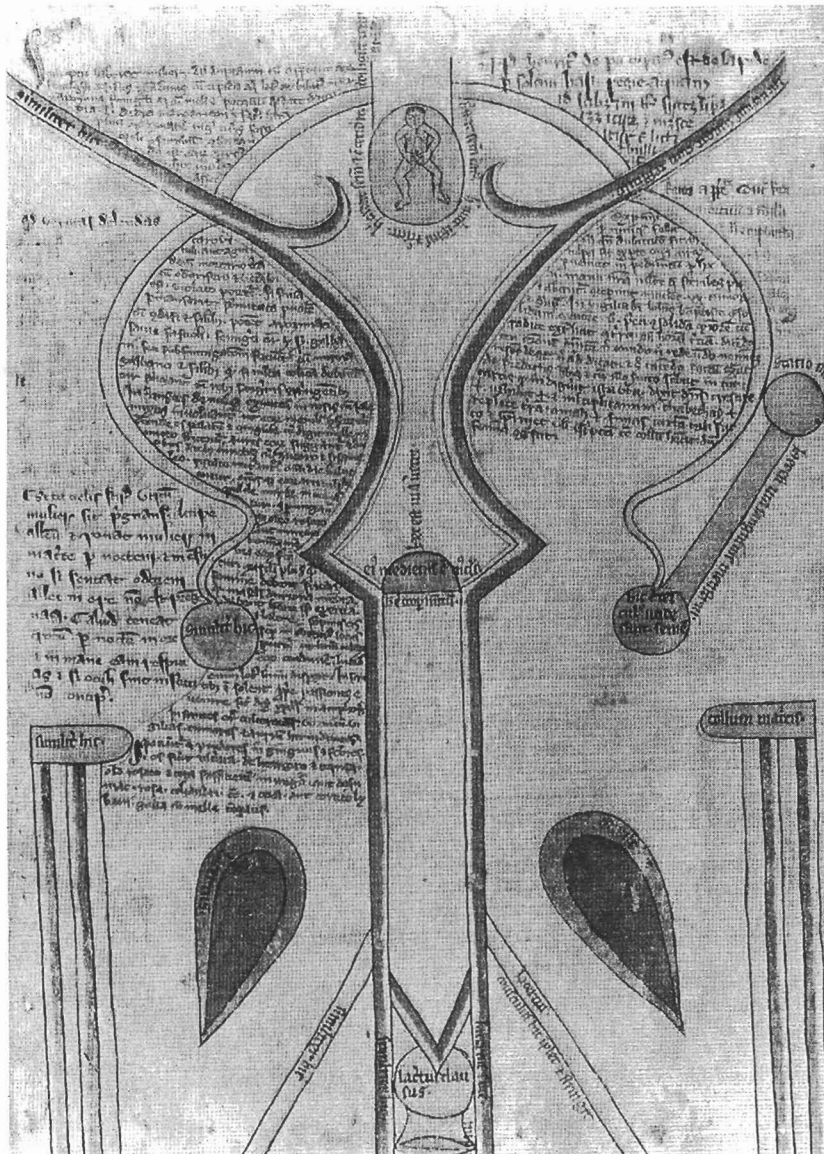


Monica H. Green

Women's Healthcare in the Medieval West

Texts and Contexts



A diagram of the female reproductive organs from a late thirteenth-century English manuscript (Oxford, Bodleian Library, MS Ashmole 399, f. 13v, reproduced with kind permission).

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Each article has been given a Roman numeral in order of appearance, as listed in the Contents. This number is repeated on each page and quoted in the index entries

The Possibilities of Literacy and
 the Limits of Reading:
 Women and the Gendering
 of Medical Literacy

In 1993, in a provocative essay on images of St Anne teaching her daughter Mary how to read, Pamela Sheingorn argued that female literacy in later medieval Europe may have been far more prevalent than hitherto imagined. Sheingorn closed the essay with some intriguing musings on the possibilities and limitations of literacy for women. On the one hand, while literacy brings with it a certain kind of intellectual liberation, it can be—and often is—used to reinforce traditional orthodoxies and ideologies. On the other hand, "another possible consequence of literacy is to foster criticism and commentary. . . . Although we cannot predict the end to which it will be used, we can agree that literacy is power".¹ The explosion of recent publications on women's literacy, book ownership, and habits of reading have fully confirmed Sheingorn's suspicions about the rising levels of female literacy and book ownership from the thirteenth century on.² At the same

¹ Pamela Sheingorn, "The Wise Mother': The Image of St. Anne Teaching the Virgin Mary", *GESTA* 32 (1993), 69-80, at p. 78.

² Still the only broad assessment of women's literacy and book-ownership in the high and later Middle Ages is Susan Groag Bell, "Medieval Women Book Owners: Arbiters of Lay Piety and Ambassadors of Culture", *Signs: Journal of Women in Culture and Society* 7, no. 4 (Summer 1982), 742-68; repr. in *Sisters and Workers in the Middle Ages*, ed. J. Bennett, E. Clark, J. O'Barr, B. Vilen, and S. Westphal-Wihl (Chicago: University of Chicago Press, 1989), pp. 135-61. Bell's findings are, however, increasingly being tested by more locally focused studies: Geneviève Hasenohr, "L'essor des bibliothèques privées aux XIV^e et XV^e siècles", in *Histoire des bibliothèques françaises, 1: Les bibliothèques médiévales du VI^e siècle à 1530*, ed. André Vernet (Paris: Promodis-Éditions du Cercle de la Librairie, 1989), pp. 214-63; Luisa Miglio, "Leggere e scrivere il volgare: Sull'alfabetismo delle donne nella toscana tardo medievale", *Civiltà comunale: Libro, scrittura, documento*.

time, however, scholars are documenting ways in which female literacy was limited, constrained and confined. Peter Biller and Shannon McSheffrey, for example, have shown how the quintessentially literate heterodoxies of Catharism and Lollardy failed to encourage literacy among women; Alcuin Blamires, Geneviève Hasenohr and Ralph Hanna III have shown how women were excluded even from orthodox religious reading; Roberta Krueger has shown how the new genre of the vernacular romance invited a female audience at the same time that it proffered models of behavior which, if adopted uncritically, would have trapped women within traditional patriarchal ideologies.³

Atti del Convegno, Genova, 8-11 novembre 1988, Atti della Società Ligure di Storia Patria, 103 (Genova: Società Ligure di Storia Patria, 1989), 357-377; Josephine Koster Tarvers, "Thys ys my mystrys boke": English Women as Readers and Writers in Late Medieval England", in *The Uses of Manuscripts in Literary Studies: Essays in Memory of Judson Boyce Allen*, ed. Charlotte Cook Morse et al. (Kalamazoo: Medieval Institute Publications, 1992), pp. 305-27; Carol M. Meale, ed., *Women and Literature in Britain, 1150-1500* (Cambridge: Cambridge University Press, 1993; 2nd ed., 1996, with added chronology and bibliography); eadem, "Reading Women's Culture in Fifteenth-Century England: The Case of Alice Chaucer", in Piero Boitani and Anna Torti, eds., *Mediaevalitas: Reading the Middle Ages. The J.A.W. Bennett Memorial Lectures, Ninth Series, Perugia, 1995* (Cambridge: D.S. Brewer, 1996), pp. 81-101; eadem, "oft sith with grete deuotion I thought what I might do pleyssyng to god": The Early Ownership and Readership of Love's *Mirror*, with Special Reference to its Female Audience", in Shoichi Oguro, et al., eds., *Nicholas Love at Waseda. Proceedings of the International Conference, 20-22 July 1995* (Cambridge: D.S. Brewer, 1997), pp. 19-46; Lesley Smith and Jane H. M. Taylor, eds., *Women, the Book and the Godly: Selected Proceedings of the St Hilda's Conference, 1993*, vol. 1 (Cambridge: D. S. Brewer, 1995) [hereafter cited as *Godly*]; idem, *Women, the Book and the Worldly: Selected Proceedings of the St Hilda's Conference, 1993*, vol. 2 (Cambridge: D. S. Brewer, 1995); idem, *Women and the Book: Assessing the Visual Evidence* (London and Toronto: British Library and University of Toronto Press, 1996); Anne Clark Bartlett, *Male Authors, Female Readers: Representation and Subjectivity in Middle English Devotional Literature* (Ithaca, NY and London: Cornell University Press, 1995); David N. Bell, *What Nuns Read: Books and Libraries in Medieval English Nunneries* (Kalamazoo, Michigan: Cistercian Publications, 1995); John B. Friedman, *Northern English Books, Owners, and Makers in the Late Middle Ages* (Syracuse, NY: Syracuse University Press, 1995), pp. 10-22; and Anne-Marie Legaré, "Reassessing Women's Libraries in Late Medieval France: The Case of Jeanne de Laval", *Renaissance Studies* 10 (1996), 209-36. The second edition of Michael Clanchy's classic *From Memory to Written Record: England 1066-1307* (Cambridge: Blackwell, 1993) includes new material on female reading habits; Clanchy promises a full monographic study of women's literacy in the near future. I regret that I have not been able to avail myself of Carol M. Meale and Julia Boffey's essay, "Gentlewomen's Reading" or any of the other important works in the new *Cambridge History of the Book in Britain*, ed. J. B. Trapp and Lotte Hellinga (Cambridge: Cambridge University Press, 1999), which is being issued just as I go to press with the present essay.

