One sunny spring day, a Resurrectionist priest sips tea and speaks of his time as a Bolivian missionary in the 1960s and ’70s. His recollection of the local ‘Indians’ is obscured by more than three decades’ distance. China cup in hand, he recalls vaguely their mud huts, flocks of sheep, herds of llamas, and the beautiful, rugged terrain of the altiplano. With greater precision, he speaks about the local belief system, especially attitudes towards stillbirths. This left a strong impression upon him. The priest emphasizes how deeply fearful the locals were of stillborn babies, and he flavours his recollections with two sad anecdotes. One day, he says, some villagers brought him a small blue corpse. The baby’s father insisted that the missionary baptize it. Since this was canonically impossible, the priest performed an impromptu blessing. It effectively banished the evil spirit conjured by the unfortunate birth. Satisfied with the blessing, the villagers relaxed and returned to their normal lives. On another occasion, one of the priest’s confrères was less delicate. A mother presented him with her dead baby, pleading for a postmortem baptism. At last the cleric told her, “The Church will only permit me to baptize your child if it draws milk from your breast.”
Since this was impossible, the mother went away frustrated and ill at ease, having been unsuccessful in her bid to exorcise the unlucky spirit.

These modern South American stories — oral histories, in fact — transmit premodern European sentiments about baptism, birth, and infant death.¹ In the medieval and early modern world, birth and death were particularly linked: “Death was the constant and much-feared companion of birth throughout the Middle Ages; medieval accounts of pregnancy and childbirth were shaped by an acute sense of the vulnerability of mother and child and punctuated by descriptions of tragedies that took the life of one or both.”² Before clinics, anaesthetics, and modern surgical techniques, a woman was never at greater risk of embracing death than when she was attempting to bring forth new life; and her issue, before, during, and immediately after delivery, was itself not guaranteed safe entry into the world. Birthing brought with it the risk of linking the arrival and departure of bodies. This uncertainty and danger drove the cultural search for meaningful answers. Premodern Europeans, much like the indigenous inhabitants of colonial Bolivia, crafted cultural lenses to help them interpret birth and infant death.

This article analyses a fifteenth-century document, a record of a so-called Caesarean section, or, more precisely, a sectio in mortua, to show how the medieval mind linked medical practices to superstition, theology, law, and kinship. Though, at first blush, the document is a straightforward account of an increasingly common surgical procedure, its historical utility is far greater.

Based on our case study, we argue that medical history in general, and obstetrics in particular, is written at the intersection of manifold cultural phenomena. A history of the premodern Caesarean section extends beyond issues of pregnancy, labour, and childbirth. It encompasses and transcends the history of medical education, professional licensing, and surgical practice. It also necessarily entails broader notions of embodiment — how premodern people conceptualized bodies — and considers what they made of life, death, and the afterlife. Finally, it considers how medieval

¹ The Bolivian anecdotes come from an oral interview we conducted with a retired member of the Congregation of the Resurrection in the order’s Ontario Kentucky province. Though it may appear gratuitous to begin a chapter on medieval Caesarean sections with a modern anecdote, there are good reasons for doing so. Scholars of colonial cultures remark on many of the same tendencies and concerns regarding postmortem extraction of fetuses as do we. This speaks to an enduring social preoccupation that spans centuries and continents and to the complex relationship between theology and fetal surgeries. See, for example, Rigau-Pérez, “Surgery at the Service of Theology”; and Warren, “An Operation for Evangelization.”

people associated bodies with socially constructed notions of gender and material wealth. A single brief document attesting to an actual Caesarean section, thus, opens a window from which to view these issues. Through one brief text, we gain a richer sense of the complex relationship between people and bodies and of the delicate link between the beginning and ending of life in the late Middle Ages.

The historical consideration of medical procedures in relation to broader cultural realities is now common among social historians of medicine. In the words of Katharine Park,

> the history of the body has at its core a history [. . .] to which a variety of “cultural meanings” (regarding, for example, gender, shame, and sexuality) are appended. [. . .] men and women [. . .] understood their bodies primarily in terms of family and kinship, on the one hand, and religion, on the other. Medical models — even in this world of highly developed medical institutions and practices — came in a distant third. Family and religious concerns underpinned procedures such as embalming, autopsy, and “Caesarean section.”

The document we use to trace these relationships is a notarized act (actum, instrumentum) from the Provençal town of Volx dated 13 August 1473 (Fig. 1). It is still preserved today in a bound cartulary (cartularium), a book containing copies of official documents drawn up by Louis Fabri, a notary public (notarius publicus). Fabri wrote the document in Latin on paper. Surrounding it in his register are more mundane acts, copies of dowry contracts, last wills and testaments, and commercial agreements.

Fabri’s written act is of great historical significance for two reasons. First, it offers rare evidence of practice of the so-called Caesarean section. Historians have only a handful of written texts proving that this surgery was actually performed in the Middle Ages.

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3 Park, Secrets of Women, 23.
4 The document is preserved in the Archives départementales des Alpes-de-Haute-Provence, 2E 2920 fols. 60v–61. According to Baratier, the earliest documented reference to Volx is from 1126. In the later Middle Ages, the town was located in the viguerie of Forcalquier and the diocese of Sisteron. In 1315, Volx comprised 120 hearths, but only 39 in 1471. Using a rough demographic co-efficient of 5.5 persons per hearth, the pre-plague population of Volx was, thus, around 650, and the post-plague population around 200; see Baratier et al., eds., Atlas historique: Provence, 208.
5 In contrast to abundant ecclesiastical legislation that required the operation whenever possible, which we summarize below, modern historians have uncovered only twelve written sources that attest to the actual performance of postmortem Caesarean sections. See Appendix B for a comprehensive list.
legal protection to a barber, a type of rudimentary surgical practitioner, for cutting a fetus out of its dead mother’s womb.

The Document

The document records that on Saturday, 13 August 1473, Nicoulau Fabri lost his wife, Catarino, in labour. It is impossible to know whether Nicoulau was related to the notary who recorded the story of Catarino’s death and the subsequent uterine section. Nicoulau, the act tells us, appealed to the bailiff of Volx, the chief officer of justice in that town, a man named Guilhem Robaudi. Guilhem was an officer of the local seigneur, in this case a military order and not an individual: Volx belonged to the Knights of the Hospital of Saint John of Jerusalem, also called the Hospitaliers. Nicoulau petitioned the bailiff to consent to allow a visiting barber, Giraud Villenove, to cut the fetus out of the dead Catarino’s uterus. The act tells us two

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6 In fact, Nicoulau and Catarino have left absolutely no other documentary traces in the local archives.
7 Guilhem Robaudi, the local bailiff, did leave some documentary evidence of his life. These records indicate that while his job was an important one, he was not wealthy. He and his family resided in Manosque, the local stronghold of the Knights Hospitaller, about 15 km from Volx. He had two daughters, both of whom married Manosquin men. A dowry contract of 1477 indicates that when Astrug married Bertran Tardini, two of her cousins offered money to augment her dowry; see ADAHP 2E 3878 fol. 176v of 12 January 1477. In 1479, Astrug’s sister, Raysent, a widow, married Jehan Martini, another local. The same two cousins appear in Raysent’s dowry contract; see ADAHP 3901 fol. 43 of 26 September 1479. These two dowry contracts attest that the Robaudi family’s financial circumstances were modest. Guilhem could offer only 25 florins to each of his girls. This is slightly less than half of the average dowry for that decade in this region.
8 Other archival information on the barber indicates that he was in his early twenties when Louis Fabri drew up the act concerning the Caesarean section. An old apprenticeship contract from Villenove’s youth shows that on 6 May 1461 he was about eleven years old. That day, Antouneto, probably his mother, and her new husband, Antoni Pauli, committed the young Giraud to a four-year apprenticeship with Master Durand Chamboni, a local barber. Other apprenticeship contracts for barbers from this era provide for terms ranging from two to five years. During the four years while Giraud learned his trade, the contract says, he was to live and eat in his master’s home. The older barber promised to teach him the art of the barber (arte barberie) “well and decently” (bene et decenter). Antouneto and her husband agreed to provide Giraud’s clothes and shoes. At the end of the contract, the master promised to give Giraud his own scalpel or razor. Things did not go as planned. After just five months, both parties agreed to cancel the agreement, though they did not record a reason. For more on apprenticeship contracts and the ways in which boys acquired trades, see Bednarski and Courtemanche, “Learning to be a Man,” 126-35.
other important details about Catarino’s death in labour: first, that her husband mourned. He approached the bailiff “sadly and with a bitter heart” (dolenter cum cordis amaritudine). Second, the notary recorded the obvious urgency of the situation. He wrote that it was pious and necessary to save the baby quickly (et cum pium et necessarium sit celeriter partui predicto succurere) and again later that it be done swiftly and without delay (sit celeriter et sine mora).

