Wet Nurses in Spanish Monarchy

Subjects: Obstetrics & Gynaecology
Contributor: Sagrario Gomez-Cantarino

In Spain, the wet nurse had a prominent place in the Court of Philip II (1540–1580), suckling princes. These wet nurses were treated as ladies, as they came from wealthy families related to royalty. The services of wet nurses from neighbouring localities to the court were used. They had to be of good appearance and in excellent health. They were hired because of the need for survival of the infants, children of Philip II. The functions of the four wives of Philip II were relegated to reproduction, childcare, family and monarchical duties. They used empirical medicine in the form of prescriptions for beauty, hygiene and feminine care. The wet nurses were the driving force that promoted the health of babies through breastfeeding.

woman

mother

health promotion

breastfeeding

1. Woman and Queen: The Importance of Her Offspring

Researchers attempts to make visible and identify the figure of the queen as a woman and mother. Thus, it is important to deals with the wives of the monarch Philip II (1540–1580), with whom they had offspring in order to ensure a male heir to the throne to continue the dynasty. Philip II married for the first time to Maria Manuela of Portugal, both at the age of sixteen. After the first year of marriage without offspring, the court physicians used some curative methods, such as applying bloodletting to the legs, in order to improve the queen's fertility, a situation that weakened her health. Finally, Maria Manuela of Portugal had her first pregnancy in September 1544 and her first delivery on 8 July 1545 (the birth was long and difficult due to an anomalous presentation). The birth was attended by the family doctor, Luso (known to be a dwarf with a very large head), and Villalobos, the royal family doctor, as well as two midwives. As a result of the great obstetric manipulation, she died of a puerperal infection on 12 July 1545, after twenty months of marriage and at the age of eighteen [1][2].

The monarch, now twenty-six years old, remarried Mary Tudor, Queen of England, aged thirty-eight. The marriage was arranged by Charles I, Philip II's father, making it a marriage of convenience. The age and geographical distance between the two did not encourage offspring. In 1555, the queen had a fictitious pregnancy and childbirth, which caused Philip II to accompany the queen during most of her pregnancy and the beginning of the birth. Two years later (1557), this queen had her second fictitious pregnancy, but on this occasion she faced the situation without her husband's company, due to the embarrassment it meant for the monarch. Finally, Mary of Tudor died a year later due to a flu epidemic [3][4].

Philip II's third marriage took place when he was thirty-three years old and his new wife, Isabella of Valois, was fourteen. She was known as "Isabella of Peace", for with her came harmony between Spain and France through

the Treaty of Cateau Cambresis (1559). The marriage was celebrated without the queen's menarche, a situation that prompted her mother (Catherine de Medici) to send remedies from France to cause the arrival of her first menstruation [5]. The latter also arranged for doctors and even an apothecary to accompany her to Spain in anticipation of her pregnancies [6]. In fact, mother and daughter maintained a fluid communication by means of letters, where they discussed issues related to sexuality and natural remedies to favour offspring, among others. Finally, her first menarche appeared in 1560, at the age of fifteen [7].

Her first pregnancy, four years later, ended in miscarriage. It can be said that her health was preserved by different socio-health institutions. Her sexual and reproductive problems were treated by the doctors Montguyon and Burguensis, sent by her mother from France. She was also treated by the doctors of the royal family, Juan de Santiago and Antonio de Paz y de la Vega, and by the surgeon Juan Fragoso [5]. She even received spiritual help from the Spanish subjects through prayers, fasting, processions and the transfer of the image of The Lady of Atocha to the Alcázar, as well as the administration of the Holy Unction.

From the second pregnancy of this queen, the infant Isabel Clara Eugenia was born in 1565. Before the birth, she made a will in which it was written that she would give Juan de Santiago and Antonio de Paz 500 ducats, and the doctor de la Vega 300 ducats. Montguyon, her personal physician, was to receive 1000 ducats. Finally, six years after her first period (12 August 1566) Isabel Clara Eugenia was born with the participation of the doctors Vega y Olivares, Andrés Vesalio, Chacón and Mena. A year later, she had her third pregnancy, from which Catalina Micaela was born (1567), being cared for by the comadre Ma Álvarez de Porras, to whom 2200 reales were given. Her fourth and last pregnancy was in 1568, and she suffered a miscarriage at five months. Isabella of Valois died on 3 October 1568, three months after the infant Charles [8][7].