³ Peter Biller, "Women and Texts in Languedocian Catharism", Shannon McSheffrey, "Literacy and the Gender Gap in the Late Middle Ages: Women and Reading in

I would like to bring yet another perspective on the question of the possibilities and limitations of female literacy in the Middle Ages. The discipline of medicine has thus far been uniformly omitted from medieval literacy studies, so it is not surprising that the particular question of women's use of medical books has received no sustained attention. Lack of in-depth study has not prevented occasional speculation on the topic, however. While it is perhaps understandable that earlier work on medieval women's medicine should have unquestioningly postulated a direct correlation between medical (and particularly gynecological) texts and women readers,⁴ even recent, more critically informed works adopt this position. Britta-Juliane Kruse, for example, in an important new book on German gynecological literature, refers to *Leseren/innen*, despite the fact that she could document only two instances of female possession of medical material, and in both cases with only scant gynecological content.⁵ The casual aside of art historian Madeline

Lollard Communities", Alcuin Blamires, "The Limits of Bible Study for Medieval Women", all in *Godly* (n. 2 above), pp. 171-182, 157-170, and 1-12, respectively; Geneviève Hasenohr, "Religious Reading Amongst the Laity in France in the Fifteenth Century", in Peter Biller and Anne Hudson, eds., *Heresy and Literacy, 1000-1530* (Cambridge: Cambridge University Press, 1994), pp. 205-221; Ralph Hanna III, "Some Norfolk Women and Their Books, ca. 1390-1440", in June McCash Hall, ed., *The Cultural Patronage of Medieval Women* (Athens, GA: University of Georgia Press, 1996), pp. 288-305; and Roberta L. Krueger, *Women Readers and the Ideology of Gender in Old French Verse Romance*, Cambridge Studies in French, 43 (Cambridge: Cambridge University Press, 1993). Bartlett (n. 2 above), while likewise admitting the limitations of women's access to literate religious culture, argues that women's incomplete literacy in effect insulated them from the misogyny of English devotional texts; in other words, they did not "get" all the rhetorical messages directed at them. In a quite different vein, Helen Solterer argues persuasively for the potentially subversive effects of literary figures of learned women; see Helen Solterer, *The Master and Minerva: Disputing Women in French Medieval Culture* (Berkeley: University of California Press, 1995).

⁴ See, for example, the claims of Beryl Rowland, ed., *Medieval Woman's Guide to Health: The First English Gynecological Handbook* (Kent, Ohio: Kent State University Press, 1981) that the fifteenth-century Middle English manuscript she edits "may have been made for a noble lady, possibly acting as instructress on her estate" (p. 15), despite the fact that there is nothing about that particular volume to suggest that it was owned by a woman. Renate Blumenfeld-Kosinski, *Not of Woman Born: Representations of Caesarean Birth in Medieval and Renaissance Culture* (Ithaca, NY: Cornell University Press, 1990), p. 102, assumes that most obstetrical literature (even in Latin!) was meant for midwives, though she does acknowledge that they may at times have had to rely on other literate people to make the material accessible to them.

⁵ Britta-Juliane Kruse, *Verborgene Heilkünste: Geschichte der Frauenmedizin im Spätmittelalter*, Quellen und Forschungen zur Literatur- und Kulturgeschichte, 5 (Berlin: Walter de Gruyter, 1996), pp. 62-63 and p. 50, n. 140; in fact, in both cases these are religious charms rather than physical remedies. Of the fifty-one manuscripts she discusses, at least twenty-two are known to have been owned by men.

Caviness regarding the early fourteenth-century royal widow Mahaut of Artois captures this view succinctly: "Although they are not mentioned in the records of works ordered by her, she *most probably* had books on herbal medicine and gynecology, because both were still practiced by women".⁶ If women are literate, so this logic goes, then it is unproblematic to assume that medicine—and especially texts having to do with women's particular conditions—would have readily figured into their reading. It will be the purpose of this study to suggest that we should amend Caviness's "most probably" to, at best, a "might possibly". As we shall see, women's relations to literate medicine were as rife with possibilities *and* limitations as the other areas of medieval culture already examined by scholars.

Like law, religion and the literary arts, medicine was exploding into new dimensions of literacy and textuality in the high and later medieval periods.⁷ And extant medical manuscripts as well as medieval library catalogues, wills, property inventories and other sources show that, *on occasion*, women owned medical books or miscellaneous volumes with some medical content. There are, moreover, a considerable number of medical texts dedicated or addressed to women. Yet as a percentage of women's books *in toto*, the numbers of their medical books are strikingly small; similarly, the number of medical texts explicitly intended for female use is only a tiny fraction of the vast corpus of medical literature known to have circulated in medieval Europe. We have, then, a situation where both women's literacy and the quantity of medical literature (in Latin and in the vernacular) were simultaneously increasing, yet where women's access to the literate culture of

⁶ See Madeline Caviness, "Anchoress, Abbess, and Queen: Donors and Patrons or Intercrossors and Matrons", in McCash, *Cultural Patronage* (n. 3 above), pp. 105-154, at p. 143; emphasis mine. See also n. 68 below.

⁷ I have chosen to focus in this essay only on the high and later medieval periods (twelfth through fifteenth centuries) because I have found so little evidence for female ownership of medical books prior to that period (though see Table 1, item 16). Moreover, in surveying gynecological literature in the early medieval period, I found no evidence for female ownership of that rather substantial corpus of texts, despite the fact that, in several cases, these works had been originally (in late antiquity) directed to female audiences; see Monica H. Green, "The Transmission of Ancient Theories of Female Physiology and Disease Through the Early Middle Ages", Ph.D. dissertation (Princeton University, 1985). Nevertheless, Rosamond McKitterick has recently argued forcefully for the pervasiveness of female literacy (and even composition) among upper-class women in early medieval Europe ("Women and Literacy in the Early Middle Ages", in Rosamond McKitterick, *Books, Scribes and Learning in the Frankish Kingdoms, 6th-9th Centuries*, Aldershot: Variorum, 1994, essay XIII), and I would have to agree that the possibility of female medical reading cannot be dismissed out of hand.

medicine seems not to have been growing at a comparable pace. If the proposed assumptions of Caviness *et al.* are legitimate—if in fact literate women *normatively* applied their literate skills to reading about medicine—then why do we not find more medical books in women's hands? Why, indeed, do we not even find regular proof that texts on women's medicine were in women's hands?

As I will explain in more detail below, I think it likely that women did own more medical texts than we can now document in their hands. But I also think it likely that they owned far fewer than essentialist assumptions of women's "innate" caring capacities would lead us to suspect.⁸ To pose the problem in a different way: Why *should* we expect to find medical texts in the hands of women? Although there are valid reasons to claim that the absence of medical books from women's collections is due to the limitations of our sources, I think it would still be erroneous to assume, without evidence, that women would have viewed medical books as the principal or most appropriate way to acquire, preserve, and pass on medical knowledge, or that women's command of medical literature was in any way expected or valorized by society at large.

