Mary's Hospital for Women and Children, Manchester celebrates its bicentenary this year.

¹ White C. *A treatise on the management of pregnant and lying-in woman*. London: Edward and Charles Dilly, 1773.