Catherine Schrader (1656–1746): the memoirs of a Friesian midwife

P M Dunn

Catherine Schrader, a Dutch midwife practicing 300 years ago, left records of some 4000 deliveries, 95% of which were spontaneous without intervention. The corrected maternal mortality was 4.6/1000 and perinatal mortality 54/1000 births.

Catherine Geertruida Schrader was born in Bentheim, north-west Germany, in September 1656 (fig 1). Her father, Friedrich, was tailor to the court of the city governor. Catherine was the eldest daughter in a family of four brothers and one sister. In the 1670s the family moved to Leiden because of political unrest. However, Catherine returned to Bentheim in 1682 and the following year married Ernst Wilhelm Cramer, a barber-surgeon. They then moved to Hallum and during the next nine years Catherine gave birth to six children, four daughters and two sons. In 1691 her husband Friedrich died and she was left a widow with her young children. Years of hardship followed, and in 1693 when aged 37 she set up in practice as a midwife with the experience no doubt gained from her own pregnancies and also from her late barber-surgeon husband. Two years later in 1695 the family moved to Dokkum, a walled town in the north of Friesland and an important centre for trade, so that the children might attend the grammar school there.

During the next 18 years Catherine worked amazingly hard, attending on average two deliveries a week. Furthermore she kept records of all the women she attended in a series of nine notebooks. They provide a valuable social record as they include, among other things, information on the occupation of the husband and the amount that she was paid for each confinement. This might be little or nothing, but was usually 3–4 guilders, though a gin distiller was charged 42 guilders and a minister 60!

In 1713 Catherine married again, this time a goldsmith, Thomas Higt. He was a leading citizen of Dokkum and indeed became its mayor. For the next eight years until her husband’s death in 1720, Catherine attended few births other than those of family and friends, one of which in 1718 was her first grandchild. However, after her husband’s death, Catherine once more became an active midwife, though now only attending on average one birth a week, many of which had been referred by other midwives. She was by now a wealthy woman, owning five houses. Her health remained very good throughout her life and she continued in practice until 1745 when she was 88. On 30 October 1746, she died in Dokkum at the age of 90.

In 1740 Vrouw Schrader had begun to write her memoirs1 using the notebooks to aid her recollections. They were based on her experience of some 4000 confinements, including 64 twins and three triplets. She stated: ‘‘(the memoirs are) to be used as a guide, or after my death, so someone still may get use or learning from it, to the advantage of my fellow-men’’. In her introduction she wrote:

‘‘Thereupon in my eighty-fourth year of old age in my empty hours I sat and thought over what miracles The Lord had performed through my hands to unfortunate, distressed women in childbirth. So I decided to take up the pen in order to refresh once more my memory, to glorify and make great God Almighty for his great miracles bestowed on me. Not me, but You oh Lord be the honour, the glory till eternity. And also in order to alert my descendants so that they can still become educated. And I have pulled together the rare occurrences from my notes. In my (many) years living ... in Friesland I saw my good, learned and highly esteemed, and by God and the people loved husband, go to his God to the great sadness of me and...”

Figure 1  Catherine Geertruida Schrader (aged 58) in 1714.
The inhabitants, leaving six small children in my thirty-eight years of age. But then it pleased God to choose me for this important work: by force almost through good doctors and the townspeople because I was at first struggling against this, because it was such a weighty affair. Also I thought that it was for me and my friends below my dignity; but finally I had myself won over. This was also The Lord's wish."

The memoirs are based on her recollection of 122 of her most serious and interesting deliveries and thus provide a sobering account of women's experiences during childbirth. Schrader was an active midwife who clearly liked to be in charge. The memoirs reflect her professional pride and an awareness of her ability and manual dexterity. She felt a true sense of vocation on being called by the Lord to this "weighty affair". It is also clear from her memoirs that she was often consulted by other midwives when they were in difficulty, and for that reason her account is heavily loaded with serious cases in which she had to intervene, usually by podalic version and breech extraction and sometimes, usually when the fetus was dead, by use of a crochet. In using instruments, she was accustomed to summon the assistance of a doctor. For the most part, though, childbirth in her day was a social affair, and Catherina welcomed the presence of family, neighbours, and friends in the delivery room.

The following seven cases from Schrader's memoirs give the reader a glimpse of the experiences confronting a midwife some 300 years ago.

The perils of midwifery"

"1693 on Shrove Tuesday in the evening I was fetched for the very first journey in my life to Wijns to a widow whose husband was called Chlas Jansen, in terrible weather, stormy wind, hard frost. The three of us travelled by sleigh over the ice. The wind blew so hard that one could not stand. Pieces of ice got stuck in my legs, so that blood dripped into my hose. And came at last by sleigh to Wijns, three hours going; we were almost dead. The people carried me into the house and forced my mouth open; and poured brandy into my mouth. There was a good fire. I thawed out a little. First I demanded a bowl with snow and rubbed my hands and feet with it until life came into them. Otherwise I would have been ruined for life. After I recovered again, I went to help the woman. And also her dead husband's brothers had taken everything away from her and had said that she would not give birth; therefore the life of this child was of great consequence. The woman had a very heavy labour, like her previous labours had also been; she had had two midwives from Leeuwarden [in her previous labours]. I prayed to [The] Lord, and he answered me and delivered the woman of a good, big daughter to the great delight of her and me. This introduction was oppressive for the first time. The Lord be thanked. All well. And the woman got all her belongings back."

