

Contraception: a light-hearted history

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Whispered between sobs and a heaving of shoulders, the words ‘I thought you’d be pleased’ have now been uttered so often and by so many that they stand as a mighty monument to the fertility of humankind.

Babies are great. Or they grate. It all depends on who is to give birth and who the father is. Not surprisingly, both men and women from the dawning of time have explored ways to enjoy the budding and blooming of love and sex without going in for the fruit of it all.

Ancient first thoughts

The ancient Greeks spent a great deal of time trying to unravel the mysteries of conception. Rightly, they determined that female anatomy was the crucial factor, but what they found elusive was the uterus, or womb, itself. According to the Greeks, it had a nasty habit of moving around the body in a fit of pique when displeased; some even thought the womb was a separate animal.

Plato wrote that that part of a woman which is called the womb, being an animal desirous of generation, becomes indignant if left unfruitful for too long. In frustration, he added, it wanders all over the body, causing anxiety and all manner of disease. One common problem occurred when it lodged near the liver, provoking hysteria. To get the womb to shift, what was needed was to give the poor woman vile substances to sniff while fumigating her nether region with sweet odours.

So much for Plato, though other famous names did little better. Hippocrates reckoned the womb had two chambers, one for generating boys, the other for girls, while the Roman anatomist Galen declared that the womb had seven chambers.

It is said that Hippocrates had an early theory about contraception. In his ‘Diseases of Women’ he mentions a lead tube filled with mutton fat and inserted into the uterus. Another early contraceptive recipe comes to us from Egypt. In the reign of Amenhat III, around 1850 BC, the dung of Nile crocodiles was mixed into a paste and rolled into pessaries. An ancient medical text describing all this was discovered in Egypt in 1899.

Two millennia later, around AD 920, doctors were still messing around with dung – this time elephant dung, Rhazes, a Persian physician made his pessaries from elephant dung, cabbage, pitch, ox gall, the inner skin of a pomegranate, animals’ ear wax and whitewash in varying combinations. Rhazes was clearly playing the field, hoping that the law of averages would make him right, at least occasionally. But he had one other suggestion: unknowingly, he was right to suggest that sugar can act to suppress male fertility.

Back to Egypt in the 1550s BC... Trying to find something more congenial than crocodile dung, the Egyptians came up with the idea of a strategically placed wedge of cotton lint, soaked in honey. At least that was harmless, though not as safe as another local notion – that of painting date stones and planting them in your garden.

Casanova and other cads and bounders

Turning to relatively modern times, our very own Chaucer had took the moral high ground about contraception in whatever form. In the *Canterbury Tales* he declared:

‘Eek when man destourbeth concepcioun of a child, and maketh a woman outhere bareyne by drynkyge venenouse herbes thurgh which she may nat conceive, or sleeth a child by drynkes wilfully, or elles putteth certeine material thynges in hire secree places to slee the child, or elles dooth unkyndely synne, by which man or woman shedeth hire nature in maners or in place ther as a child may nat be conceyved, or elles if a woman have conceyved, and hurt hirself and sleeth the child, it is still homicide.’

An ingenious if useless contribution to the debate was made by a Spanish doctor, Arnold of Villanova (1238-1311). His methodology was madness itself. Smoke from burning prunes had to curl about the hoof of a mule before wafting into the girl’s underparts. The really interesting thing is that he was medical adviser to two Popes.

Europe was an unhealthy place to be throughout the Middle Ages. As well as leprosy and the plague, syphilis was rife. An Italian doctor called Gabrielle Fallopius, whose name appears elsewhere in this article, suggested a linen sheath as a guard against infection. Although he claimed its invention, the condom is the sort of device that could have been invented many times over. Ancient Egyptians wore condoms and penis sheaths are worn by surviving traditional tribes in Latin America, Africa and New Guinea.