Finally, Philip II, now aged forty-two, married his niece Anne of Austria, who was twenty-one years old. This marriage, which took place in 1570, produced four sons and a daughter. The first was Prince Ferdinand, who died at the age of seven. The second son, Carlos Lorenzo, was born on 12 August 1573 and died at the age of two. His third son, Don Diego Felix, was born on 12 July 1575 but died of smallpox on 21 November 1582. Finally, her fourth son was born in 1578, Philip III, who eventually became King of Spain. Anne of Austria's fifth child was born on 14 February 1580, named Maria, and died on 14 August 1583. Finally, Anne of Austria died on 26 October 1580, while pregnant with her sixth child. This situation again indicates the primary function of these women and queens within the court: the perpetuation of the dynasty through reproduction [9].

2. Wet Nurses and Babies and Bonding through Milk: The Value of Work

Researchers section describes and emphasises the figure of the wet nurse, specifically in the Spanish royalty, and her relationship with the infants, highlighting both the benefits and the retribution they acquired for their work. It is worth noting that at this time the wet nurses of the royal court generally received the distinction of "Doña", acquiring payment in cash and household goods for their work. This was in addition to some benefits, such as jobs for their husbands, sons or relatives in subordinate occupations in the royal household. The first wet nurse to appear in the

palace is related to the birth of the first child of King Philip II and Maria Manuela of Portugal, who was born with signs of abnormality. This queen died of a puerperal infection four days after giving birth (12 July 1545) [10][11].

The newborn, Charles II, was breastfed for 15 months by a wet nurse. His only known wet nurse was D^a Ana de Luzón, wife of D. Gaspar de Osorno, noble descendants of Tudela. This wet nurse was dismissed due to lactation problems. Nevertheless, Philip II ordered his father Charles I to offer this family a good dowry in order to provide this wet nurse with a more comfortable life [10].

To breastfeed Isabella Clara Eugenia (1565), the first child of his third marriage, the royal family physicians sought fifty wet nurses from noble families, who had to be free of all Moorish or Jewish blood. The doctors of the Chamber chose only three wet nurses, dismissing the rest. In fact, Isabella Clara Eugenia suckled from four wet nurses. The origin of only the first is known: Ana López, a resident of Ávila, from a village near Balsaín, who was soon dismissed. She breastfed the Infanta Isabel on the day she was born and two days later, for which this woman was given two hundred ducats of aid [10][12].

This first wet nurse was replaced by Doña Beatriz de Mendoza, who nursed Isabel Clara for four months. However, this infant was on the point of starving to death, probably due to the shortage of milk from her first wet nurse (D^a Ana López). The payment that Doña Beatriz received amounted to two hundred ducats and thirty thousand maravedís (mrs) as an annual pension, in addition to an office for her husband [13].

The third wet nurse, Doña María de Oviedo, nursed the infant for almost twelve months and was considered to be the best wet nurse. For this reason, she performed the functions of a wet nurse and was granted sixty thousand maravedís for life, issued in the tercias of Ciudad Rodrigo (Salamanca), which is why it is suspected that this was the place of her birth and may even have been her place of retirement. Finally, for five months Doña María de Rivas nursed the infant, who began her office after Corpus Christi. She was paid two hundred ducats and was also allotted thirty thousand maravedís as a lifetime salary [10][14].

It was rare for a single wet nurse to continue the entire upbringing until the infants were weaned; this only happened with the Infanta Catherine Micaela, second daughter of Philip II and Isabella of Valois. She was nursed for twenty-two months by Doña María de Messa, who received one hundred thousand maravedís for life, as well as the bed she used and the cradle for the infant. She also secured her daughter a job as a valet [2][11].