The notary also recorded the husband’s motivation and the method by which he wished it fulfilled: the husband wanted the operation “to save the aforementioned fetus [. . .] in order that [. . .] the font of regeneration, and, simultaneously, salvation, be made available to [it] as is customary [. . .] for the orthodox faithful and [as] has been divinely established for the health and safety of the soul.” Baptism, therefore, was the ostensible reason for the surgery. The operation should be done swiftly and without delay, by an incision in the dead woman (per incisuram propterea eidem deffuncte). For his part, the barber promised to adhere to standard surgical practice at that time: the document instructs him to make the incision according to the art of surgery (secundum artem sirurgie). To illustrate the extraordinary nature of the act, one that did not figure in legal custom or precedent, the widower threw himself on the bailiff’s mercy and appealed to his sense of charity and justice (caritatis et iusticie). The petition moved the bailiff. He consented because of the “pious and charitable” nature of the request and because he agreed that Catarino was in fact dead. He knew this, first, because of the relationship between the deceased and the petitioner and, second, because twelve other people had been present at Catarino’s death and testified to it. The act of 1473 was, therefore, legal proof that the bailiff granted Giraud the barber permission to perform upon Catarino’s corpse a sectio in mortua, a postmortem excision of her fetus for the purpose of baptism.

Surgical, Spiritual, and Legal Salvation

By the end of the Middle Ages, sectiones in mortua were increasingly common. It is an anachronism to call these procedures Caesarean sections for, though medieval writers often drew a link between Julius Caesar and the operation, the term ‘Caesarean

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9 See Appendix A for the full transcription and translation of the document.
10 See Appendix A.
section’ entered medical discourse only in 1581. Late medieval intellectuals knew of the alleged connection between Julius Caesar and surgical birth thanks to earlier popular writers. In the first century C.E., Pliny the Elder famously drew the link between the name Caesar and the Latin verb caedere ‘to cut’:

Those children, whose birth has cost the mother her life, are evidently born under more favourable auspices; for such was the case with the first Scipio Africanus; the first, too, of the Cæsars was so named, from his having been removed by an incision in his mother’s womb.

In the early Middle Ages, Isidore of Seville (d. 636), a popular encyclopaedist, repeated Pliny’s connection between ‘Caesar’ and ‘incision.’ His words were recopied into the popular thirteenth-century French Deeds of the Romans (Faits des Romains). More generally, Graeco-Roman mythology fed learned awareness of the procedure. The Greek gods Dionysius and Asclepius were both cut from wombs, the former from his mother’s, the latter from his father’s. From about the first century onwards and throughout the Middle Ages, delivery by incision was linked with Caesar and divine providence.

Despite abundant literary instances, the canonical surgical literature up to the fourteenth century ignored the sectio in mortua, probably because it could not be

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11 Historical research into the history of the so-called Caesarean section is fragmented and, at times, inaccurate. Blumenfeld-Kosinski’s Not of Woman Born centres on a flawed argument. The flaws are summarized in Green’s review of the book. For a more helpful overview of ancient and medieval sectiones in mortua, see Park, Secrets of Women, 15, 17, and see her index s.v. ‘Caesarean section.’ Other aspects of the history of the premodern Caesarean section are spread over the following works: Schäfer, Geburt aus dem Tod; Trolle, The History of Caesarean Section; Lurie, “The Changing Motives of Cesarean Section”; Pundel, Histoire de l’opération césarienne; Young, Caesarean Section: The History and Development; Arcas, Historia de la operación cesárea en España; and Hofschlaeger, “Der Ursprung des Kaiserschnittes.”
12 Pliny the Elder, The Natural History, 7.9.
13 Laget notes that Hindu, Persian, and Nordic mythology also contains stories of heroes or princes, religious or national founders, born by extraordinary means. She finds the same in the indigenous cultures of the Pacific, Africa, and the Americas; see Laget, Naissances, 248.
14 Both surgical and other texts mention the procedure. Early medieval ecclesiastical sources, for example, used stories of Caesarean sections to demonstrate miraculous powers. Thus, “in Spain a bishop of Merida was said to have performed a Caesarian operation. From St. Gall in the ninth century we have a similar case. Fourteen days ahead of nature’s schedule, according to the chronicler’s account, ‘an infant was cut out of the mother’s body and wrapped in the fat of a newly killed pig’”; MacKinney, Early Medieval Medicine, 41. The original text of the Spanish case appears in Paulus, De vita et miraculis patrum Emeritensium, chap. 4; PL:128-30. The original of the St. Gall
What the Caesarean Section Meant in the Middle Ages

performed on a living woman and was not, therefore, part of medicine proper.\textsuperscript{15} Learned physicians and surgeons, thus, did not study this procedure in the medical faculties of medieval universities. Nor could they look to the Arabic tradition for guidance on \textit{sectiones in mortua}, possibly since Islam provided no theological or legal motivation to excise fetuses. This is not to imply that medievals opposed opening up bodies: “Outside of colleges and universities [...] human dissection proceeded apace. Beginning around 1300, it developed quickly and spontaneously out of a set of \textit{ad hoc} cultural practices that had nothing to do with medical instruction.”\textsuperscript{16} And so, \textit{sectiones in mortua}, “which had been occasionally practiced before 1300, began to be performed with some frequency in southern France and northern Italy in the late thirteenth and early fourteenth centuries.”\textsuperscript{17}

The very first medical treatise to discuss the \textit{sectio in mortua} procedure was Bernard de Gordon’s \textit{The Practice or Lily of Medicine} (\textit{Practica sive Lilium Medicinae}), though older artistic evidence attests to surgical interest at least a generation before Bernard.\textsuperscript{18} Prior to Bernard, medical texts that indicated obstetrical and gynaecological interventions — Albucasis’s \textit{Surgery}, for instance, written in Arabic around the

\textsuperscript{15} Most scholars accept that in premodern times, women were unlikely to have survived the operation. Boss, however, argues that ancient Jewish physicians performed Caesarean sections on living women who then survived. He bases his argument on a few lines of implicit scriptural evidence and on later rabbinical commentaries. He dismisses Maimonides (d. 1204), a Spanish rabbi and arguably the greatest of the medieval Jewish physicians, who wrote, “what some say, that a woman can live after her side is cut open and then bear a child, is contrary to reason and exceedingly absurd”; qtd. in Boss, “The Antiquity of Caesarean Section with Maternal Survival,” 122. After a delicate and sophisticated presentation of rabbinical evidence, Boss dismisses Maimonides’s statement by concocting a bizarre and ill-founded explanation. He claims that Maimonides’s protestation was “a device to protect the Jews from [...] suspicion” among Muslims and Christians, and concludes that medieval Jewish physicians must have forgotten how to perform Caesarean sections on living women because of religious persecution; Boss, “The Antiquity,” 129-30.

\textsuperscript{16} Park, \textit{Secrets of Women}, 15.
\textsuperscript{17} Park, \textit{Secrets of Women}, 64.
\textsuperscript{18} The earliest manuscript illumination dates from the third quarter of the thirteenth century. A reproduction labelled “Male physicians instructing two midwives in the performance of a Caesarean section on a dead mother” appears in Green, \textit{Making Women’s Medicine Masculine}, 104. For general information on Bernard de Gordon, see the various works by Demaitre including his \textit{Doctor Bernard de Gordon: Professor and Practitioner}. A Spanish edition of Bernard’s \textit{Lilium} is available in Dutton and Sánchez, eds., \textit{Bernardo de Gordino: Lilio de medicina}. 
year 1000 at Cordoba — may have contained information on fetal positions but not on extracting a fetus by incision.19 Similarly, the famous Trotula, like other well-known works on gynaecology, “could not have fulfilled surgeons’ need for obstetrical information [. . .] since it had nothing on surgical inventions save for an important chapter on repairing perineal tears and ano-vaginal fistulae.”20 Bernard de Gordon, in section 7.15 of his treatise, was the first to describe an emergency sectio in mortua operation. He believed that a fetus could survive its mother’s death provided it continued to receive air. The Practice or Lily of Medicine instructs the surgeon to hold the dead mother’s mouth and cervix open during the procedure to prevent fetal asphyxiation. By the mid-fourteenth century, Guy de Chauliac (d. 1368), clerical surgeon to the Avignonese popes, wrote his Great Book of Surgery (Chirurgia magna).21 Guy provides a more detailed account of the procedure than Bernard and specifies that the incision must be made on the woman’s left side to avoid her liver. Green notes that by Guy’s lifetime male surgeons increasingly “came to believe that they needed to have some skill with obstetrical interventions” and that such surgeries became “an expected task for the male surgeon, even if he was only expected in most cases (in France, at least) to supervise female midwives rather than perform interventions on his own.”22

This shift in surgical training was not merely theoretical; historians of medicine have shown conclusively that with male obstetrical instruction came increased access to female patients’ bodies.23 By 1473, the year of our document, European surgical technique had incorporated sectiones in mortua for nearly two centuries.