On the contrary, I suspect that the paucity of evidence for medical book ownership by medieval women is directly indicative of the limited engagement that women had with medical writings, even writings on topics of specific concern to women. The acquisition of basic literacy in the high and late medieval periods, whether in Latin or the local vernacular, did not necessarily enable, let alone sanction, women to participate without restraint in any and every aspect of literate medical culture, letting their interests or curiosities take them where they will. This is not just a question of a lay populace being unable to comprehend the esoteric jargon of an exclusive university elite, nor a simple question of Latin vs. the vernacular. These divides were certainly important, as we shall see. But because of differing educational backgrounds and childhood socialization for men and women, there were also distinct *gender* differences in the ways males and females interacted with literate medicine. These differences would have overlain the already existing barriers to entree into literate culture posed by socio-economic class, for because of their inordinate expense books continued to be a relative luxury item. Moreover, women were to an extent complicit in granting authority to an educated elite corps of (mostly male) practitioners. Many women, especially those of the literate classes, frequently relied on the

⁸ For a wonderfully salubrious counter to universalist assumptions about women's involvement in medical care, see Chapter 8 of Helen King, *Hippocrates' Woman: Reading the Female Body in Ancient Greece* (London and New York: Routledge, 1998).

services of professional medical practitioners—even, at times, for gynecological care. This reliance did not, of course, necessarily preclude the development of their own medical skills, just as it did not preclude employment of a wide variety of other mechanisms to alleviate sickness and promote health (e.g., prayers, pilgrimages, and charms). But it was precisely the existence of this whole "medical marketplace" that we must keep in mind before we assume that medical knowledge can only be embodied in medical books.

Even limiting ourselves to the written word, we need to take better account of the multiplicity of genres and the manifold ways of reading and using different kinds of texts. The concept of "literacy" is often used in a very generic way to refer simply to the ability to read. I would like to introduce the notion of "medical literacy" as a way of acknowledging that not all kinds of texts are read in the same way. Medical writings are, I think rightly, normally classed as *Fachliteratur*, as a kind of technical literature read for information rather than pleasure, moral edification, or religious enlightenment. Even under the rubric of "information", there would be important differences in how different texts were used: whereas some texts (such as herbals or lists of medical synonyms) might serve as quick reference guides, to be glanced at only briefly, others (such as major works on anatomy, physiology, or disease classification) would have been digested slowly, with repeated readings, glossing, and other analytical techniques. The medical faculties of the universities developed more or less fixed curricula while local licensing bodies developed some consensus on the basic knowledge licensed practitioners should have. Nevertheless, there was no single hegemonic authority in medieval Europe that dictated what medical literature was, least of all that controlled its publication or circulation. To be sure, the use of Latin for many medical writings created a barrier to access, especially after the twelfth century when the gap between the learned tongue and the written vernaculars began to grow. Historians of medicine have in recent years made important strides in addressing the question of who was the targetted audience of the new vernacular medical literatures that developed between the thirteenth and fifteenth centuries. Earlier assumptions were that vernacular texts (many of which were translations from Latin rather than novel compositions) must necessarily have been for unlearned practitioners (surgeons, barber-surgeons, apothecaries and midwives) or for the laity. As will become clear shortly, there were certain classes of medical texts that were directed primarily at laypersons. But new studies are showing that there was no easy line between Latin and the vernacular, just as there was no easy or obvious divide between "professional" and "lay".⁹ Vernacular

medical texts very often circulate in codices that also contain Latin works, demonstrating that their commissioners did indeed have some command of Latin.¹⁰ The individuals who commissioned and owned many of the manuscripts were, moreover, often professional medical practitioners, or at least individuals who had had some university training in medicine.¹¹ As Michela Pereira has recently shown with regard to alchemical literature, vernacularization of the language need not always imply "popularization" of the subject matter.¹²

It is in keeping with this notion of the spectrum of audiences of and competencies with medical discourse that I would like to add one further layer of difference. In thinking about literacy we must also think about non-literacy and, equally important, the continued role of orality even within literate culture. The written medium is often of only secondary importance in the transmission of therapeutic knowledge, which is most frequently conveyed by oral instruction and apprenticeship. The written medium does, nevertheless, have virtues that orality can never approach. At its most basic level, writing can serve as a "floppy disk", if you will, on which to download information that has become too copious or is too infrequently used to be well retained in active memory. Equally important is the written medium's ability to serve as a substitute for oral discourse when that is not possible: when distance or time separate the "speaker" from the recipient.

⁹ Gundolf Keil, "Der Hausvater als Arzt", in Trude Ehlert, *et al.*, eds., *Haushalt und Familie in Mittelalter und früher Neuzeit* (Sigmaringen: Jan Thorbecke, 1991), pp. 219-43, employs the concept of "Laienärzte" ("lay physicians") to refer to anyone not formally trained in medicine. This concept strikes me as unhelpful, though many other aspects of this richly-documented article contribute significantly to an understanding of how much and what kinds of medical knowledge circulated among laity in German-speaking areas. As insufficient as they may be, I retain the designations "professional" and "lay" to distinguish between those who practiced medicine as a primary source of income and/or social position, vs. those who did not.

¹⁰ Linda Ehrsam Voigts, "What's the Word? Bilingualism in Late-Medieval England", *Speculum* 71 (1996), 813-26.

¹¹ Bernhard Schnell, who has studied German medical books, suggests that professional medical practitioners formed an important part of the audience of vernacularized texts; like Voigts with the English material, moreover, Schnell notes that over a third of "German" medical books in fact have Latin texts intermixed. Bernhard Schnell, "Die volkssprachliche Medizinliteratur des Mittelalters - Wissen für wen?", in Thomas Kock and Rita Schlusemann, eds., *Laienlektüre und Buchmarkt im späten Mittelalter* (Frankfurt am Main: Peter Lang, 1997), pp. 129-45. My own studies of the *Trotula* manuscript tradition (a total of 126 Latin and 62 vernacular volumes) support his findings that, by and large, professional practitioners were the principal owners and users of medical volumes.

¹² Michela Pereira, "Alchemy and the Use of Vernacular Languages in the Late Middle Ages", *Speculum* 74 (1999), 336-356.

Finally, and on this point the written medium differs fundamentally from orality, written discourse can move to *and maintain* a higher level of theoretical analysis.¹³ It was precisely this higher level of theoretical analysis that literate physicians, surgeons and apothecaries of later medieval Europe claimed distinguished their medical practices from illiterate empirics, among whom, in a common rhetorical formula, female practitioners were prominently numbered.¹⁴ I will return at the end of this essay to the question of orality. Here I wish to stress the important differences between using the medium of writing to preserve and transmit empirical wisdom for treating toothaches, making plasters, soothing coughs, and so forth, and engaging fully with formal medical literature that explored anatomy, physiology, etiology, symptomatology or theoretically complex therapeutics. As I will argue, gender is one of the important factors that will influence how far along this spectrum an individual might progress.¹⁵

I have laid out elsewhere evidence for the literacy of female medical practitioners and for the presence of medical books in the libraries of nunneries.¹⁶ Here, I wish to focus on women who neither took on "professional" identities as practitioners nor abandoned heterosexual domestic life for the cloister. I concentrate precisely on these "laywomen" in order to explore the construction of a general gendered ideology about women's expected roles in medical care. From a variety of mostly printed sources, I have assembled data documenting women in possession of medical writings. I have included both extant manuscripts and witnesses to books in wills, inventories, and so forth. My next concern is to document the ideology

¹³ For an excellent discussion of this final point as it relates to medicine, see Gordon Miller, "Literacy and the Hippocratic Art: Reading, Writing, and Epistemology in Ancient Greek Medicine", *Journal of the History of Medicine and Allied Sciences* 45 (1990), 11-40.

¹⁴ Jole Agrimi and Chiara Crisciani, "Immagini e ruoli della 'vetula' tra sapere medico e antropologia religiosa (secoli XIII-XV)", in *Poteri carismatici e informali: chiesa e società medioevali*, ed. Agostino Paravicini Bagliani and André Vauchez (Palermo: Sellerio Editore, 1992), pp. 224-61; French trans.: "Savoir médical et anthropologie religieuse: Les représentations et les fonctions de la *vetula* (XIIIe-XVe siècle)", *Annales: E.S.C.* 48 (1993), 1281-1308.