From the fourth marriage of Philip II and Anne of Austria was born Prince Ferdinand, who was suckled by eight wet nurses. The first of these was Doña María de Terán, who breastfed him for twenty-four days, from the day he was born (4 December 1571) until the night of Saint John the Evangelist. Ferdinand had two of the aforementioned wet nurses, Doña María de Mesa, who breastfed him for eight months, and Doña María de Rivas, who returned to the Palace to nurse the prince for a month. The prince was breastfed for almost three years by five other wet nurses, who were named Doña Luisa Fernández and Isabel Grado Mayor, the latter of whom served twice in the Palace and was a resident of Casarrubios (a village in the province of Toledo). At first, she nursed for more than nine months, and then, when "The Relative of Accountant Santa Cruz, who came from Toledo" was only able to feed the

Prince for four days, she returned for another twenty-one days. She was succeeded by the wet nurse Juana Bautistina, who lived in Madrid. Leonor de Garay also breastfed until Prince Ferdinand was weaned [10][2][11].

In addition, there were many women brought in for selection, but they were rejected by the doctors of the Chamber. In total there were eleven, of whom the provenance of almost all are known. Despite not having performed the function of wet nurses, these women were given an amount ranging from three hundred ducats for the most favoured to fifty for the least rewarded [10].

On 12 August 1573, the feast of Saint Clare, Carlos Lorenzo was born and was subsequently raised by two wet nurses. Doña María de Neira, wife of Juan García, a neighbour of Segovia, nursed the infant for two months [15]. Then, Doña Isabel Galindo, wife of Francisco de Salablanca, was wet nurse for a year and a half, until 11 April 1575; she received eighty thousand maravedís plus the bed of damask and blue velvet in which she slept and the infant's bed, for having weaned him. Carlos Lorenzo died on 9 September 1575 [16].

On 12 July 1575, Don Diego Félix was born, and he suckled from five women. The first was María de Valdés, a resident of Las Navas, from whom he suckled for only one month. Doña Leonor de Garay, the wet nurse who two years earlier had weaned Prince Ferdinand, stayed with the infant "the night of 12 August 1576 when he came to the palace and for three more days". Doña Felipa del Mármol, daughter of the secretary Mármol and wife of the licentiate Montemayor, was given a lifetime pension of sixty thousand maravedís a year for the eight months she remained in service, and the next wet nurse, Doña Magdalena Pachón, married to a silversmith, who nursed Don Diego for four months, is known to have received clothes, such as a sackcloth and a doublet of brown satin, as well as three hundred ducats. The last wet nurse was Isabel Páez de la Fuente, wife of Francisco de Espina, who was also his nursemaid; she arrived at the palace on 1 August 1577 [10]. She gave milk until he was weaned, for a total of three months, after which she remained in service at the palace. She was assigned 50,000 maravedís for life. Diego Felix died of smallpox on 21 November 1582 [10][5][2].

Philip III, who eventually became King of Spain, was born in 1578, although the date is uncertain, being either 13 or 14 April. He was nursed by Doña Leonor de Garay, who had weaned Prince Don Fernando (1574) and had nursed Infante Don Diego for a short time (1576). Five wet nurses fed the infant for a short time. Doña Francisca de Urbina was a resident of Barajas. Francisca de Torquemada was wet nurse for ninety-one days and then "also served in the açafate of his highness due to the illness of Doña Phelipa de Espinosa" for a little over two months [17]. On 27 October 1579, when he was just over a year- and-a-half old, he was weaned by Doña Mariana de Vargas, who was his first wet nurse, and this time he nursed four months. She was given "a bed of crimson damask in which she slept" and a pension of fifty thousand maravedís a year [18].

3. Application of Empirical Medicine: Health Promotion and Care

The following are the natural remedies, according to the knowledge and beliefs of the time, related to the care for improving and strengthening women's health in the period studied (1540–1580). Due to the queens' need for

offspring and the high maternal and foetal mortality rate at the time, as well as the limited development of medicine, a series of remedies based on empirical practice were applied.

Special attention should be paid to the problems and illnesses specific to women in the period. A series of prescriptions, ointments and plasters related to menstruation, pregnancy, childbirth, child rearing, breasts, milk and milk withdrawal were applied to women [19]. This is the origin of the importance of the figure of the wet nurse; although it is known that this profession has been regulated in Spain since the 12th century, it was during the 16th century when her presence was greater at court [20].

During childbirth, natural remedies were used and women were attended by midwives and court physicians [21]. Such is the case of the birth for Manuela of Portugal, the first wife of Philip II, where the Eagle stone (limonite or iron oxide) was used, whose purpose was to produce vasodilation of the perineal veins to aid in childbirth [5].