Another condom story is that it was named after a man of that name who was at the court of Charles II. The king, having fathered numerous illegitimate children, is said to have knighted Mr Condom for his contribution. What is more certain is that by the 18th century, a Mrs Phillips had opened a shop in London selling them. She made hers from dried sheep’s gut, bound with a scarlet ribbon. This made have been the origin of what the French call ‘la Capote Anglaise’ or, as we prefer to put it, the ‘French Letter’... which brings us to Casanova.

Casanova lived and loved from 1725 to 1798. Even he called the sheath the ‘Redingote Anglaise’, the English riding coat, saying ‘I do not care to shut myself up in a piece of dead skin to prove that I am perfectly alive’. Indeed, so alive was Casanova that, caught short without a packet in his pocket and a desperate urge to merge, he proved a truly resourceful lover. Taking a lemon, he halved it, squeezed out the juice and invented the world’s first cervical cap.

Contraception in our time

The trouble with ‘taking precautions’ has always been that it smacks a bit too much of pre-meditation; of conniving and scheming one’s way to bed. For many, the most magical moments are always the spontaneous kind – the dangerous kind in fact.

Some women may agree that playing fertility roulette does add zest to love-making, but most are firmly of the opposite opinion. For them and their partners there’s a wide range of contraceptive methods on offer. The contraceptive pill for women is the one we know all about. It works by altering the neuro-endocrinal feedback system controlling hypothalamic-pituitary-ovarian relationships. But then you already knew that, didn’t you?

As well as the pill, there are barrier methods including the condom, intra-uterine device (or IUD) which is said to work by preventing the implantation of a fertilised egg, and sterilisation, vasectomy in the case of men. Other methods, such as an implant variation of the pill, the

infamous 'dutch cap' which cordons off the cervix and various spermicidal preparations are seldom used when compared to the pill and condom.

The post-coital pill (or PCP) is favoured by some women who have unprotected sex and then in the cold light of morning consider the potential consequences more carefully. Also called the 'morning-after pill', the PCP works for up to three days, though it is best taken within 12 hours. The female hormone in the PCP is levonorgestrel, which brings about a very early stage abortion. The failure rate is around 10 per cent.

The hit-and-miss category of contraception includes the rhythm method, when intercourse is avoided in the most fertile period of a woman's cycle, and good old male withdrawal, still the most widely used form of contraception throughout the world. Four thousand years ago a Jewish writer called it 'threshing inside and winnowing outside'. Today it's called 'being careful'. The method is said to have psychological effects but there's no evidence of this. What is obvious is that it is simple, without cost, often effective, widely accepted and can be used without supervision. It cannot be lost, taxed or eaten by children. And in contrast to most other methods, the burden of responsibility rests with the man.

The research goes on, particularly for an effective male pill. To an extent, every method of contraception has its drawbacks and failings. When you appreciate this reality and consider the need to match the demands of the global population with the earth's limited resources, it's clear that this subject has a very portentous side to it. During my lifetime, the planet's population has almost trebled.

But while doctors and micro-biologists are doing all they can to refine the serious science of contraception, there have been some humorous contributions along the way. One was a plan to gum up women's works by sealing the Fallopian tubes with super-glue in order to prevent the passage of eggs. Another idea involved a contraceptive bracelet which was worn at night and delivered skin-permeable steroids. And yet another notion came from a Glasgow doctor. Based on the fact that a woman's body goes up by a degree Fahrenheit at the time of ovulation, the plan was to monitor this temperature change using a bra capable of changing colour. Dubbed 'the loving cup', the bra would stay green for 'why not?' and turn red for 'better not'.

The bra didn't catch on. Nor have hundreds of other inventive ideas. They've all foundered on the same rock: what looks fine in a controlled laboratory setting just doesn't hack it in the real world.

One thing's for sure. I'm sure men and women have had the most wonderful time trying out all these crazy methods. That's what really counts. And, who knows, love may also have come into it from time to time: here's hoping.

Finally, if you or your partner happens to be pregnant, please accept our genuine congratulations. And if neither of you is great with child the same observations apply.