The spread of this operation was largely propelled by the Catholic doctrine that only baptized souls can enter heaven. This notion was widespread even among the

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19 In Provence, surgeons produced an Occitan version of Albucasis by the fourteenth century; see Trotter, “Per fort desir de saber: la Cyrurgia d’Albucasis.” Green notes that five of thirty-three extant manuscripts of Albucasis contain a “sequence of fetus-in-utero figures that […] had circulated since late Antiquity.” She goes on to remark, however, that “the fetal images did not depict any clinical encounter; they show neither what tools nor what manual interventions were needed to rectify the situation”; Green, “Moving from Philology to Social History,” 335.

20 Green, “Moving from Philology to Social History,” 358.

21 Guy de Chauliac’s treatise is available in a modern critical edition with English commentary. See McVaugh and Ogden, eds., Guigonis Caulhiaco (Guy de Chauliac): Inventarium sive Chirurgia magna.

22 Green, “Moving from Philology to Social History,” 358.

23 In general, see Park, Secrets of Women, and Green, Making Women’s Medicine Masculine.
unlearned, and it provoked considerable parental anxiety. In the words of one historian of childhood, “This fear of eternal damnation accounts for much of the violent anxiety displayed by mothers [. . .] when they realized that their infants were stillborn or had died immediately after birth. [. . .] Ordinary lay people [. . .] shared clerical anxiety about baptism well before the end of the Middle Ages.” Once uterine section became a surgical option, there was a demand for the procedure, motivated by religious concerns.

The Church, drawing on ancient law and custom, encouraged this practice. There was, by the late Middle Ages, a long learned tradition that supported and justified sectiones in mortua. Ancient Roman law forbade the burial of pregnant women: “The Lex regia on women who die while pregnant forbids that she be interred before the offspring is cut out of her. He who acts contrary to this is seen to have destroyed the hope of the new life along with the pregnant woman.” Almost from the beginning of the Christian era, late antique theologians encouraged the faithful to do all they could to save souls through baptism. In the early third century, Tertullian (d. c.220) wrote that rescuers must be bold: should they withhold help, and thereby damn a soul, God would judge them harshly. The Church Fathers encouraged early Christians to take risks if it meant baptizing one in need. So great was the impetus to baptize that they even extended celebration of the sacrament to the non-ordained. In the fourth century, Jerome (d. 420) wrote that in an emergency a layman could baptize, since he who receives a gift can pass it on.

25 “Negat lex regia mulierem, quae praegnans mortua sit, humari, antequam partus ei excidatur; qui contra fecerit, pem animantis cum gravida peremisse videtur.” The law is in Marcellus, Digest, Book XXVIII. It is readily available today online via the Corpus Iuris Civilis, ed. Beck, 1:189.
27 See Jerome, “Dialogus Contra Luciferianos,” section 9: “Quod frequenter, si tamen necessitas cogit, scimus etiam licere laicis. Ut enim accipit quis, ita et dare potest”; PL 23:165A. The issue of lay baptism was far from static in the Middle Ages. Some later medieval canonists were notably suspicious of lay baptism. “For the legislators of the 1421 Saint-Brieuc synod and the ca. 1328-30 Reims synod, an infant body baptized by the laity was by definition a suspect site that demanded an exorcism”; Taglia, “The Cultural Construction of Childhood,” 286. Taglia discusses at length the issue of clerical suspicion about lay baptism and the evolution of subsequent conditional baptism rituals.
and pagans could administer a valid Christian baptism. 28 Popes and councils in the high Middle Ages upheld his opinion. 29 The typically misogynistic medieval Church confirmed the validity of emergency baptism by women. 30 Thomas Aquinas (d. 1274) considered in great detail which parts of a fetus could be baptized, and how, if the child were not fully removed from its mother’s womb. 31 All this emphasis encouraged the conclusion that decreed ‘baptism if at all possible.’ Once the sectio in mortua became an available option, Church thinkers eagerly adopted it.

Churchmen in the eleventh and twelfth centuries promoted sectiones in mortua when necessary for baptism. Historian Peter Biller notes that the earliest reference to the procedure comes from a letter written by Ælfric of Eynsham to Wulfstan, archbishop of York, sometime between 1003 and 1005. 32 A series of Church councils,

28 "Baptismus enim non est hominis, sed Christi; ideoque nihil interest haereticus, an fidelis baptizet" (Baptism, moreover, is not of man, but of Christ; and it is, therefore, of no interest whether a heretic or a Christian baptizes); Isidore of Seville, De ecclesiasticis officiis, cap. 25; PL 83:822C.

29 Pope Nicholas I (d. 867) confirmed Isidore’s opinion that even pagans and Jews could perform valid baptisms: “A quodam Judaeo, nescitis utrum Christiano, an pagano, multos in patria vestra baptizatos asseritis, et quid de his sit agendum consulitis. Hi profecto si in nomine sanctae Trinitatis, vel tantum in nomine Christi, sicut in Actibus apostolorum legitimus, baptizati sunt (unum quippe idemque est, ut sanctus exponit Ambrosius constat eos non esse denuo baptizandos”; Nicholas I, “Responsa ad consulta bulgarorum,” PL 119:1014D. In 1215, Canon 1 of the Fourth Lateran Council stated that baptism leads to salvation, no matter who administered it. The full English text of the council’s canons is now in the public domain through Schroeder, ed., Disciplinary Decrees of the General Councils, 236-96.

30 Urban II (d. 1099) wrote that, if urgently necessary, a woman could baptize an infant unless it was her own godchild: “Super quibus consulit nos tua dilectio, hoc videtur nobis ex sententia respondendum; ut et baptismus sit, si instante necessitate femina puerum in nomine Trinitatis baptizaverit, et quod spiritualium parentum filii, vel filiae, ante, vel post compaternitatem geniti possunt legitime conjungi, praeter illam personam per quam compatres sunt effecti”; PL 151:529A.

31 See Article 11, “Whether a Child can be Baptized While yet in its Mother’s Womb,” of the Summa theologica. Aquinas declared that a child cannot be baptized while in the womb. If, however, death is imminent, and the child has partially emerged, then baptism is possible. Aquinas preferred that such emergency baptisms involve pouring water on the fetus’s head but conceded that this may be done to any visible body part.

32 Biller, “Childbirth in the Middle Ages,” 47. For the full text of Ælfric’s letter, which contains a question and response, see Fehr, ed., Die Hirtenbriefe Ælfrics, 222-27; section II reads, “De pregnante muliere mortua nusquam legi utrum secari debeat an non. Ferunt tamen primum Caesarem sectum fuisse de utero matris sue et ideo Caesarem appellatum fuisse; et nos audiumus quosdam infantes similiter sectos de mortuis matribus et baptizatos fuisse. Et, quod uerius est, nos uidimus et nouimus hominem uixisse usque senectutem, qui sectus erat de mortua matre. Et ideo consultius
moved by patristic writings and inspired by the twelfth-century revival of Roman law and its injunction against burying a pregnant corpse, instructed Christians to perform *sectiones in mortua* whenever a mother died in delivery and it was suspected that the fetus lived on. By 1208, Odo of Sully, the bishop of Paris, issued ecclesiastical legislation that insisted on *sectiones in mortua* whenever possible. In 1236, the Council of Canterbury likewise proclaimed that if a woman died in labour with an undelivered child, then her womb should be opened. But, the councilmen added, care should be taken to keep her mouth open. By 1280, the Council of Rouen repeated this point of canon law, including the reference to the open mouth. That same year, the Council of Cologne issued detailed rules governing baptism, including one that specified that if a woman died in labour, her uterus should be opened “with great care” (*cum magna cautela uterus eius aperiatur*). Thirty years later, in 1310, the Council of Trèves left out the reference to the mother’s mouth but still insisted on the operation when needed for salvation.

All this ecclesiastical legislation, developed by theoretically celibate men, translated into real-life practice. By 1265, the Bolognese jurist Odofredo had offered a legal opinion that a child extracted surgically from its mother’s womb should be granted the same status in law as one born vaginally. The earliest documented *sectio in mortua* to save an unborn soul took place in Pisa in 1305. A Florentine preacher told how he had summoned doctors and midwives to remove a living fetus from its mother’s womb. The increase in the frequency with which the *sectio in mortua* was performed was, therefore, inextricably linked to the Church’s desire to baptize every possible soul. There is no question that medical experts began to act on theological concerns.