A case of prolonged cord"

"1700 on 13 March fetched to Oostersingel to Gebke, the wife of the painter and thread winder, Jackop Evers. Found that the water was gone. And his arms born, the navel string outside. Turned it quickly and brought it forth. But it took a good hour using every device before one could bring him to life. But then everything well for the mother and child. It came from the navel string."

A case of placenta praevia"

"1706 on 1 August been called to Liskens, wife of Pybe Jans, bricklayer, who had previously had four very big floodings. The fourth time. Examined her. Found the afterbirth grown in fast in front of the child. The woman was unconscious in a dead faint. I ordered that the woman must be delivered, but I wanted to have a doctor with me. She had no labour. The doctor said that he would administer something to induce labour. I said, that must not be, because the flood would become still heavier; I should deliver her without labour. The doctor found this idea curious. I said, the child was dead. He insisted that it lived. I pulled the afterbirth after I had loosened it on one side, looked for the feet and delivered it immediately to the shame of doctor Eysma, who stood firm that the child lived. And it was already completely rotten. The skin dropped off all over. That I could deliver her so without labour was occasioned because the parts became very slimy and tractable after such long-lasting flooding; otherwise this could not have occurred. And then the woman must be delivered without delay. Death is then close by. If I hadn't done this with this woman, she would not have lived another half hour; but she still has lived another thirty years after. She lay unconscious a day and a night. The doctor gave her a "heart strengthener" and got her strength back with time. In Dokkum. God alone be honoured."

A case of arm presentation"

"1711 on 10 February I was fetched to Nijkerk to Wattse Jennema, whose wife was called Alltie Jouwkes. She wanted me to attend her, but didn't call for me. And fetched a midwife from Morra, who tortured her for three days. She turned it over to the man-midwife, doctor Van den Berg. He said, he must cut off the child's arms and legs. He took her for dead. And he said, the child was already dead. Then I was fetched in secret. When I came there her husband and friends were weeping a great deal. I examined the case, suspected that I had a chance to deliver [her]. The woman was very worn out. I laid her in a warm bed, gave her a cup of caudle, also gave her something in it; sent the neighbours home, so that they would let her rest a bit. An hour after her strength awakened again somewhat. And I had the neighbours fetched again. And after I had positioned the woman in labour, I heard that the doctor came then to sit by my side. I pulled the child to the birth canal and in half of a quarter of an hour I got a living daughter. And I said to the doctor, here is your dead child, to his shame. He expected to earn a hundred guilders there. The friends and neighbours were very surprised. The mother and the child were in a very good state."

A case of maternal convulsions"

"1726 on 20 April [fetched] to Catelijn, the wife of Johannes Hollkes, town councillor, who was the daughter of the Mayor Lindeman. Fourteen days before she got very..."
bad pains in her leg and bad intermittent fits, the intermittent fits lasting for three days, but [got] better again. I had great difficulty. Had to foment her over a warm bath. Was no opening. Had to make it myself. But in the end everything well for mother and child.”

A malformed infant

“1733 on 10 November with Maryken, wife of the servant to the orphanage. A son. But had a face like an ape. At the back of the neck an opening as big as a hand. Its genitals were also not as they should be. She [the mother] had seen apes dancing. It did not live long. Oh Lord, save us from such monsters.”

Schrader believed as many others did in her day, that fetal malformations were caused by maternal impressions during pregnancy.

A case of contracted pelvis

“1739 on (Saturday night), 29 September with Ninke Boeck, wife of Waade Derckx, Geneva distiller’s labourer. A very heavy labour, because she was very crippled on both sides. Also too small and delicate. The child could only pass through the pubic bones, with difficulty, because they were so closed up. And she and I had it very heavy. But The Almighty God made everything still come out for the best. A good son. And all well for mother and child. The Lord be thanked.”

The probability is that this lady had suffered from rickets, a disease that was becoming rife in Holland2 at that time, as it was in England.3

Professor Kloosterman of the University of Amsterdam, having analysed Schrader’s notebooks and memoirs, pointed out that they provide a unique insight into midwifery in the early 18th century.4 In particular, because she recorded all her deliveries, it became possible, after making allowance for the referral of difficult cases, to obtain some idea of the frequency of complications and also of the death rates. Kloosterman estimated that the corrected maternal mortality for Schrader’s practice was about 4.6/1000 births, with sepsis the leading cause of death, followed by haemorrhage and uterine rupture. The immediate perinatal mortality he considered to be around 54/1000, a figure not too dissimilar to that of developed countries early in the 20th century. He assessed that birth was spontaneous in 95% of Schrader’s cases, the remaining 5% being subject to manual extraction (3%), the use of instruments (0.5%), or involving manual removal of the placenta (2%). That 19 out of each of 20 of Schrader’s deliveries were normal and spontaneous without intervention and that 95% of her babies survived childbirth should give us pause for reflection in this present time of high intervention.

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REFERENCES