¹⁵ Since even the most educated physicians also made use of (and sometimes composed) recipe collections, I do not wish to imply that certain types of texts were used *only* by those with limited skills in reading medical literature.

¹⁶ Monica H. Green, "Books as a Source of Medical Education for Women in the Middle Ages", forthcoming *Dynamis: Acta Hispanica ad Medicinæ Scientiarumque Historiam Illustrandam* 20 (2000). There I argue that there is little concrete evidence for the literacy of most female practitioners (who would have come largely from urban artisanal classes), while nuns (who often came from the upper ranks of society) replicated the "layness" of their worldly sisters.

surrounding the medical responsibilities of women in a domestic setting. I am particularly interested to ascertain whether women of the literate classes were encouraged to take on primary responsibility for their own medical care and that of their families, and if not, to what degree they were expected to depend on a corps of professional practitioners. In part this ideology was constructed by the medical texts addressed to women, and I analyze these briefly in order to suggest ways in which this disparate body of material creates similar expectations of female behavior and interests. Finally, in order to assess the difference that gender made, I explore the character of the medical *layman*; the domestic space married men and women shared might have given rise to a sharing of literate culture, and it is therefore necessary briefly to examine women's access to the books and learning of their husbands as well.

Women as Owners of Medical Books

Table 1 assembles all the evidence I have thus far found to document women in possession of medical books up through the early sixteenth century.¹⁷ Aside from three women who seem to be of middling social status (including the only two women who can be identified occupationally as medical practitioners),¹⁸ all the women are of bourgeois or noble background. I will examine in a later section of this essay the significance of the differing types of texts these forty-three women owned. Here, I wish to demonstrate what a small percentage of female book-owners were in possession of medical texts.

In his recent study of German medical literature, Bernhard Schnell examined the complete medieval German-language holdings of six well-catalogued libraries in Germany and Austria. He found that medical books constitute six and a half percent of the extant manuscripts.¹⁹ No similar quantitative studies of other areas have yet been done, but Schnell's findings

¹⁷ I have included women whose dates of death fall in the sixteenth century since in several cases it seems likely that their book acquisitions began in the later years of the previous century. For female religious institutions in possession of medical material, see Green, "Books as a Source" (n. 16 above).

¹⁸ Table 1, items 21 and 23.

¹⁹ Schnell defined "medical books" as "Handschriften, die mehrere medizinische Texte aufweisen, wobei der Umfang der Handschrift mitberücksichtigt wurde. Das Kriterium war, ob sich ein medizinisches Segment erkennen liess und ob man von einer bewussten Aufnahme medizinischer Texte in eine wie auch immer angelegte Sammlung sprechen kann. Kleinere Einzelrezepte bzw. kleinere Nachträge habe ich deshalb ignoriert" (p. 138, my emphasis). I will return to the significance of this last methodological choice at the end of the essay.

can serve as a rough guide in estimating how much medical literature is "out there" to be owned. In a sampling of wills from Tournai (in modern-day Belgium), for example, we find ninety-five bourgeois female book-owners between 1266 and 1500. Only one is in possession of a medical book, and even in this case she does not own the volume but merely has it on loan.²⁰ Of the sixty-two men whose wills mention books, in contrast, three own medical texts, producing a percentage of just over four and a half.²¹ Moreover, although none of the medical practitioners represented in this sampling lists any medical books in his will, it is likely that more would have been available in this thriving commercial center than we can yet document.²² Notable also about this sampling is the fact that women constitute the *majority* of book owners broadly defined;²³ to the extent that book-ownership can be assumed to reflect ability to read, therefore, Tournai women's non-ownership of medical books clearly cannot be attributed to sheer lack of literacy.²⁴ Rather, Tournai women conform precisely to what I shall call a "typically feminine" pattern of book-owning. That is, works of individual religious instruction (books of hours, psalters, breviaries, saints' lives, guides for moral living, and so forth) will hold pride of place in female-owned collections, followed, as a distant second, by romances and other belletristic literature. An occasional historical chronicle or general encyclopedia may be found in women's hands, but rarely will these be the only books women have.²⁵ Women may therefore be book-owners, but it is unusual rather than

²⁰ Table 1, item 38.

²¹ A. de La Grange's "Choix de testaments tournaisiens antérieurs au XVI^e siècle," *Annales de la Société historique et archéologique de Tournai*, new ser., 2 (Tournai: Casterman, 1897), pp. 5-365, presents only his own idiosyncratic sampling of the Tournai documents. For male owners, see items 594, 849, and 1135.

²² In addition to Jean de West, bishop of Tournai (d. 1384), who took a medical degree at the University of Paris, references to physicians, surgeons and apothecaries in Tournai can be found in various municipal documents. See, for example, H. Vandenbroeck, *Extraits analytiques des anciens registres des consaux de la ville de Tournai, 1385-1422* (Tournai: Malo et Levasseur, 1861), pp. vi, 6, 18, 22, 50, 75, 80, 127-8, and 137.

²³ This accords with the findings of Joel Rosenthal, who studied the wills of the English peerage for the period 1350-1500. He found that only 18% of male wills noted books, in contrast to 48% of female wills that did so. See J. T. Rosenthal, "Aristocratic Cultural Patronage and Book Bequests, 1350-1500", *Bulletin of the John Rylands Library* 64 (1982), 522-48.

²⁴ For a case where the literacy of a female book-owner is questionable, see Green, "Books as a Source" (n. 16 above).

²⁵ I do not mean to imply, of course, that all literate women throughout Europe are reading the same limited number of texts nor that there are not historically significant shifts in women's patterns of reading. What seems apparent, however, is that in the context of the very wide range of texts circulating in medieval Europe, there are some kinds of works that women commonly are owning and reading, and others that rarely appear in women's hands.

normative for medical books to be in their hands.

Similar results appear in England. Of the ninety-five women listed in Susan Cavanaugh's wide-ranging sampling of English book owners from 1300 to 1450, three, or just over three per cent, appear owning medical material.²⁶ In the same study, there appear sixty-one male medical book owners out of approximately 1092 men total, i.e., about five and a half percent.²⁷ It is likely, moreover, that the gender gap is even broader than these relatively close percentages imply. If we add in recipients and possessors of books in the documents printed by Cavanaugh, we find one female recipient (who, notably, gets her book from another woman) but seven male recipients and six male possessors (i.e., individuals who temporarily hold or who are granted use of books owned by someone else). And all the institutions that receive books are male. Moreover, in surveying the standard prosopographical study of medical practitioners in medieval England, I found an additional fifteen individuals (all male) owning medical books and giving medical books to other males and male institutions, a figure which does not include a considerable number of physicians who were obviously literate (which can be inferred from their university affiliations or other circumstantial evidence) and almost certainly book-owners but to whom no particular books have been associated.²⁸ Three recent studies of book-

²⁶ Susan H. Cavanaugh, "A Study of Books Privately Owned in England, 1300-1450", Ph.D. dissertation, Department of English, University of Pennsylvania, 1980. Cavanaugh did not tabulate her findings; all figures cited here reflect my own calculations. The three women are Elizabeth de Burgh, Margaret Courtenay, and Jacqueline of Bavaria (Table 1, items 6, 7, and 39). This count omits Anneys Chambnoy (or Chambernon), recipient of the medical book of Margaret Courtenay, to whom Cavanaugh does not allot a separate entry. I also omit Philippa de Coucy and Sibilla de Felton, both of whom owned a manuscript that now contains an English recipe for *aqua vitae*; it seems probable, however, that it was added only after their period of ownership (my thanks to Anne M. Dutton for this information).

²⁷ I have excluded from my count of the men four individuals whose books are of uncertain medical character: Godfrey de Croyland, Richard de Gravesend, and Stephen de Gravesend, each of whom owned a copy of Avicenna (who wrote on natural philosophy as well as medicine); and Thomas de Yarom, a physician who left all his books, unfortunately of unspecified content, to his son.