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33 For the Latin text of Odo’s Parisian synod, see PL 212:63D, no. 6: “Mortuae in partu scindantur, si infans credatur vivere; tamen si bene constiterit de morte earum.”
This makes the reason given by the bereaved father in our document entirely plausible. His claim that he wished to bring his unborn child to the orthodox faith and save its soul rings true. But his motives may also have extended beyond theology.

By the late Middle Ages, the Church’s ongoing push for baptism fed theological innovation, but it also fostered popular confusion. In the late twelfth century, learned theologians, in response to their own inherent dissatisfaction, questioned Augustine’s conclusion that all unbaptized babies were damned. This questioning led to theological innovation and an “élargissement des horizons célestes,” a widening of the celestial horizons. Thinkers like Anselm of Bec (d. 1109), Peter Abelard (d. 1142), and Peter Lombard (d. c.1164) re-addressed the issue of unbaptized infants and moved away from Augustine’s harsh view. Ultimately, Thomas Aquinas (d. 1274) concluded that the souls of unbaptized children existed apart from God but in a state of perpetual bliss. This medieval softening of Augustine’s notion led to broad ecclesiastical acceptance of a fourth place, a children’s limbo (limbus puerorum or limbus infantium). This infants’ limbo was between heaven and hell, possibly at the outermost circle of hell. Rather than comfort grieving parents, however, this enlarged afterlife fed their confusion. Despite Aquinas’s pronouncements, ordinary Europeans continued to agonize over their dead children’s fate. As historian Didier Lett put it, Christian parents suffered profound guilt, “une profonde culpabilité,” over

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40 See John 3:5: “Jesus answered, ‘Very truly I tell you, no one can enter the kingdom of God without being born of water and Spirit’”; see also 1 Pet. 3:21, Acts 2:38, Acts 22:16, Rom. 6:3-4, and Col. 2:11-12. Although Augustine of Hippo first held that the souls of unbaptized children existed in a liminal state between salvation and damnation, his conflict with the Pelagians hardened his position, and he ultimately concluded that any soul marred by original sin was damned. For further discussion, see Lett, “De l’errance au deuil.” See also Alexandre-Bidon, La Mort au Moyen Age, 261-62.

41 This movement came around the same time as the articulation of purgatory. In the late twelfth and thirteenth centuries, Church thinkers defined purgatory, and named it from the Latin verb purgare ‘to purge’ or ‘cleanse.’ The medieval concept of purgatory entailed a place or state of temporary punishment. It was intended for souls neither pure enough for heaven, nor wicked enough for hell. In general, this era experienced what Jacques Gélis calls an “élargissement des horizons célestes,” the product of theological reflection upon divine justice. The enlarged heaven included purgatory, a children’s limbo, and a patriarchs’ limbo (limbus patrum) in “Abraham’s bosom” (Luke 16:22) for the souls of the righteous who died before the coming of Christ; see Gélis, Les enfants des limbes, 175-76.

42 Dante gives a vivid lamentation of the children’s limbo in Inferno, canto IV.
the loss of unbaptized babies. Many people subscribed to the non-canonical belief that such children could be saved through parental faith. Some parents, thus, led lives of renewed devotion and prayer in the canonically futile hope of saving their dead offspring. Other parents reached unorthodox conclusions about the role of baptism in salvation:

A few medieval reports even suggest that some parents believed that baptism ‘created’ the infant’s soul, contrary to theological teachings. For instance, in 1374 the husband of a French victim of bubonic plague who was five months pregnant feared that if the infant died in his wife’s womb, it could not be baptized ‘and have a soul in its body.’ In another, less convincing instance from the same region, the mother of a newborn who was not breathing prayed that he return to life ‘to receive baptism and have a Christian soul.’

When our notary wrote that Nicoulau Fabri wanted to align his child with the orthodox faith for the health and safety of its soul, we cannot know exactly what either man was thinking. Did the father hope to save his child from hell? From purgatory? Did he believe that the power of faith not only cleansed a soul but bestowed one? Did the father believe one thing, and the notary another? Would they even have discussed such esoteric matters? These questions linger, though one thing is certain: theological and popular distinctions affected the way medieval people constructed their cosmologies and altered the way they conceived of infants’ bodies.

Fabri’s motivation may also have been rooted in pre-Christian notions about ghosts, spirits, and revenants. The medieval Church had long resisted the concept of ghosts or of the undead. In the eleventh century, the prominent German bishop and penitential author Burchard of Worms recorded superstitious practices popular among his flock. Among other things, he noted a ritual to prevent unbaptized children’s corpses from returning to haunt the living. Some people, he wrote, buried fetuses with Eucharistic hosts and chalices in their tiny hands. The fetuses’ mothers, Burchard observes, fared far worse. Corpses of women dead in labour were sometimes buried,
like Hollywood vampires, with stakes driven through them. Written vestiges of late medieval ghost stories are full of cautionary notes involving angry children’s souls. In one, a tiny ghost haunts his living father with these words: “You were my father, and I your miscarried son buried without being baptized or named.” In another, the ghost of an unbaptized illegitimate child wailed incessantly at his father and his father’s wife. “The weeping of that troubled little voice was proof of the damnation of that misbegotten child. This, O Lord and Source of Abundant Goodness, was the punishment on the soul of a sinner.” Such stories show that medieval people feared not only their offspring’s eternal damnation but also the possibility of terrestrial torments for themselves. While the former was motivated by Catholic doctrine concerning baptism, original sin, and divine grace, the latter came from pervasive pre-Christian concepts of the supernatural. The two traditions were juxtaposed in medieval Europe, and both, no doubt, informed fathers who sought *sectiones in mortua*. While theological motivations were acceptable, of course, if Nicoulau Fabri had any fears of being haunted, he could not very well ask a Christian notary to write about them in his instrument.

Nicoulau Fabri was fortunate to have access to a barber, unlike many other parents who instead had to hope for miracles to alleviate their theological and supernatural worries. In the Middle Ages, saints hovered over women pregnant or in labour. Women in labour chanted constant prayers to ward off or ease difficult deliveries and to protect themselves and their unborn children. Medieval hagiographies are full of cases of saints who intervened in difficult pregnancies. These stories of holy protectors of mothers and infants were extremely popular. Saints in such tales were particularly well disposed towards mothers and children. Medieval saints were much

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46 For the descriptions of vampiric staking and Eucharistic burial, see Burchard of Worms’s *Corrector sive medicus*. For the Latin text, see PL 140:537-1057. The relevant passages are available in English in McNeill and Gamer, eds. & trans., *Medieval Handbooks of Penance*, 339-40.

47 “Tu enim eras pater meus et ego filius tuus abortiuus sine baptismo et absque nomine sepelitus”; Lett, “De l’errance au deuil,” 87. A Latin tale from about 1400 about a father who was visited by his miscarried son is available in James, “Twelve Medieval Ghost Stories,” 421. On ghosts, see also Joynes, ed., *Medieval Ghost Stories*, and Schmitt, *Les revenants*, which is also available in English translation as *Ghosts in the Middle Ages*.

48 For the English text, see Joynes, ed., *Medieval Ghost Stories*, 34. The complete original Latin source is edited as the *De Vita Sua Guiberti Abbatis Sanctae Mariae de Novigento*, in PL 156:876-79; the quoted passage is from col. 877D.

49 Elsakkers, “In Pain You Shall Bear Children (Gen 3:16).”

more likely to resurrect young children than adults.\textsuperscript{51} Medievalists, however, do not agree when, exactly, people began to turn to saints to perform neonatal resurrections for baptism. One hagiography scholar notes that while stories of saints bringing dead children back to life were popular in the eleventh and twelfth centuries, he could find no example of an alleged neonatal resurrection.\textsuperscript{52} Others see evidence of a long tradition, going back to the time of Augustine, of parents bringing dead neonates to the altar and begging a saint to resurrect the infant, at least for baptism.\textsuperscript{53} No matter how far back that tradition extends, there is no question that by the later Middle Ages it was prevalent across Europe. In the thirteenth and fourteenth centuries, churches acquired dedicated “respite shrines” where saints miraculously resurrected babies for baptism.\textsuperscript{54} Parents of dead neonates travelled to these shrines to have their little ones baptized, believing that they had been re-animated. Once baptized, the infants supposedly returned to the afterlife, but with the new promise of eternal salvation. This, medieval people believed, was the power of so-called sanctuaires à répit.\textsuperscript{55} So, even in the absence of Caesarean section, medieval society offered alternatives to ease parental apprehension about salvation.