Another type of practice performed on these women was bloodletting, a remedy carried out by Diego Ortega (a barber from Toledo) on Isabella de Valois, the third wife of Philip II, when she contracted smallpox. This queen was also treated by Gaulish doctors, who used remedies such as salt water and pigeon's blood with cream, applied to the eyes, to prevent the after-effects of the disease, especially on the face. However, it should be noted that these practices were carried out against the scientific evidence of the time; as early as 1541, Damian Carbon wrote the "Book of the art of midwives or godmothers", in which he indicated the prohibition of bloodletting, as well as restricting purgatives and enemas [22].

It is known from recipe books that an ointment was used to remove milk, which was applied four or five hours after childbirth. In fact, a cloth soaked in pink water was placed on each breast, the breasts were banded, and these cloths were changed once a day. In addition, to avoid contractions after childbirth, orange blossom water with goat's cloth was put on the belly, which was changed at each meal, and was used for three days. In addition, a hen was boiled with parsley and saffron, and the mother was given the concoction to drink while it was hot [23].

Empirical medicine was therefore oriented around recipes related to health, beauty and feminine hygiene, and the use of aphrodisiac remedies is even known. One of the requirements that wet nurses had to fulfil was related to their beauty and even their hygiene [21].

It is worth noting that some women were rejected for the job of wet nurse because they did not meet the standards of beauty, sometimes due to dental problems. Thus, for facial skin care, a remedy was prepared from oil, honey, wine and vinegar. There were remedies to reduce odours, based on water, pills, oils, flower baths, roses, violets, orange blossom and amber [19].

The most relevant health problems were those related to the throat, mouth, stomach, liver, lungs, heart, bones and joints. One remedy used for asthma was to stew eggs with cat's ointment. Regarding the circulatory system, there was a remedy for blood flow, which was prepared with frankincense, nutmeg and cloves, among other ingredients.

All of these were mixed together and given to the sick person to drink for nine mornings in order to heal them [24] [25]

It is remarkable the amount of remedies used to treat "madness", an illness that sometimes occurred due to consanguine marriages carried out between cousins, aunts, uncles and other relatives. These remedies could be ingested or used in the form of ointments and herbal remedies. In some cases, superstition was involved [23].

4. Discussion

Historically, and for centuries, human nutrition has been the only way to guarantee the health and survival of the newborn, and its failure has been one of the most important causes of death. While it is true that the research maintains that breastfeeding by wet nurses favoured the survival of royal infants, this was not the case for newborns raised by wet nurses in institutions or foundling homes, and even breastfeeding did not guarantee the survival of royal infants in all cases, as some inevitably died of infectious and contagious diseases. Therefore, it can be stated that breastfeeding, together with hygienic and sanitary conditions and access to medical resources made it possible for the royal infants breastfed by wet nurses to survive longer than those raised in lower social strata. Neonates nursed by non-royal wet nurses generally did not have the same sanitary conditions and had fewer health resources. For this reason, breastfeeding was not sufficient in these cases. Thus, the office of wet nurse was undoubtedly a guarantee of health in royalty, but it did not ensure the survival of infants, just as breastfeeding, despite its nutritional and immune components, did not guarantee the survival of children from lower social classes in that period. The subject of newborn feeding has been present in the medical treatises of great thinkers, philosophers, physicians and historians throughout the centuries. In the vast majority of cases, the approach to the subject was centred on the figure of the mother and the wet nurse, valued from the point of view of moral or religious indoctrination, considering the woman as an ignorant, hysterical or capricious being [26][27].

The great importance given to the reasons and advice on breastfeeding that sages and scholars, since the time of Aristotle, have used to justify its convenience for both mother and child is surely to be found in the fact that many women who could afford it were unwilling or unable to breastfeed [25]. This situation highlights the weak balance between the natural, the cultural and the social. Since the beginning of society, a difference has been established between women who breastfed their children and those who, for cultural or social class reasons, did not engage in this practice [26]. In fact, different tests are described in the work of Oribasius of Pergamon, 4th century AD, to check the quality of the milk of wet nurses and whether they were fit to care for and feed a child belonging to the nobility [28].

