

The discussion surrounding pregnancy and childbirth in the Roman Empire often tends to focus on questions of contraception, abortion, and exposure due to larger historical questions. The context surrounding the waning birthrates besetting the elite families of Imperial Rome and the *Lex papia poppaea's* encouragement of large families among Roman citizens generates understandable interest in how and why such families would choose to limit births, and how much of the situation was driven by intention rather than environmental or genetic factors. However, such a focus tends to leave behind the experience of women who, for a variety of reasons, wished to conceive and bear healthy children to term. Fortunately, the *Gynecology* of Soranus provides a detailed description of the sort of pregnancy likely to be experienced by the wealthy Roman women who were under great pressure to produce heirs for the ruling class, and also gives tantalizing glimpses at alternate methods employed by Soranus' competitors in that arena.

This paper will explore various beliefs and practices surrounding the care of a pregnant woman and her unborn child, focusing on Soranus' method and the traditions that informed his philosophy of prenatal care. It will argue that the many facets of therapy for the pregnant woman that seem restrictive, irrelevant, over-cautious, and even harmful to a modern reader were the result of cultural attitudes and medical theories which had in mind the best interests of both the mother and her child.

During the Imperial period the idea that fetal life was extremely fragile seems to have been widespread. Pliny the Elder, for instance, claims that women have miscarried at the smell of a lamp being snuffed (7.5), or from physical contact or proximity to plants (25.67, 27.86) and animals (30.43, 30.44, 32.46). The threat was not only physical; Soranus claims that a pregnant woman's emotional disturbance could mark the child, or even cause miscarriage (1.39, 1.46), something also reported by Pliny. Also, a first-time mother would in all likelihood be quite young, and so involved in a pregnancy high-risk by modern standards as well. Soranus sets the ideal age for first intercourse at menarche (1.33), and his argument is weighted more strongly against those who would set the age earlier than later, which implies that it was not uncommon for women to bear children in early puberty. Such mothers would be inexperienced, physically immature, and would need the sort of strict supervision set out in the *Gynecology*.

Even so, many aspects of the regimen advocated by Soranus are counterproductive, for it advocated restrictive caloric intake, thwarted cravings - even for safe foods, and even periods of fasting to settle morning sickness (1.49- 53). Such a course of treatment cannot have been pleasant for the mother, and could very well weaken her for childbirth and retard the child's development. Soranus' motivations, though, were clearly rooted in his sect's philosophy that the human digestive system could only process a fixed amount of food, and that any surplus "decomposed" food would prove toxic to the mother and her child. Under this model of digestion, "Eating for two" would be disastrous for his patients, and so he advocates thwarting the woman's cravings out of professional responsibility, and not solely a desire to control. Soranus' method (and Methodism) represented the best reasoned care that his sect could offer, and provides a glimpse of Methodist theory in action.