Parents who did not have access to surgery, or for whom the operation failed to extract a living fetus, or who, for reasons of distance or expense, were unable to avail themselves of saintly intervention, could face a gruesome reality. Not only did they

\textsuperscript{51} Sigal notes that “L’enfant est un bénéficiaire particulier des miracles de résurrection.” Indeed, 61.6\% of his resurrection tales involve young children; Sigal, \textit{L’homme et le miracle}, 254. For more on miraculous resurrection of infants for baptism, see Finucane, \textit{The Rescue of the Innocents}, 43, \textit{inter alia}.

\textsuperscript{52} Sigal did not find any neonatal resurrection miracles dating from the eleventh or twelfth centuries. He believes this tradition began later: “Pourtant on ne trouve pas, à cette époque, des miracles de ‘répit’.” Sigal, \textit{L’homme et le miracle}, 254.

\textsuperscript{53} Finucane thus remarks, “it was not unusual for very ill, dying, or even dead neonates to be brought into a church and placed near or on the altar or upon the tomb of a purported saint, into whose care the fearful parents commended them. Christian parents had been doing this since at least the time of St. Augustine”; Finucane, \textit{The Rescue of the Innocents}, 44. His sources are Augustine’s sermons 323 and 324; PL 38:1445-47.

\textsuperscript{54} The tradition carried on long after the Middle Ages ended. For the early modern literature, see Gélis, \textit{Les enfants des limbes}, 26-87, and Laget, \textit{Naissances}, 289, 307-308.

\textsuperscript{55} French and German scholars have studied respite sanctuaries at length, even if the same is not true of their English-speaking counterparts. See Paravy, “Angoisse collective et miracles au seuil de la mort”; Gélis, “De la mort à la vie”; Saintyves, “Les résurrections d’enfants mort-nés”; and Pahud de Mortanges, “Der versperrte Himmel.” On the medieval origin, modern repression, and subsequent rehabilitation of respite sanctuaries, see Gélis, \textit{Les enfants des limbes}, 26-87.
have to cope with metaphysical anxieties, but they also had to dispose of the physical remains of their lost child. Since the unbaptized fetus was not a Christian, it could not be buried in consecrated ground and was, according to the medieval Church’s teachings, excluded from eventual resurrection at the Last Judgement. The body of the unbaptized infant, therefore, was of no value. In fact, some clerical lawmakers even saw it as a contagion that risked contaminating the sanctity of a Christian cemetery.

Kathryn Taglia, in her survey of northern French synodal legislation, remarked that some clerics feared that a mother’s intimate contact “with her dead unbaptized infant,” who had died during birth, might pollute her soul. Synodal legislators from Cambrai and Tournai responded to such concerns by mentioning that certain people “wanted to inter the mother outside the cemetery with her infant”; however, the legislators mercifully concluded that “We ought not to turn her pain into a fault.”

Even mothers of unwanted babies suffered anxiety over their offspring’s eternal fate. Katharine Park looked to French letters of remission for evidence of unwanted pregnancies. She comments that

Fearing shame and dishonor, some [mothers] killed their newborns, drowning them in town fountains or smashing them against walls and hiding the corpses under beds, benches, and dung heaps. One [. . .] young woman [. . .] [a]fter delivering a daughter [. . .] “went into the inn, where she took a basin and water . . ., and having done this she climbed up to the privies, and there she took the said child by one of its arms and threw the water on its head, saying, ‘My child, I baptize you in the name of the Father, the Son, and the Holy Spirit’ . . . and then threw her child in the privies of the inn.”

Privies and midden heaps were, sadly, the destination of many unfortunate infant bodies in the Middle Ages. Park’s 1457 French case of Denisette Bieart, who baptized an unwanted baby and then threw it in the waste to kill it, stresses the importance of baptism. It also hints at a mode of disposal for the unbaptized. If mothers dead in labour were allowed to be buried in cemeteries, their offspring, dead before baptism, were not. Such infantile corpses posed a practical problem for medieval society.

56 Gunnes addresses the rights to churchyard burial according to the Scandinavian Canones Nidrosienses; see Gunnes, “Uren og hedning.”
60 Taglia mentions a number of synods at Cambrai, Boeren, and Tournai that prohibited unbaptized corpses in Christian cemeteries; see Taglia, “Delivering a Christian Identity,” 81 and esp. n. 12.
They were sometimes disposed of with the trash or deposited on manure heaps in stables. Cases like Denisette’s aside, there was, therefore, yet another psychological motive for baptism: to allow the (legitimate) neonate to be buried with the Christian dead. “Surely baptism was sought, whenever possible and however performed, in order to avoid such brutal disposal as well as to save an infantile soul.”

As overwhelming as supernatural concerns surely were, and as gruesome as the prospects for an unbaptized corpse may have been, medieval people also linked infant birth and death to more mundane pressures of an economic kind. Certainly, Nicoulau Fabri was careful to include references to his own piety and grief in his notarized act. Recent research, however, reveals at least two instances of sectiones in mortua motivated by economics. By the late Middle Ages, Italian courts, like those of Provence, followed reconstituted Roman legal process. In this legal context, brides brought dowries into their marriages. These dowries, as has been shown elsewhere, were, in a sense, a form of feminine pre-mortem inheritance. Married girls received their share of the family property and, in theory, that money remained with them, usually under their husbands’ control, for life. Husbands, for their part, were required by law to preserve and enlarge dowered assets. After all, this money was not merely their wives’ safety net in life, but it was also destined for their common offspring. When a woman died, she transmitted her dowry to her children. Dowries of women dead without issue, however, reverted to their fathers or other male cognates.

There was definite financial incentive for husbands to prove that wives who died in childbirth had given birth to living heirs, even if these children succumbed immediately after birth. Widowers who could prove a live birth inherited their late wives’ assets. This nuance was not lost on jurists. In the fourteenth century, the Italian jurist Baldo degli Ubaldi wrote a learned consilium on the very question of how to resolve a legal dispute over whether a child was born alive or dead. In 1331, a husband

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62 For a full elaboration of this argument, see Park, “The Death of Isabella Della Volpe.” Green and Smail also recently reported on a 1331 inheritance case from Marseille that involved a woman dead in labour and a subsequent fetal extraction; see Green and Smail, “The Trial of Floreta d’Ays,” 189.
64 For a discussion of the steps some women took to regain control over their dowries, see Kirshner, “Wives’ Claims against Insolvent Husbands in Late Medieval Italy.”
65 Baldo’s consilium is taken up in Cavallar, “Septimo mense.”
claimed that he had travelled from Marseille to Avignon, at considerable expense, to consult lawyers and “many jurists” over whether he could inherit his wife’s estate if she died in labour. While our notarized act of 1473 concerning Catarino Fabri makes no mention of any inheritance, and indeed appears to be aimed at protecting the barber, this legal context matters. It suggests a tactic employed by some husbands to assume possession of their wives’ assets. A father who sought a *sectio in mortua* for financial reasons could not very well petition for it openly, however; he had at least to claim piety. The phrase purporting paternal sadness may be authentic, it may be a legal formula, or it may be deliberate obfuscation to mask financial motives. If obfuscation, it was surely *pro forma* since every husband whose wife died in labour without having produced living issue experienced the same financial pressure. Every such man, thus, must have contemplated a hasty incision to strengthen his financial claim. While it is impossible to know for certain whether this happened in the case of Catarino Fabri, it matters. Men had strong incentives to argue that fetuses extracted by postmortem incision had survived, if only for a moment. While it may not have been socially acceptable to open a woman’s body for profit, the ostensible wish for the infant’s baptism provided a convenient cover. There was, therefore, an indirect association between salvation, profit, and women’s bodies. Such links are difficult to reconstruct. Our document, at least, allows us a speculative glance in that direction.

Stating Nicoulau Fabri’s distress at his wife’s death, at the impending surgery, and at the possible loss of his child, the document is also an important, if not unproblematic, record of paternal affect during childbirth. It helps us to understand men’s emotional states during an important moment. Even if Fabri did not feel distraught, contrary to his claim in the notarized act, and even if he made his claim for other, strategic reasons, such as superstitious fear or greed, the claim was meaningless if it did not ring true to the bailiff. Far from rhetorical, then, his claim of a broken heart must be seen as a plausible reflection of a medieval man’s emotions in a trying situation.