Works on wet nurses have been very prolific in records, legends and even manuscripts. Thus, in the works of great physicians of antiquity such as Soranus of Ephesus, Oribasius, Mesitheus, Etius and Galen, advice to be taken into account for wet nursemaids was extracted and was followed well into the 20th century [29]. In fact, Abou Aly [28] shows, through the texts of Ancient Greek physicians, the recommendations to be taken into account when choosing a good wet nurse. In this sense, Knibiehler [30] made an important contribution with his work on the non-

maids of the wealthiest classes in France during the Ancien Régime, becoming one of the basic references on the practices related to the figure of the wet nurse.

Such is the importance of this profession carried out by women that researchers such as Colmenar have shown the legislation and regulations relating to wet nurses as a measure aimed at protecting infants and the children of the upper classes, but above all to protect the heirs of noble families [31].

However, what can be said about the role of breastfeeding in noble families, and specifically in the royal family of 16th century Spain, one of the most powerful and important royal families in history? Raising a child in the 16th century was not an easy task; infant mortality was very high, and to survive beyond the age of two or three was a real challenge. Neither princes nor kings escaped this sad reality, with Philip II standing out in this respect; he had eight legitimate children with four wives, of whom only three survived [10][24]. This situation highlights the importance of the wet nurse for the suckling of infants, as these women could help royalty by increasing infant survival, by excluding queens and birth mothers from the suckling process, and by increasing the frequency of childbearing to expand the power of the ruling classes.

Faced with this terrible situation and given the importance of the royal heirs for the very survival of the monarchy, it was logical that care and attention should be paid to the young infants and their royal mothers. One of the aspects of greatest consideration was the choice of suitable and sufficient breeding mistresses, given the high mortality rate among infants, as has already been studied. It was also necessary to guarantee sufficient food for the infant royal children. In this regard, Cabrera [1] provides a historical overview of the wet-nursing profession, including the auxiliary nursing carried out by the most modest women, as well as the wet nurses employed in the royal households, some of whom were immortalised by court painters together with the infants in their care. On the other hand, Del Hoyo [32] studied the qualities required of an upper-class wet nurse and the physical and anatomical examination she had to undergo.

In the court of Philip II, wet nurses and housekeepers enjoyed a good reputation, and their social standing was so high that many were called "Doñas" and were given exquisite gifts. The most productive of them obtained certificates of nobility for their husbands and large lifetime salaries.

However, the court of Philip II established health criteria, as these women had to be healthy, beautiful and with milk—if possible, a lot of milk. Ethnic-religious prohibitions were also created, as wet nurses had to be old Christians and, in many cases, with a certificate of cleanliness of blood, which meant that they could not be Jewish or Muslim, or even descendants. Finally, there were the moral considerations, as they had to have good customs, which had to be justified directly by the church [34].

Such was the importance of this figure at the court of Philip II that a letter sent from Madrid on 5 December 1588 by King Philip II to one of his daughters, Catherine Micaela, Duchess of Savoy, was preserved, in which the monarch was interested in the health of his three grandchildren and mentioned the mistresses of the brood: "[...] and also

that my grandchildren are so well and that what Vittorio Amadeo had is past, and it is very good to give them the mistresses when necessary" [35].

The presence of wet nurses was essential brought great benefits to these women and their families. In this sense, Borrel examines the reasons that could coexist with the economic contribution for a woman to decide to work as a wet nurse in Girona during the 17th and 18th centuries [36].

In addition, the court encouraged queens to devote themselves to their own bodily care and to exercise other functions and obligations within the court, apart from the search for an heir. This situation led them to use the empirical medicine of the time through health, beauty and curative methods to improve their image and to avoid the epidemics of the time (influenza, smallpox) and even to remove breast milk and control bodily alterations after childbirth. The queens had to look like healthy and attractive women to a man who wanted to perpetuate his dynasty on the throne through his children [37]. Therefore, the figure of the wet nurse is important because she substituted for the natural mother in breastfeeding, in the supervision of the child's care and in education so that she could carry out the obligations of the court and of society, allowing queens to continue having children and thus perpetuate the lineage and the family name in power for generations.

It is important to consider that, by avoiding breastfeeding, the mother restarted the reproductive cycle as soon as possible, which favoured an increase in the number of births [38]; despite the fact that the infants had good wet nurses and the best nurses of the time, mortality in early infancy was very high [10][24]. In fact, the court of Philip II was not the only one that enjoyed the presence of milkmaids, as it is known that in the Cortes of the Castilian kings they were common, starting at least in the 12th century, even regulating the criteria for the selection of wet nurses in the Castilian constitutional body, in the very same Partidas. Thus, in the second partida, in the third law of chapter VII, the characteristics that these wet nurses had to have were set forth [39].