²⁸ C. H. Talbot and E. A. Hammond, *The Medical Practitioners in Medieval England: A Biographical Register* (London: Wellcome Historical Medical Library, 1965); and Faye Marie Getz, "Medical Practitioners in Medieval England", *Social History of Medicine* 3 (1990), 245-83. These sources also give evidence for seven male owners of medical books before 1300 (the starting date of Cavanaugh's study) and fifty-nine more around or after 1450 (Cavanaugh's cut-off date). University-trained physicians who have no books associated with them (e.g., in wills or *ex libris* marks in extant manuscripts) include such men as Adam de Toneworth (ca. 1330-1382), who held a doctorate in medicine and ultimately became Chancellor of the University of Oxford. Other certain literates and

owners in and around the diocese of York from the mid-fourteenth to the end of the fifteenth centuries do not yield any more medical books in women's hands—and this even though medical books were clearly readily available in Yorkshire in this period.²⁹

This pattern of few or no medical books in the collections of women is replicated throughout western Europe. In his exhaustive study of book-ownership in Majorca from the thirteenth to the mid-sixteenth century, J. N. Hillgarth has found evidence for some seventy different female book owners. Their interests in books were not dissimilar from those of other European women: excluding a few professional legal or notarial books inherited from husbands or sons, women's books are mostly books of hours, psalters, prayer books and other works of devotion. Aside from Alegra, wife of a Jewish tailor, who owned a Hebrew text on children's diseases, none of these Majorcan women appear to have owned a medical book.³⁰ Nor is this because medical books were rare on the island. Although Hillgarth suspects that medical volumes are rather underdocumented, he nevertheless finds some 660 medical books in the possession of eighty-six different individuals,

plausible book-owners are men such as Adam of Suthwyk (ca. 1310-1327) who served as both physician and clerk to King Edward II and Queen Isabella.

²⁹ My thanks to Anne M. Dutton for sharing with me findings from her dissertation, "Women's Use of Religious Literature in Late Medieval England", University of York, 1996 (personal correspondence, 24 May 1996). See also her essay, "Passing the Book: Testamentary Transmission of Religious Literature to and by Women in England 1350-1500", in Smith and Taylor, *Godly* (n. 2 above), pp. 41-54; her data do not pertain exclusively to the area of York, though that has been her particular geographic focus. Professor John Friedman has confirmed for me that none of the owners of the nineteen medical books listed in Appendix C of his book (n. 2 above) were women (personal correspondence, 12 December 1995); Friedman's total does not include the twenty-two medical manuscripts donated by John Erghome to the convent of Augustinian friars at York ca. 1372. See also P. J. P. Goldberg, "Lay Book Ownership in Late Medieval York: The Evidence of Wills", *The Library*, 6th ser., 16 (1994), 181-89. My thanks also to Ann Rycraft who has confirmed that, according to the researches thus far completed by the York Wills Group, no extant York wills make reference to medical books owned by or bequeathed to women (personal correspondence, 1 March 1996).

³⁰ J. N. Hillgarth, *Readers and Books in Majorca, 1229-1550*, 2 vols. (Paris: Éditions du C.N.R.S., 1991); my thanks to Cheryl Tallan for pointing out to me the pertinent contents of Alegra's Hebrew book (Table 1, item 43). I count 71 individual women book owners in Hillgarth's study, in contrast to his own count of 61 (pp. 44-45). I have also identified eight cases (none of them involving medical books) where an inventory was of a man and a woman together (usually husband and wife); in these cases, of course, it is not clear whether the man or the woman or indeed both together owned the books. There are also three cases of women who bought or previously owned books listed in others' inventories, plus two instances of books owned by nuns.

at least forty-nine of whom are not professional medical practitioners but rather noblemen, merchants, artisans and clerics. The majority of these books are in Latin, but there are some in the vernacular as well.³¹ Medical books in Majorca are thus the exclusive property of neither the professional medical classes nor the latinate elites, yet aside from Alegra they are not the property of women at all.³²

Studies on other areas of southern Europe concord with the Majorcan findings. For fourteenth- and fifteenth-century Barcelona, more than 500 documents have been collected recording book ownership. Of the forty-four individuals in possession of one or more medical books, eleven are medical professionals, twenty-five are laymen, and nine are of unknown occupation; only two are women, and in at least one case the book was inherited from a deceased husband and may never have been used by the women through whose hands it passed.³³ Similar results (with similar problems of confirming use rather than mere possession) have been found for Sicily.³⁴

The one area of Europe that presents a notable exception to the patterns I have just described is France. Of the twenty-seven French women whose booklists have been published, seven—nearly 26%—own medical books.³⁵ Moreover, as we shall see below, French was the most important language for texts addressed to women (14, perhaps 16 out of 51 texts total).³⁶ I will

³¹ Hillgarth, pp. 43-44, 89-96 and 261.

³² Several studies have suggested that medieval Jewish women may have had higher levels of literacy than their Christian peers; see especially Judith Baskin, "Some Parallels in the Education of Medieval Jewish and Christian Women", *Jewish History* 5 (1991), 41-51. Additionally, medical practice was a profession commonly engaged in by Jews, and it may well be that there were proportionately more Jewish women practitioners than Christian; see Joseph Shatzmiller, *Jews, Medicine, and Medieval Society* (Berkeley: University of California Press, 1994). Jewish women's relations with medical literature may therefore not have fully conformed to the general patterns for Christian women I am sketching here.

³³ Josep M.ª Madurell i Marimon, *Manuscrits en català anteriors a la impremta (1321-1474): Contribució al seu estudi* (Barcelona: Associació Nacional de Bibliotecaris, Arxivers i Arqueòlegs, 1974); and Josep Herando, *Llibres i lectors a la Barcelona del s. XIV*, 2 vols., Textos i Documents, 30-31 (Barcelona: Fundació Noguera, 1995). In tallying these figures, I have not counted duplicate documents. For the women, see Table 1, items 3 and 4.

³⁴ See Table 1, items 33-37. If Constantia Fica did indeed make use of the astounding thirty-nine medical books she inherited from her father, she may have been the most medically learned woman in medieval Europe!

³⁵ I have examined all the published book lists of French women listed in A.-M. Genevois, J.-F. Genest, and A. Chalandon, eds., *Bibliothèques de manuscrits médiévaux en France: Relevé des inventaires du VIII^e au XVIII^e siècle* (Paris: Éditions du C.N.R.S., 1987), together with several other published lists. My thanks to Mary Jane Morrow for assembling much of this material for me.

³⁶ See Table 2, items 20-21 regarding two English texts that may have had French

offer some speculations later about why the French case should be so strikingly different. Here I need to stress two points: (1) the French evidence of ownership constitutes the smallest database of published material, especially so in relation to its large medieval population; and (2) aside from the surgeon Perretta Petonne, all the women documented for France were noble or (in two cases) received their medical books directly from a noblewoman. In the case of France, therefore, we may be dealing with a phenomenon that is not characteristic of all French women who had some literate capabilities but only those of the very highest classes.

As with any aspect of medieval women's history, we must be frank about the inherent limitations of our evidence. As numerous scholars have noted, there are legitimate reasons for suspecting the comprehensiveness of medieval wills, inventories, library catalogues and even the corpus of extant manuscripts as evidence for ownership of books. In addition, several scholars have indentified reasons why women's ownership of books should be particularly hard to document. Carol Meale has suggested that women (at least in England) were less likely to write wills; when they did so, it was usually because they were widowed and so in direct legal possession of their property. The book-owning of married women would thus remain invisible.³⁷ Meale also suggests that because ability to read did not necessarily imply ability to write, women who owned books may not have signed their names in them or annotated them. Thus, even if women owned books at numerically the same rates as men, we would be unlikely to find evidence of it among extant manuscripts. Most of these arguments would apply to book ownership of every sort, however, giving us little reason to suspect that medical writings *per se* are any less represented within our body of evidence. Perhaps more pertinent to medical texts is the argument that wills will not necessarily document all the books owned by an individual but only those of religious value or those being passed down outside the normal lines of inheritance.³⁸

originals.

³⁷ Carol Meale, "... all the books that I have of latyn, english, and frensch": Laywomen and Their Books in Late Medieval England", in Meale, *Women and Literature* (n. 2 above), pp. 128-58. One might point out, however, that although this may have been true for England, it cannot be assumed for all of Europe (see the evidence from Tournai cited above). As Martha Howell has recently stressed emphatically ("Fixing Movables: Gifts by Testament in Late Medieval Douai", *Past and Present* no. 150 [February 1996], 3-45), wills must be treated as historically contingent documents, reflecting local inheritance customs, legal practices, and religious attitudes; some wills, in other words, are more reliable witnesses to certain kinds of property ownership or inheritance practices than others.