The document’s reference to Nicoulau’s heartache supports emerging historical research concerning men’s emotions. Historians now accept that love was a real component of some, if not all, medieval marriages. Medievalists, moreover, refute

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66 Though this is not mentioned in the published account of “The Trial of Floreta d’Ays” cited above, Monica H. Green provided us with her transcript of the case and pointed out that the husband “per longum [sic] tempus litigavit et conduxit advocatos plures et habuit consiliun in Avignone a [sic] multis jurisprerritis.”

67 See Sheehan’s classic essay “*Maritalis affectio* Revisited.”
Philip Ariès’s assertion, which even Ariès himself subsequently withdrew, that parents related to their children as little adults.\textsuperscript{68} Several decades’ worth of research proves that parents, good ones at least, had great affection for their children and conceived of them \textit{qua} children. We likewise no longer think that parents were callous or indifferent towards infant mortality; instead, we “recognize that there is a distinction between medieval parents’ indifference to a child’s fate and resignation to that fate.”\textsuperscript{69} Despite all this, it remains extremely challenging for historians to reconstruct how men felt about their status as new fathers.\textsuperscript{70} Medievalists do not even agree on the extent to which fathers were involved with birth.\textsuperscript{71} Birth mattered to men — enormously — but the masculine emotions attached to birth are largely invisible, if only because men wrote very little about their experience of becoming fathers. This makes a masculinized history of childbirth difficult to ‘see’ and hinders our understanding of men’s emotional perspective on this important social and biological event.\textsuperscript{72} All the more reason to weigh Nicoulau’s heartsickness over Catarino’s death, the fate of their child, and the impending surgery. As the fifteenth century drew to a close, other men faced with identical scenarios echoed Fabri’s sentiment. In 1462, a Bolognese master mason wrote in his \textit{ricordanza} that he “lamented the death of his wife, Catalina,” dead in childbirth. “Since she couldn’t give birth, the doctor [. . .] extracted [the child] from her body; it was a boy, and it pleased God that it was fated that he die after a little more than an hour. I did this because it was

\textsuperscript{68} See Ariès, \textit{Centuries of Childhood}. In 1980, the author acknowledged his error in “L’enfant à travers les siècles,” 86. Good contemporary bibliographies on medieval childhood are available in Riché and Alexandre-Bidon, \textit{L’enfance au Moyen Age}, and in Orme, \textit{Medieval Children}.

\textsuperscript{69} Finucane, \textit{The Rescue of the Innocents}, xi. For more, see Platelle, “L’enfant et la vie familial,” 77.

\textsuperscript{70} For further discussion on what it meant to be a father in the late Middle Ages, see Bednarski, “The Quest for the Historical Father.” This essay summarizes historians’ lack of interest in, and the need for, a history of fathers.

\textsuperscript{71} Some “Evidence [. . .] confirms that husbands were not normally present in the birthing chamber.” But “men could be called into the birthing chamber to assist in extraordinary circumstances such as a difficult or a precipitous labor”; Lee, “A Company of Women \textit{and} Men,” 94. Other evidence, however, points to male involvement in or near the birthing room. For noble or important births, this was particularly likely. See, by way of example, the public record of the labour of Isabel de la Cavalleria. The translated English text is available online at <http://www.the-orb.net/birthrecord.html>. A print version is available in del Carmen García Herrero, ed., \textit{Las mujeres en Zaragoza en el siglo XV}, 2:293-95.

\textsuperscript{72} Lee, “A Company of Women \textit{and} Men,” 92.
impossible for me to save her, since I loved her enormously.” In 1477, Giovanni di Francesco Tornabuoni, a Medici banker, wrote to his patron that he was “so oppressed by grief and pain for the most bitter and unforeseen accident of my most sweet wife that I myself do not know where I am.” His wife, Francesca, had died in labour; a surgeon had cut her open to extract their dead fetus. Our notarized act from Volx, thus, adds to a small but telling corpus of first-hand evidence that some men were overcome with grief when their wives died in labour and they were confronted with the prospect of mutilating the corpse to try to save the baby.

In our case, the involvement of a male barber came only after the mother had died, and it was probably midwives and local wise women who attended Catarino in her final hours. Although midwives (baiulae, matrones, obstetrices) are conspicuously not named in the document, they do appear explicitly in other local records. In 1400, for example, when the criminal court investigated a suspected adulteress, her midwife, Bila Fossate, testified. Bila described in detail how she had delivered the adulteress’s child, held it up to the fire to warm it, and then confronted its father. The court bestowed on Bila the professional descriptor baiula publica, public midwife. In dealing with her, the court treated her as a quasi-municipal figure. It admonished her for not reporting the illegitimate birth. It said that she knew quite well the dangers to which unwanted children were exposed. Local scribes and notaries did, therefore, record the actions of midwives. Curiously, the notarized act of 1473 does not name a single midwife or wise woman, though we see their shadows in the twelve “other diverse people” (diversarum aliarum personarum) who attested to Catarino’s death. Since the bailiff was not a medical expert and since he was absent from the delivery room, he relied on these people to inform him.

73 “non posendo apartorire maestro zoane de navara medego lo chavò fuora del chorpo fo uno puto maschio fo in piassere dio che fose chosì fato quelo champò forse una hora e po’ mori yo lí fie’ quelo che meffò imposibole per champarla perché yo l’amava quanto fose imposibole”; Gaspare Nadi, Diario Bolognese, 52, translated in Park, Secrets of Women, 134-35, and in Park, “The Death of Isabella Della Volpe,” 173.
74 Cited in Musacchio, The Art and Ritual of Childbirth in Renaissance Italy, 29-31, at 29; for the Italian text, see 182 n. 64. Also cited in Park, Secrets of Women, 135-37.
75 For a full summary of the midwife’s involvement with the adulteress, see Bednarski, “Whence Springs the Lie,” 132.
76 For a survey of documented midwives in fourteenth- and early fifteenth-century Marseille, see Green and Smail, “The Trial of Floreta d’Ays,” 189-91.
77 “It was not uncommon for several midwives to attend what was feared might be a difficult or unusual birth. The iconography of medieval childbirth indicates that two, three, or even four
with the corpse. Their testimony, transmitted to the notary by the bailiff, ensured that the barber could not be shown to have caused Catarino’s death. Although this sectio in mortua was requested by a man, performed by a man, and licensed by a man, the legal validity of the act depended entirely on the words, expertise, and experiences of those who had handled the corpse. Since childbirth was so gendered, it is likely that some of those who had intimate knowledge of the dead woman’s body were women.

The purposeful reference to the twelve people present at Catarino’s death points to the legal substance of the document. The notary did not intend this act to serve as commemoration of an early sectio in mortua, nor did he write to commemorate late medieval attitudes towards salvation in the afterlife or to create an early record of masculine emotion. The document was a legal instrument designed to fulfill a practical juridical function: it protected the barber from unwanted legal prosecution. This raises interesting questions about the sorts of liability he feared. If, by the late fifteenth century, the Church encouraged sectiones in mortua, and if surgeons performed the operation with increasing regularity, why go to the trouble of redacting a notarized act for a routine operation?

It is possible that the barber, whose training was more mechanical than that of an erudite surgeon, was legally incompetent to perform the surgery, or least that the procedure left him feeling insecure. After all, at this time healthcare providers were distinguishing between different categories of practitioners. As Green has famously noted, the Middle Ages were “a battleground for all medical practitioners.” Different types of healthcare professionals, thus, vied for spheres of influence. She explains,

Although its timing and degree of effectiveness varied greatly, most of western Europe witnessed the implementation of medical licensing by secular and religious authorities between the twelfth and sixteenth centuries. Moreover, medical practitioners themselves often banded together

midwives and servants might gather at the birthplace at one time; in [one] case [ . . . ] as many as seven midwives were mentioned. The status of these women is not always ascertainable, since some ‘midwives’ were no doubt merely helpful neighbors [sometimes] denoted as ‘highly trustworthy matrons’”; Finucane, The Rescue of the Innocents, 30. For the German-speaking world, issues associated with midwives allegedly present at sectiones in mortua are raised in Feis, “Bericht aus dem Jahre 1411 über eine Hebamme.” Finally, for more on the problems of documenting midwives, see Green, “Documenting Medieval Women’s Medical Practice.” Green problematizes feminist historiographies on midwifery in “Gendering the History of Women’s Healthcare.”

