
The Struggle Against Infertility in France (1920-1980)

Fabrice Cahen



Introduction

- Subject of this paper : the **material and institutionnal frame** of the treatment of human reproduction troubles in France
- Chronological limits :
 - 1920s: first public institutions for infertility diagnosis and therapeutics
 - 1970s/1980s: sperm cryopreservation, first « sperm banks », IVF
- Specificity of my approach : analyzing a process of institutionnalization, connected with the medicalization of society, and the enhancement of the State intervention, especially in the field of « human life »
- Leading questions : **Why did doctors and social reformers try to build institutionnal systems to help the infertile couples ? What political, administrative and financial support did they obtain ?**



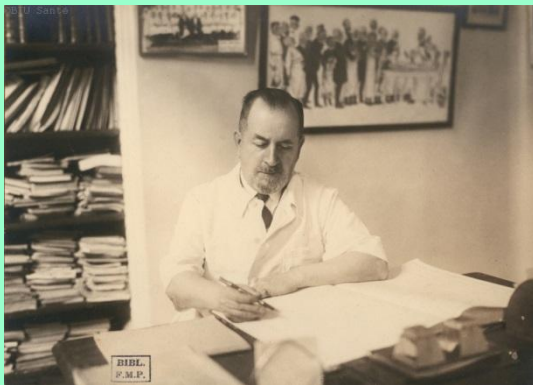


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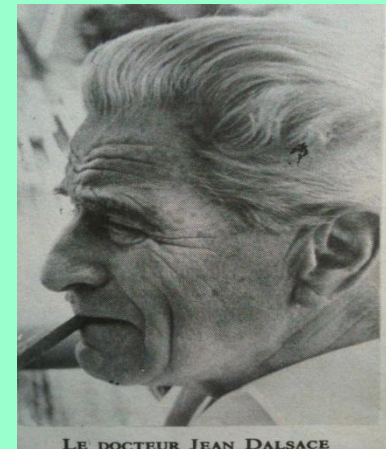
Struggle against infertility and population policies

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- The post-1870 national debate over “depopulation”: an ambiguous effect
 - The creation of specialized hospital structures results from isolated undertakings
 - Infertility, quantity, quality and “positive” means of biopolitics
 - Two conceptions of the “social interest” of this medical activity : the “Devraigne” model, the “Dalsace” model

-Dr Louis Devraigne :
The medicine of infertility
in the frame of “puériculture”



-Dr Jean Dalsace (archives : fonds privé Dalsace-Vellay (Bibliothèque interuniversitaire de médecine), archives municipales de Suresnes): Birth control, sexology, “medical gynecology”, self-fertilization





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VILLE DE SURESNES

LE SAMEDI, à 14 heures
au Dispensaire de l'Allée des Platanes
(Porte sur Jardin)

CONSULTATION du D^r JEAN DALSACE
EUGÉNIQUE, STÉRILITÉ, etc.

RENSEIGNEMENTS : Aux Assistantes Sociales (dans les Ecoles)
Le Sénateur-Maire de Suresnes, Henri SELLIER

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An institutionnal frame for the medicine of infertility

- 1920s-1930s : the first specialized consultation services



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Source : A. Mergier




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- Medical protocols

- The problem of the therapeutic efficiency





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The lack of institutionnal regulation : drawbacks and advantages

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- The persisting lack of public policies
 - An

asset for scientific innovation ?

Conclusion

- The struggle against pathological infertility in France is part of a larger « biopolitic » concern :
 - quantity: as an alternative to the fight against abortion or birth control
 - » quality » : as a means of passive eugenic selection
- The first institutionnalization (interwar) leads to a better diagnosis protocol, and to the recognition of a medical activity
- The restricted public involvement has various consequences : slow down the development of public policies, but more medical autonomy