References

- 1. Cabrera Espinosa, M. La muerte de los niños de sangre real durante el medievo. Aproximación al tema a través de las crónicas. España Mediev. 2008, 31, 217–248.
- 2. Del Hierro, M.P.Q. Las Mujeres de Felipe II: Deber y Pasión en la Casa del Rey; Edaf: Madrid, Spain, 2011.
- 3. Galván, F. Los católicos secretos en La española inglesa. An. Cervant. 2014, 46, 67–82.
- 4. Martín, M.J.P. María Tudor. La Gran Reina Desconocida; Ediciones Rialp: Madrid, Spain, 2018.
- 5. Junceda Avello, E. Ginecología y Vida Íntima de las Reinas de España; Ediciones Temas de Hoy: Madrid, Spain, 1991; Volume 1.
- 6. Pena Sueiro, N. Los Casamientos del Príncipe Felipe de Austria y María Manuela de Portugal en las Relaciones de Sucesos. In Festina Lente. Augusta Empresa Correr a Espacio. Studia in

- Honorem Sagrario López Poza; Fernández Travieso, C., Pena Sueiro, N., Eds.; Universidade da Coruña: Coruña, Spain, 2019; pp. 247–262.
- 7. Martínez Llamas, A. Isabel de Valois; Ediciones Martínez Roca: Barcelona, Spain, 2001.
- 8. Yalom, M.; Puigrós, A. Historia del Pecho; Tusquets Editores: Barcelona, Spain, 1997.
- 9. García Barranco, M. Isabel de Valois (1546–1568): Reinterpretación del Papel de una Reina Consorte; La Fortuna: Madrid, Spain, 2005; pp. 396–410.
- Cortés Echanove, L. Nacimiento y Crianza de Personas Reales en la Corte de España, 1566– 1886; CSIC: Madrid, Spain, 1958.
- 11. Albaladejo Martínez, M. La Casa de las Infantas de España en el reinado de Felipe II: Ciertos aspectos sobre su origen, formación y difusión. Stud. Hist. Hist. Mod. 2014, 36, 233–261.
- 12. Bel Bravo, M.A. Mujer y Cambio Social en la Edad Moderna; Ediciones Encuentro: Madrid, Spain, 2009; pp. 249–258.
- 13. Barriera, D.G.; Dalla Corte, G. El derecho y la justicia entre la historia y la antropología: Breviario de materiales y recursos seleccionados como introducción al tema. Prohistoria 2002, 5, 273–293.
- 14. Ruiz, E.M. Felipe II: El Hombre, el Rey, el Mito; La Esfera de los Libros: Madrid, Spain, 2020.
- 15. López-Cordón, M.V.; Franco, G. (Coords) I: La Reina Isabel y las Reinas de España: Realidad, modelos e imagen historiográfica. In Proceedings of the VIII Reunión Científica de la Fundación Española de Historia Moderna, Madrid, Spain, 2–4 June 2004; pp. 427–445.
- 16. Adán, J.C. El drama de Felipe II. La muerte en la vida de un rey. Arbor 1957, 36, 17.
- 17. Bustamante, C.P. Felipe III: Semblanza de un Monarca y Perfiles de una Privanza; Real Academia de la Historia: Madrid, Spain, 1950.
- 18. Franganillo Álvarez, A. Trabajadoras Domésticas en Palacio: Las Mozas de Cámara en la Corte Española (1570–1649); Istituto di Storia dell'Europa Mediterranea: Cagliari, Italy, 2019; pp. 383–404.
- 19. Pérez Samper, M.A. Los recetarios de mujeres y para mujeres. Sobre la conservación y transmisión de los saberes domésticos en la época moderna. In Cuadernos de Historia Moderna; monográfico; Servicio de Publicaciones ACM: Madrid, Spain, 1997; Volume 9, p. 121454.
- 20. Siles González, J. La Industria de las Nodrizas en Alicante, 1868–1936. In El Trabajo a Través de la Historia, Proceedings of the Il Congreso de la Asociación de Historia Social, Córdoba, Spain, April 1995; Centro de Estudios Historicos: Madrid, Spain, 1996; pp. 367–372.
- 21. Piñero, J.M.L. Las ciencias médicas en la España del siglo XIX. Ayer 1992, 7, 193–240.
- 22. Carbón, D. Libro del Arte de las Comadres o Madrinas, y del Regimiento de las Preñadas y Paridas y de los Niños; Impreso por Hernando de Cansoles: Mallorca, Spain, 1541.