78 Green, “Women’s Medical Practice,” 447.
to form guilds or protective societies that attempted to control who could practice and under what conditions they could do so. These developments resulted in fierce tensions between physicians trained in the universities, surgeons and apothecaries trained by apprenticeship, and empirics with no formal training at all.\footnote{Green, “Women’s Medical Practice,” 447.}

Our notary identified Giraud Villenove by the Latin professional designation \textit{barbitonsor}. Provençal notaries were always careful to distinguish between the various types of medical practitioners (as they were for other types of tradespeople and professionals). They made their distinctions based on an individual practitioner’s relative level of skill, on the calibre of his professional medical formation, or, possibly, on his reputation as a healer. A Provençal notary might, therefore, label a medical practitioner a barber (\textit{barberius, barbitonsor}), a physician (\textit{phisicus}), a surgeon (\textit{sirurgicus}), a “physician and surgeon” (\textit{medicus fizicus et sirgicus}), or a barber-surgeon (\textit{barberius et sirurgicus}).\footnote{ADDBDR 56 H 986 fols. 204-206v contains an interesting criminal inquest in which four medical experts appear, each with his own specific title. For other examples in the criminal series, see ADDBDR 56 H 986 fol. 73 from 1341, which mentions Crescan the Jew, a local physician; and ADDBDR 56 H 1001 fol. 51 from 1394, which mentions the Jewish “physician and surgeon” Vivas Josep.} Though the distinctions between these various combinations were no doubt meaningful to fourteenth-century notaries and the bearers of their titles, much of the nuance is today lost. As a general rule, a physician was a medical doctor with university training. Physicians were learned experts who advised patients on the symptoms and causes of illness and made prescriptions for remedies. They drew their knowledge from books, most of which derived from ancient Greek, Roman, or Arabic medical sources. Physicians typically appear in legal records as experts. They served as expert witnesses, for example, when inquisitorial judges needed to ascertain cause of death.\footnote{See Courtemanche, “The Judge, the Doctor, and the Poisoner.”} Barbers, surgeons, or barber-surgeons were mechanical practitioners who performed phlebotomies, set broken bones, and removed teeth; they learned their craft in an apprenticeship. In Provençal towns, it was not unusual to find physicians working alongside these less erudite but nonetheless vital healthcare providers. A quick anecdotal survey of their professional titles also suggests that some Provençal physicians performed manual surgeries themselves. Part of the overlap between the various types of healthcare workers is due to the fact that, in the fifteenth century, professional boundaries were still being negotiated. In Provence, however, the blurry boundaries were particularly symptomatic of the absence of strong professional
guilds. In this respect, Provence was different from the kingdom of France, where healthcare professionals organized themselves into professional bodies.\textsuperscript{82} In Paris, for example, fifteenth-century barbers were already heavily regulated.\textsuperscript{83} They received ordinances in 1365, and Charles V recognized their corporate status six years later when he gave them statutes; in the following year, the types of procedures they could perform were limited. By 1372, therefore, there was a clear delineation between Parisian barbers and surgeons. The former learned their trade in an apprenticeship, could not treat life-threatening injuries, and, in terms of surgical procedures, were limited to bloodletting. The latter, in contrast, read Latin, had access to learned book culture, and performed a much wider array of surgeries.\textsuperscript{84} Since there was no Provençal body to regulate his practice, we cannot know for certain the extent to which Provençal barbers were technically competent to perform \textit{sectiones in mortua}. The only point of comparison we have on this count seems to indicate that they were competent; the Marseillais inheritance case from 1331 has midwives summoning a barber to perform a postmortem dissection upon a woman dead in childbirth.\textsuperscript{85}

If there was no professional or regulatory reason to prevent Giraud Villenove from performing the operation, then the act may have been redacted out of a sense of personal insecurity. First, Giraud was young and at an early stage in his career. At the time of Catarino Fabri’s death, he was only twenty-three years old. It may well be that he had not had a great deal of experience in performing \textit{sectiones in mortua}. Second, Giraud was an outsider, a visitor to Volx. It may be that he feared the reaction of the locals should the infant be dead upon extraction, or should his scalpel slip and cause undue injury or mutilation to the mother’s corpse or to the fetus.

Whatever the reasons for drawing up the act, to call on Giraud seems to have been the best option available to Catarino’s husband. Giraud was experienced with rudimentary anatomy, had likely stitched battlefield and farm injuries, and knew about

\textsuperscript{82} On northern French guilds, see Geremek, \textit{Le salariat dans l’artisanat parisien}.

\textsuperscript{83} Dumas’s French phrase is “fortement réglementé.” On Parisian barbers’ guilds, see Dumas, “Les femmes et les pratiques de santé,” 9-12.

\textsuperscript{84} Dumas, “Les femmes et les pratiques de santé,” 9-12.

\textsuperscript{85} Green and Smail, “The Trial of Floreta d’Ays,” 189. The original trial transcript reads, “matrone seu obstetricis que errant ibi tunc ad vivandum dictum paratum volentes facere incidi ventrem dicte Bonete iam mortue inerunt petere magistrum Guilelmmum barbitonsorem expertum in hoc ut in cideret dictam ventrem dicte Bonete et vivum extraheret ipsum infantem qui erat vivus ut supra dictum est.” The transcript is preserved in ADDDBDR 3B 27, fols. 37r-90v; the quotation is taken from fols. 41v-42r.
razors and blood. In a pinch, his was the steadiest and most skilled hand available to perform the operation. When Catarino died in labour, Giraud was probably the closest to an experienced surgeon on hand in the tiny hamlet of Volx. The nearest town with actual surgeons was fifteen kilometres away. Nicoulau Fabri, thus, turned to Giraud Villenove out of desperation. Villenove, for his part, probably requested a legal instrument to protect himself from accusations of malpractice.

Regardless of the impetus for drawing up the act, other serious questions about timing remain. Legal acts are inherently treacherous documents, and the internal evidence in ours possibly misrepresents or distorts the sequence of events it records. If we take the document at face value, Catarino died, Fabri approached Villenove for the emergency sectio in mortua, Villenove insisted on legal protection, the men located the bailiff, the bailiff interrogated twelve eye witnesses, they then found a notary, the notary sat at his kitchen table and drew up an act, and then the procedure may (or may not) have happened. If the document tells the truth, the interval between Catarino’s death and the operation was substantial. There was absolutely no real chance of fetal survival. True, medieval medicine held that fetuses could outlive their mothers, provided air continued to reach them through the maternal orifices. But, more practically, no one experienced in actual obstetrics, delivery, midwifery, or surgery could have expected a baby to live that long. So perhaps the document lies. It is possible that the act was drawn up post factum. In that scenario, Catarino died, Fabri or the midwives found Villenove, and Villenove performed the surgery with a promise that he would receive a written document absolving him of any wrongdoing. In that case, the twelve witnesses could have spoken to the bailiff afterwards, and the bailiff and bereaved husband could have then approached the notary to make everything official. The document prevents us from knowing which chronology is correct.

Conclusion

The notarized act of 1473 entitled “For master Giraud Villenove, barber of Manosque, concerning making an incision in a certain part of a woman” is an important historical record of an early surgery. While the document shows the limits of fifteenth-century surgery, and places the sectio in mortua at the beginning of what would become successful Caesarean sections performed upon living women, its ultimate utility for social history extends beyond strictly clinical history. Its references to
baptism substantiate that ordinary fifteenth-century people conceived of infant bodies in intensely theological terms. Their flesh housed souls, which, from birth, were in jeopardy. The increase in surgeries to extract fetuses was not propelled primarily by scientific curiosity or by the desire for improved maternal or neonatal healthcare. It was, rather, moved forward principally by the religious belief that children who died without baptism were in peril. Although the late medieval Church made moves to soften this concept by inventing a children’s limbo, this alternative proved culturally dissatisfying.\textsuperscript{86} Theological confusion over the fate of unbaptized babies, moreover, collided with older European superstitions. All of this meant that fifteenth-century parents, not unlike modern Bolivian peasants, experienced tremendous anxiety over labour and birth. This anxiety led bereaved fathers, with the full support of the Church, to hire surgeons to open their deceased wives’ bodies. Though they did this with the best of intentions, there must surely have been a psychological price to pay. This may explain why our notary ascribed to Nicoulau Fabri a “bitter heart.” He was under extreme pressure. This pressure may have taken one or more forms: psychological, spiritual, emotional, even economic. The \textit{sectio in mortua} he ordered that day was, therefore, a compromise between the various social forces that informed his psyche. The fact that the local bailiff, a trained jurist, and a barber responded to his request indicates that both medicine and the law were capable of improvisation: these institutions acknowledged, responded to, and accommodated cultural anxieties over infant death.