³⁸ See Tarvers (n. 2 above); and Goldberg (n. 29 above).

Liturgical and devotional books, moreover (to take the kind most commonly documented), would likely be the most ornate and so most expensive books in a personal collection, increasing the probability that they might show up in the extant sources. With the important exception of several richly illuminated copies of Aldobrandino of Siena's *Régime du corps* (see below), very few medical books have any illumination at all, let alone anything that can rival the luxury often found in books of hours, psalters or historical chronicles. If we assume, then, that medical books do not have any great spiritual or monetary value, then we might not expect to find them documented in most wills. It is notable, for example, that of the eleven French women known to have owned medical manuscripts between the fourteenth and early sixteenth centuries, six are known only because they were listed in their postmortem inventories. In only one case are medical books known because a French woman listed them in her will.³⁹ (This argument can, of course, also be used the opposite way, since postmortem inventories will also be more decisive in showing the *absence* of medical books. At least six further postmortem inventories of French women have been published, and these show no medical books at all.)

One further limitation common to both wills and inventories is that even if they list books individually, neither wills nor inventories will usually be concerned to itemize all the contents of a volume: they will list instead only the first or the largest text in the codex. This, too, poses a particular problem for identifying medical literature, since aside from general *Practicae* (encyclopedic collections describing diseases and their remedies, usually from head-to-toe) many medical texts would be rather limited in size, occupying a few leaves, perhaps a couple of quires, but rarely a whole volume that would be individually named. While such invisibility of small texts would not, of course, in and of itself be gender-specific, if women tended to own single medical texts embedded within collections of works of non-medical character rather than large medical compendia, their ownership of medical materials would consequently be harder to document.⁴⁰

Finally, the study of extant manuscripts poses its own difficulties. History, in this instance, belongs to the survivors, yet book survival though

³⁹ See Table 1, item 19.

⁴⁰ For example, London, British Library, MS Lansdowne 380, s. xvi in., where the medical content is almost invisible amidst the moral, devotional, and poetic works (see Table 2, item 44). Notably, however, most of the other brief texts *are* found in codices of primarily medical content, e.g., Thomas de Bourguignon's brief poem for the abbess and nuns of Maubuisson (Table 2, item 16), which is found with medical recipes in French and Latin and was later bound with Aldobrandino's *Régime du corps* and another French medical text (Paris, Bibliothèque Nationale de France, MS nouv. acq. fr. 6539, s. xiv).

"accidental" in most respects is nevertheless biased against women in others. Volumes donated to colleges, cathedrals and other male-controlled institutions will usually be favored in survival over those passed down familiarly.⁴¹ This is in and of itself not a factor that would especially bias medical books,⁴² so it cannot explain why *women's* medical books should be any more underrepresented than their other volumes. However, accidents of manuscript survival will also favor codices over pamphlets. The majority of medical texts addressed specifically to women, as we just noted, are quite brief; if they circulated independently, they would have done so as pamphlets or quite small codices. A distinctive feature of several English and Dutch gynecological texts addressed to women, for example, is that they appear as separate pamphlets, or they are found with one or two other brief (often non-medical) texts of "typically feminine" character.⁴³ Small size, therefore, together with the probable lack of illuminations, could conceivably have contributed to a higher rate of non-survival for women's medical books.

It is appropriate, therefore, to treat the various kinds of evidence for book ownership with some skepticism. However, when we "read across the sources"—when we look to other types of material for evidence of women's involvement with medical care and medical knowledge—we find, not a disjunction but rather reinforcement of the conclusions we have already drawn from ownership. The *kinds* of medical materials documented by wills, e.g. and the like are not all that different from the kinds of medical texts that are dedicated to women, and the latter are not so numerous as to suggest that the documentary evidence has led us radically to underestimate the amount of medical material in women's hands.⁴⁴ This overlap between documentary and textual evidence suggests the existence of a general ideology regarding women's expected involvement with medical knowledge and medical literature. As I noted earlier, there was no single hegemonic authority in high and later medieval western Europe that dictated what medicine was or should be. In speaking of an "ideology" of women's expected involvement with medical literature, therefore, I do not mean to imply that there was any conscious agenda—or any identifiable agent (whether individual or

⁴¹ Of the 67 owners of medical books in Cavanaugh's study, for example, 42 of the men gave their books to institutions; none of the women did. Of the 48 extant medical books listed there, at least 37 had been donated directly to institutions.

⁴² Though again the lack of lush illuminations might contribute negatively to survival.

⁴³ Table 2, items 25, 31, 32 and 46.

⁴⁴ See Table 3 for comparisons by genre and language. For a study very similar methodologically to this one (and one to which I am happy to acknowledge my indebtedness), see Dutton, "Passing the Book" (n. 29 above).

institutional)—that we can point to as the driving force in articulating and promoting this ideology. Nevertheless, as the following sections will suggest, I believe that medieval conceptions of the roles and nature of women offered little that encouraged the development of women's medical literacy.

A conceptual framework that may be useful for thinking about this body of evidence as a whole comes to us from gender studies. In recent years, scholars in women's history and gender studies more broadly have adopted a distinction between "sex" and "gender" to differentiate characteristics, behaviors, and functions that, on the one hand, are tied directly to the biological differences of sex (birth, lactation, differentials in body shape and size), and those that are culturally constructed, that mark out the roles and social responsibilities of "masculine" or "feminine" individuals.⁴⁵ Whereas sex, in this usage, is grounded in the physical body, gender is far looser: a male can be considered "feminine" in his decision to engage in housework, while a female can be "masculine" in her decision to work outside the home. What the notion of gender can also do is disrupt simple assumptions that biology is not mediated at nearly every turn by culture. To take the most obvious example, pregnancy is clearly sex-linked, but it is a *cultural* decision—hence a gendered one—to assign only other women to attend the woman in childbirth. The degree to which medical literature is intended to instruct males or females, or males *and* females, is thus also an element of the gender system (or systems) operative in medieval society. There can be areas of activity that have strong gender asymmetries and others that are only minimally "gendered". Male and female bodies are, of course, the sites in which sex is constituted, so it is to be expected that conditions and diseases that affect the sexual organs might be addressed in separate specialized treatises.⁴⁶ Who *reads* these treatises, however, and who applies this knowledge therapeutically is determined culturally—hence the necessity of proving women's historical use of gynecological and obstetrical texts rather than simply assuming it. There is, moreover, an important difference between the biologically-based conditions of the female reproductive tract and the socially-constructed issues of cosmetic care. As we shall see, these two areas may be differently gendered as the proper province of women's medical literacy. A third level of gendering is the degree to which non-sex-linked aspects of medical care are differentiated by the

⁴⁵ One study among many that lays out these theoretical concepts is Joan Scott, "Gender: A Useful Category of Historical Analysis", *American Historical Review* 91 (1986), 1053-1075.

⁴⁶ Specialized treatises on male sexuality include Constantine the African's *De coitu* and the anonymous *Liber minor de coitu*.

patient's sex. Since both males and females have bodies that are subject to infirmity, disease and death (and these often from many of the same causes), medicine has the potential to have a large gender-neutral element.⁴⁷ Finally, medical literature might be gendered in the differing expectations that men vs. women will take care of bodies other than their own: children, household servants, or even larger urban or political communities. What follows is a very preliminary attempt to sketch out the functions of gender in the literate culture of medicine.

Women and Domestic Medicine

A homey image in a fifteenth-century Belgian Biblical history shows a woman sitting in front of a fire, reading out of a book and stirring a pot while a man lies on a couch behind her. A second woman who appears to be a servant stands to the side with a tray or bowl. This scene has been interpreted by historians of medicine as a depiction of a wife concocting a remedy for her ailing husband. The illumination, it is assumed, reflects a normative scenario of medieval domestic medicine, a little vignette of the kind of care that women regularly provided for themselves and for their husbands, children, and servants as part of their domestic responsibilities. The conclusion we are to draw is that domestic medicine was gendered as female in medieval Europe, and that whatever literate skills women had would obviously be directed toward fulfilling these wifely duties.⁴⁸ I would argue, instead, that while this typical bourgeois woman may have had some

⁴⁷ As I suggest below, however, what often seems at first sight "gender-neutral" turns out to be based solely on the male model. Female difference is denied or disregarded.