- 23. Martínez Crespo, A. Manual de Mugeres en el Qual se Contienen Muchas y Diversas Reçeutas Muy Buenas; Ediciones Universidad de Salamanca: Salamanca, Spain, 1995.
- 24. Granjel, L.S. La medicina española renacentista. In Historia General de la Medicina Española; Ediciones Universidad de Salamanca: Salamanca, Spain, 1980; Volume 2, p. 289.
- 25. Farfán, F.A. El Tratado breve de medicina de 1592. In Tratado Breve de Medicina y de Todas las Enfermedades; Marcos Cortés Guadarrama, M., Ed.; Vervuert: Madrid, Spain, 2020; pp. 155–166.
- 26. Martínez Sabater, A. Las Nodrizas y su Papel en el Desarrollo de la Sociedad Española: Una Visión Transdisciplinar. Las Nodrizas en la Prensa Española del Siglo XIX y Principios del Siglo XX. Ph.D. Thesis, Universidad de Alicante, Alicante, Spain, 2014.
- 27. Antonio, M.S. Las nodrizas y su importancia en los cuidados. Cult. Cuid. Rev. Enferm. Humanid. 2014, 40, 9–17.
- 28. Abou Aly, A. The wet nurse: A study in ancient medicine and Greek papyri. Vesallius 1996, 2, 86–97.
- 29. López Pérez, M. La alimentación del lactante: La nodriza y el examen probatorio de la leche en la obra de Oribasio. Espac. Tiempo Forma Ser. II Hist. Antig. 2005, 18, 225.
- 30. Knibiehler, Y. Madres y Nodrizas. In Figuras de la Madre; Cátedra: Madrid, Spain, 1996; pp. 95–118.
- 31. Orzaes, C.C. Nodrizas y lactancia mercenaria en España durante el primer tercio del siglo XX. Arenal Rev. Hist. Mujeres 2007, 14, 335–359.
- 32. Del Hoyo, J. La primera alimentación del hombre. Gerión Rev. Hist. Antig. 1991, 195–204. Available online: https://dialnet.unirioja.es/metricas/documentos/ARTREV/101184 (accessed on 17 December 2021).
- 33. Montalvo, J.R.H. Los Judíos en la España Medieval: De la Tolerancia a la Expulsion; Instituto de Estudios Almerienses: Almeria, Spain, 2000; pp. 25–41.
- 34. Pérez, M.J.F. Estampas femeninas del Medievo hispano: Diálogos entre musulmanas, judías y cristianas. AWRAQ Estud. Mundo Árabe Islám. Contemp. 2011, 3, 37–55.
- 35. Bouza, F. (Ed.) Cartas de Felipe II a Sus Hijas; Akal: Madrid, Spain, 1998.
- 36. Sabater, M.B. Las amas de cría en el corregimiento de Girona en el siglo XVIII: Una interpretación sobre las causas de la lactancia de los niños expósitos. Espac. Tiempo Forma Ser. IV Hist. Mod. 1995, 8, 221–240.
- 37. Barranco, M.G. Antropología Histórica de una Élite de Poder: Las Reinas de España; Editorial de la Universidad de Granada: Granada, Spain, 2007.

- 38. González-Pascual, J.L.; Esteban-Gonzalo, L.; Rodríguez-García, M.; Gómez-Cantarino, S.; Moreno-Preciado, M. The Effect ofStereotypes and Prejudices Regarding Gender Roles on the Relation between Nurses and "Muslim Fathers" in Health Institutions within the Community of Madrid (Spain). Nurs. Inq. 2017, 24, e12194.
- 39. Alfonso, X. Las Siete Partidas; Antología; Castalia: Barcelona, Spain, 1992.

Retrieved from https://encyclopedia.pub/entry/history/show/47710