\textit{St. Jerome's University in the University of Waterloo} and \textit{Université Laval}

\textsuperscript{86} In “Der versperrte Himmel,” Pahud de Mortanges concludes that the European obsession with respite sanctuaries was a direct result of the failure of thirteenth-century theological notions. On pp. 34-38, she argues that the \textit{limbus puerorum} was inherently unpopular with parents since heaven would remain closed to children there.
Figure 1. Archives départementales des Alpes-de-Haute-Provence, Series 2E, Register 2920, fols. 60v-61. The authors are grateful for access to the document.
Appendix A

Documentary evidence of actual sectiones in mortua from the Middle Ages is scarce. It seems useful, therefore, to present a photograph of the original together with a transcription and translation of our document.

Notarized Act redacted for Master Giraud Villenove, Barber of Manosque\(^\text{87}\)

Pro magistro Giraudo Villenove bar-bitosone de Manuasca de incissura
facienda ad certum partis mulieris
In dei nomine amen. Anno domini incarnationis
M\(^\circ\) III\(^\circ\) LXXIII\(^\circ\) die vero sabbatica intitulata?
XIII mensis augusti. Noverint universi et
singuli presentes pariter et futuri ad quorum
conspectum presens pervenerit instrumentum. Quod
apud Volcium videlicet infra domum providi
viri Nicolay Fabri eiusdem castri et
coram provido viro Guillelmo Robaudi
baiulo dicti castri videlicet brevis et juridictionis
Sacri Hospitalis Sancti Johannis Jerosalami existens
et personaliter constitutus \(^\text{88}\) prenominatus Nicolaus
Fabri dicens et dolenter cum cordis
amaritudine et exponens quod Catherina
eiusdem exponentis uxor sicut altissime
placuit presencialiter viam universe
carnis clausit ex partu quem conceperat
et de quo pregnans existebat et
cum pium et necessarium sit celeriter partui
predicto succurere ut inde lavacrum
regenerationis eidem ^domino concedente^ prestari et pariter impendum\(^\text{89}\)
possit prout fidelibus orthodoxis est fieri
solitum et divinitus institutum ad salutem
et pro salute anime partus predicti et

\(^\text{87}\) Archives départementales des Alpes-de-Haute-Provence, 2E 2920 fols. 60v-61.
\(^\text{88}\) Crossed out: d
\(^\text{89}\) Possibly for compendium?
cum in premissis sit celeriter et sine mora
providendum per incisuram propterea\textsuperscript{90} eidem
defuncte occasionem et ad effectum premissorum
ut in talibus est fieri usitatum\textsuperscript{91}
fiendam petit propterea et instanter
ac instantissime requisivit eundem dominum
baiulum quatinus intuitu caritatis ^et justicie^ dignetur
licencia impartiri magistro Giraudo Villenove
barbitonsori de Manuasca nunc in dicto loco
de Volcio moram trahenti ibidem presenti
audienti et intelligenti ^tanquam in talibus experte^ 
faciendi huiusmodi incissuram secundum artem
sirurgie et prout in similibus est fieri solitum
officium? dicti domini baiuli in premissis quatinus
opus est humiliter implorendo. Et dictus
dominus baiulus audita expositionem supra facta per
dictum Nicolaum Fabri et requisitione submonita
quare justa petentibus non est denegandus assensus
considerata causa de et pro qua agitur que pia est
et caritative tractanda quare eidem domino baiulo
constat legitime de morte dicte Catherine
\textsuperscript{92} tam per relationem dicti Nicolay Fabri
olim mariti dicte Catherine quam diversarum
aliarum personarum numero duodecim ibidem
existentium dictam Catherinam fore
mortuam asserter et testificantium licenciam
\textsuperscript{impertitu} factam\textsuperscript{93} dicto magistro Giraudo presenti et ita similiter
fieri depositionem faciendi insissuram supra
fieri requisitam in personam dicte deffuncte
ad fines et effectus supra declaratos
secundum artem sirurgie decenter ut convenit

\textsuperscript{90} Crossed out: propter
\textsuperscript{91} Crossed out: propterea
\textsuperscript{92} Crossed out: que
\textsuperscript{93} Two corrections in new ink. The uncorrected text in the original ink appears to have read \textit{impartiri dicto magistro}. 
et actus huiusmodi requirit sic et taliter quod de
diligencia et peritia eiusmod apud Deum et
mundum⁹⁴ merito valeat commendari. De
quibus omnibus dictus magister Giraudus Villenove
barbitonsor prefactus⁹⁵ ad sui futuram carthullariam⁹⁵ petii sibi fieri publicum
mandamentum seu instrumentum per me notarium publicum subscriptum.

Actum Volcii ubi supra videlicet infra domum
dicti Nicolay Fabri et fratrum suorum videlicet in
focanea domus prefacte. Presentibus ibidem
venerabilibus et discretis viris domino Colino Mongi-
neti cappellano curato dicti loci et Hugone
Scofferii hospite dicti loci et diversi aliis
personis dicti castri testibus ad premissa
vocatis et requisitis et assumptis

Et me Ludovico Fabri notario publico, etc.

**Translation**

For master Giraud Villenove, barber of Manosque, concerning making an incision in a certain part of a woman.

In the name of God, amen. In the year of the incarnation of our Lord 1473, on the 13th day of the month of August, indeed, the one called the Sabbath. Let every single person, in the present and future, to whose sight this present instrument will come, know that in Volx, specifically, within the home of the honourable man Nicoulau Fabri, of the same village, and before the honourable man Guilhem Robaudi, bailiff of the said village, more precisely, within the jurisdiction of the Sacred Hospital of Saint John of Jerusalem, the aforesnamed Nicoulau Fabri was personally resident. Saying and sadly explaining with a bitter heart that Catarino, his wife, just as she brought him the greatest pleasure, presently closed the way of all flesh to the fetus which she had conceived and with which she was pregnant, and since it is pious and necessary to save the aforementioned fetus swiftly, in order that, with the Lord’s

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⁹⁴*Mundum* ‘moral cleanliness.’

⁹⁵ For *cartularia* ‘cartulary,’ ‘bound register,’ or ‘record book.’
consent, the font of regeneration, and, simultaneously, salvation, be made available to that same fetus, just as is customary to be done for the orthodox faithful and has been divinely established for the health and safety of the soul of the aforementioned fetus, and since in the aforementioned circumstances help must be provided quickly and without delay, through an incision in the dead woman, he therefore asked that an opportunity be created to the effect of what has already been stated, as is normal to be done in such situations, and he insistent and most urgently requested of the same lord bailiff, since it is worthy in regard to charity and justice, that permission be granted to master Giraud Villenove, barber of Manosque (now in the aforementioned place of Volx, staying there, present, hearing and understanding) to expertly make an incision of this sort following the art of surgery in such situations, and as in similar situations it is customary to be the responsibility of the aforementioned lord bailiff, it is necessary to implore him humbly. After the said lord bailiff heard the explanation made above by the said Nicoulau Fabri and the humble claim why assent must not be denied to those seeking what is just, and after considering the cause, because of and for the sake of which this is being done (which is pious and must be treated charitably), it is rightly known to the same lord bailiff, concerning the death of the said Catarino, as much through the report of the said Nicoulau Fabri, formerly the husband of the said Catarino, as through the report of different people, twelve in number, who were there testifying with certainty that Catarino had died, that permission be granted for the present said master Giraud and so similarly that a deposition be made for making an incision, requested above, upon the person of the said deceased woman for the ends and results stated above, appropriately following the art of surgery, as it is fitting and as an act of this kind requires and in such a manner that by his diligence and expertise the child may be justly commended to God and purity. Concerning all these things, the said master Giraud Villenove, the aforementioned barber, sought that a public mandate or document be made for him, by me, the public notary named below for his future cartulary.

This Act made in Volx, mentioned above, specifically in the house of the said Nicoulau Fabri and his brothers, specifically in the kitchen of the said house, there present the venerable and distinguished men lord Colino Mongineti, chaplain of the said place, and Hugo Scofferii, a guest of the said place, and many other people of the said village, called and requested and selected as witnesses to the aforementioned. And me, Louis Fabri, notary public, etc.
Appendix B

Modern Scholarly References to *Sectiones in mortua* Performed before 1550

Since there are at present a mere twelve other known instances of *sectiones in mortua* performed before 1550, we present below a comprehensive list of the related documents.96

<table>
<thead>
<tr>
<th>Date &amp; Place</th>
<th>Cited in . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>1459</td>
<td>Cavallar, “Septimo mense,” 414, 416, and n. 166.</td>
</tr>
<tr>
<td>16th century, Bologna</td>
<td><em>Carpi commentaria cum amplissimis additionibus super anatomia Mundini</em> (Bologna, 1521), fols. 211v-212r. See also Park, “The Death of Isabella Della Volpe,” 174.</td>
</tr>
</tbody>
</table>

96 Monica H. Green compiled this list and has generously allowed us to publish it here.
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