⁴⁸ A sketch of London, British Library, MS Royal 15 D.I, f. 18r, appears in Kate Campbell Hurd-Mead, *A History of Women in Medicine, from the Earliest Times to the Beginning of the Nineteenth Century* (Haddam, Conn.: Haddam Press, 1938; repr. New York: AMS Press, 1977), between pp. 196 and 197. A photographic reproduction appears as the frontispiece to Muriel Joy Hughes, *Women Healers in Medieval Life and Literature* (New York: Columbia University Press, 1943; repr. Freeport, New York: Books for Libraries Press, 1968). The image is reproduced with the same implied interpretation in Peter Ketsch, ed., *Frauen im Mittelalter*, 2 vols. (Düsseldorf: Schwann, 1983-84), vol. 2, 259, where it is identified as "Frauen bei der Zubereitung eines Heiltranks"; and (in color) in Carole Rawcliffe, *Medicine and Society in Later Medieval England* (Phoenix Mill: Alan Sutton, 1995), plate 16. Interestingly, the plate is also reproduced in the 1986 edition of Eileen Power's *Medieval People* (London: Methuen, 1986), p. 116, with the heading "The Ménagier [of Paris]'s wife cooks his supper, with the aid of his book". In a later note (p. 199), the proper referent is clarified as "Tobit, sick and blind, is lying in bed, and his wife Anna is cooking by the fire, with the help of a book and a serving maid".

kind of collection of recipes inserted in her household book and may even have had a brief manual to help her maintain her health, she would be unlikely to have had a handbook of general medicine in her tiny library of books. Indeed, it is questionable whether she even had specialized texts on women's medicine to cure her own gynecological ills. Her husband, as a bourgeois male, may have owned such books himself, but there is little reason to suppose that his wife would have, or even could have, read them.

It is necessary, first of all, to clarify a fundamental misreading of this scene. The first use of this image as proof of women's medical reading seems to have been by Kate Campbell Hurd-Mead in her 1938 *History of Women in Medicine, from the Earliest Times to the Beginning of the Nineteenth Century*. Hurd-Mead labeled the image "Tobit and Anna, or The Lady as Physician. Tobit is in bed. Anna concocts medicine for him, according to a prescription book on her knee. The nurse stands by". Hurd-Mead identified the book from which this illustration comes as a copy of the *Historia Scholastica*; later historians have provided no identification at all. What all of them have glossed over is the fact that the scene is meant to depict the moment when Tobit, having returned home after a hard day of work, is blinded by the hot droppings of a swallow that fall into his eyes while he is napping. (Importantly, in Hurd-Mead's sketch, the swallow and its droppings have been omitted; in Hughes's 1943 reproduction, the swallow has conveniently been cropped out—the white droppings hanging in mid-air thus seem to be merely inadvertent smudges on the page.⁴⁹ In Rawcliffe's 1995 reproduction, the swallow remains but there is no identification of the figures as Tobit and Anna so that the significance of the swallow is impossible to discern.) In the accompanying text of this historiated Bible, there is nothing to describe Anna's reaction after the blinding.⁵⁰ Temporally, the scene is one of imminent danger lurking within a moment of domestic tranquillity, not one of an attempt at healing that may have come after the injury. There is nothing in the picture, therefore, to allow us to presume that the book Tobit's wife is holding is of specifically medical content rather than, as seems more probable, a cookbook.⁵¹

⁴⁹ Hughes reprinted the manuscript illumination from Dorothy Hartley and Francis Kelly, *Medieval Costume and Life* (London: Batsford, 1931) and may have been ignorant of its original source. She apparently thought the image was self-explanatory since she offered no exegesis on it, not even to say what the text was with which it appeared.

⁵⁰ MS Royal 15 D.1, ff. 19vb-20ra: "Ung jour ainsique thobie estoit reuenu moult traueillie de corps en foyur ou sepulturur se ietta sur vng lit et sendormiy. Et aduint que la fiente chaulde dune aronde luy chey es yeulx si aueugla". The only activity of his wife Anna that is mentioned is that she began to work silk to make money after his blinding. Cf. *Book of Tobit* 2:9-10.

⁵¹ Rawcliffe, p. 179, identifies the volume as a commonplace book, though, as I

Muriel Hughes in particular, writing in 1943, may have been encouraged in her "reading" of the Tobit scene because of the image of domestic medicine she formed from the correspondence of the Paston women. In the letters to and from the male and female members of the Paston family, an up-and-coming fifteenth-century family of English gentry, Hughes found passing references to health concerns and medicaments to be purchased or made.⁵² A similar image can be found in the correspondence of the Stonor women in England in the late fifteenth and sixteenth centuries, and in the letters exchanged between a sixteenth-century mother and daughter in Spain.⁵³ Indeed (as we shall see later), the collecting of family remedies seems to have turned into a veritable feminine genre of publication in the

have already mentioned, she interprets the scene as medical without mentioning its manuscript context. To be sure, cookbooks had their importance in medieval medical practice. We know from extant manuscripts that cookbooks and the so-called "household books" regularly contained at least a few medicinal remedies, a connection all the more significant since control of diet was one of the pillars of medieval notions about how health was properly to be maintained. See, for example, Terence Scully, "The Sickdish in Early French Recipe Collections", in Sheila Campbell, Bert Hall, and David Klausner, eds., *Health, Disease, and Healing in Medieval Culture* (New York: St Martin's Press, 1992), 132-40; and Melitta Weiss Adamson, *Medieval Dietetics: Food and Drink in 'Regimen sanitatis' Literature from 800 to 1400*, German Studies in Canada, 5 (Frankfurt am Main & New York: Peter Lang, 1995). However, it is just as much a mistake to view cookbooks as a "female genre" as it is to make that claim about medical books. As Bruno Laurioux has shown, formal cookbooks are meant to display the prestige of the master of the household and were not necessarily used by those who actually did the cooking; not surprisingly, most known owners are male. See Laurioux, *Le règne de Taillevent: Livres et pratiques culinaires à la fin du moyen âge* (Paris: Publications de la Sorbonne, 1997).

⁵² Hughes, *Women Healers*, pp. 45-50. On p. 46, Hughes claims that the Paston women's medical knowledge came from "neighbors, apothecaries, and books of physic of the type which Sir John had copied for them" (my emphasis). The only reference to a book in a medical context in the Paston women's letters is Margaret's request, probably in 1452, that her husband (John I, 1421-66) send her a book with a recipe for quince preserves which she wants because the air in Norwich is unhealthy; there is no indication of what the principal contents of the book are. See Norman Davis, ed., *Paston Letters and Papers of the Fifteenth Century*, 2 vols. (Oxford: Clarendon, 1971-76), document 144 (1:246). Elaine E. Whitaker, "Reading the Paston Letters Medically", *English Language Notes* 31/1 (1993), 19-27, similarly cites this letter and Sir John's book as her sole evidence for the claim that the Paston women were "bookish in their approach to healthcare" (p. 22). As I shall suggest below, it is highly unlikely that Sir John's book was ever used by the women of his family.

⁵³ Christine Carpenter, ed., *Kingford's Stonor Letters and Papers, 1290-1483* (Cambridge: Cambridge University Press, 1996), p. 45 (letter 208); Maite Guisado, ed., *Estefania de Requesens, Cartes íntimes d'una dama catalana del s. XVI: Epistolari a la seva mare la comtessa de Palamós* (Barcelona: La Sal, 1987), pp. 36, 114-16, and 159. My thanks to Barbara Harris and Montserrat Cabré i Pairet, respectively, for these references.

sixteenth century and later. But rather than viewing this association between women's medical practices and the written word as a *constant* phenomenon, I would suggest quite to the contrary that such correspondence (which is relatively new to this class of women in the late medieval period)⁵⁴ "catches" in writing discourses that hitherto had been entirely oral. I will return to the question of orality at the end of this essay. Here it simply bears repeating how extremely slight our evidence is for women as medical writers in the medieval period,⁵⁵ in contrast to the areas of religious devotion and courtly belles-lettres where women's socially-sanctioned participation occasionally encouraged female authorship. To be sure, it has often been noted how frequently women are represented as healers in high medieval romances and other literary texts. Yet as far as I can determine, in no case are these women portrayed as consulting medical *books*. As efficacious as their knowledge may be, it is usually either empirical or strictly magical.⁵⁶

Medicine figures quite minimally in medieval handbooks that instructed women on proper feminine duties. The Knight of the Tour Landry, instructing his daughters in 1371-72, gives them the example of the Countess of Anjou who would visit the sick and women in childbed and give them alms and food, but there is no indication that she herself treated them. On the contrary, she had her surgeons and physicians do this charitable healing for her.⁵⁷ The Goodman of Paris, writing ca. 1393, includes several recipes for drinks and porridges for the sick in his book of instructions to his young wife, yet he commands her merely to "look after" the health of their servants, not necessarily to provide all their medical care herself.⁵⁸ Even

⁵⁴ Joan Ferrante of Columbia University (New York) has announced a comprehensive listing of all medieval women's correspondence, which will allow exploration of this issue in the future.

⁵⁵ See Green, "Books as a Source" (n. 16 above).

⁵⁶ Hughes, *Women Healers*, pp. 50-61 and 96-99. The only female figures who lay claim to formal medical knowledge are Josian in *Beves of Hampton*, who is said to have been trained in "fysik and sirgirie" by masters from Bologna and Toledo, and Melior in *Partonope of Blois*, who claims to know the seven liberal arts and the elemental properties of herbs; see Hughes, p. 97. For more recent assessments of women healers in literature, see Peggy McCracken, "Women and Medicine in Medieval French Narrative", *Exemplaria: A Journal of Theory in Medieval and Renaissance Studies* 5 (1993), 239-62; and Bernhard D. Haage, "Die heilkundige Frau in Dichtung und Realität des deutschen Mittelalters", *Würzburger medizinhistorische Mitteilungen* 11 (1993), 107-32.

⁵⁷ M. Anatole de Montaiglon, ed., *Le Livre du chevalier de la Tour Landry pour l'enseignement de ses filles* (Paris: P. Jannet, 1854), pp. 200 and 275.

⁵⁸ G. E. Brereton and J. M. Ferrier, eds., *Le Menagier de Paris* (Oxford: Oxford University Press, 1981); text reprinted with modern French translation in Karin Ueltschi, trans., *Le Menagier des Paris* (Paris: Livre de Poche, 1994), pp. 760-69.

Christine de Pizan, the daughter and granddaughter of physicians, rarely alludes to medical concerns in her 1405 conduct guide for women of all social classes. Noblewomen should, out of charity, visit hospitals and the sick, and they should be sure to talk to their husband's physicians to keep themselves informed of the state of his health. But the only medical practice by women she mentions is her recommendation to prostitutes that they might make a more honorable living by looking after the sick and women in childbed.⁵⁹ Obviously, the prescriptive statements of the Knight, the Goodman and de Pizan can hardly be considered indicative of real noble or bourgeois women's practices. But as prescriptive literature, as idealizations of how a woman *should* conduct her duties as a wife or widow, it is notable that all three stress reading of devotional works, but none emphasizes possession of, let alone mastery of, medical literature.

Far from relying solely on their own medical skills for their healthcare, the women to whom such conduct books were addressed (and who owned books in the greatest quantity) would have probably made considerable use of professional medical practitioners. Women of the upper classes often had prominent, university-trained doctors as their personal physicians and surgeons, some of whom even supervised their births. As early as 1101, Matilda, wife of Henry I of England, was attended by two Italian male physicians at the birth of her first child.⁶⁰ In 1400 a certain Nicolas, physician to William of Bavaria, count of Ostrevant, assisted the count's wife, Marguerite of Bourgogne, at her lying-in.⁶¹ Some medical entourages were quite considerable: Jeanne de Bourgogne (1311-1348), first wife of Philip VI of France, had over the course of her twenty-year marriage at least six different personal physicians in her employ.⁶² Even many of the known

⁵⁹ Christine de Pizan, *Le Livre des trois vertus*, ed. Charity Cannon Willard and Eric Hicks, Bibliothèque du XVe siècle, 50 (Paris: Champion, 1989), pp. 24, 52-54, 56, and 214. De Pizan mentions noble and bourgeois women's social obligations to visit other women during their lyings-in (*gesines*), but does not imply their actual assistance with birth (pp. 71, 88, 176, 184-6). For wonderfully rich evidence for the social customs surrounding birth in northern Italy during this period, see Jacqueline Marie Musacchio, *The Art and Ritual of Childbirth in Renaissance Italy* (New Haven & London: Yale University Press, 1999).

⁶⁰ Edward J. Kealey, *Medieval Medicus: A Social History of Anglo-Norman Medicine* (Baltimore and London: Johns Hopkins University Press, 1981), pp. 18-19.

⁶¹ Ernest Wickersheimer, *Dictionnaire biographique des médecins en France au Moyen Age*, 2 vols. (1936; repr. Geneva: Librairie Droz, 1979), 2:564.

⁶² Danielle Jacquart, "Medical Practice in Paris in the First Half of the Fourteenth Century", in *Practical Medicine from Salerno to the Black Death*, ed. Luis Garcia-Ballester, Roger French, Jon Arrizabalaga, and Andrew Cunningham (Cambridge: Cambridge University Press, 1994), pp. 186-210, at p. 210.

women owners of medical books can be shown to have employed professional male practitioners. Blanche of Anjou (d. 1310), who commissioned a Catalan translation of her husband's Latin health regimen, had a male physician at hand for most of her ten deliveries.⁶³ Elizabeth de Burgh (d. 1360), who owned three surgical books plus the Latin *Rosa anglica* of John of Gaddesden, employed the physician Simon Bredon in her household.⁶⁴ Lewis Caerleon attended not only Queen Elizabeth, wife of Edward IV, but also Elizabeth of York (1466-1503), wife of Henry VII, who may have owned a copy of Aldobrandino of Siena's *Régime du corps*, and Lady Margaret Beaufort (1443-1509), Henry's mother, who owned a collection of Latin and English plague tracts.⁶⁵ Bourgeois women, too, increasingly had access to professional medical care in many urban communities throughout western Europe: municipalities and guilds appointed physicians, surgeons and midwives to attend to the community, while private individuals (especially in southern Europe) drew up contracts with physicians that in effect provided them with medical insurance.⁶⁶ Perhaps, as in the case of Blanche of Anjou, employment of a male physician was opted for not by the woman herself but by her husband. It is also evident that there were many levels of medical care that could have been at play in any one household. Between self-care and employment of a university-trained physician there would have been multiple options available: medicaments purchased from an apothecary, assistance in childbirth by a midwife, reliance on prayers or charms.⁶⁷ The point is that women's ownership of medical books did not preclude the employment of professional (most commonly

⁶³ Michael R. McVaugh, "The Births of the Children of Jaume II", *Medievalia* 6 (1986), 7-16. See Table 1, item 1, and Table 2, item 19.

⁶⁴ Table 1, item 6.

⁶⁵ On Caerleon, see Pearl Kibre, "Lewis of Caerleon, Doctor of Medicine, Astronomer and Mathematician", *Isis* 43 (1952), 100-8. For Margaret's and Elizabeth's books, see Table 1, items 11-12. As she could not read Latin, it seems likely that Margaret acquired her volume ready-made from a bookseller. See the study by Voigts cited in n. 121 below for other examples of such "mass production" of medical books combining English and Latin.

⁶⁶ See, for example, Katharine Park, *Doctors and Medicine in Early Renaissance Florence* (Princeton: Princeton University Press, 1985); Michael R. McVaugh, *Medicine Before the Plague: Practitioners and Their Patients in the Crown of Aragon, 1285-1345* (Cambridge: Cambridge University Press, 1993); and Shatzmiller, *Jews* (n. 32 above), pp. 124-31. On the employment of professional medical practitioners by nuns, see Green, "Books as a Source" (n. 16 above).

⁶⁷ For an example of the multiple options in play for a single case of sterility, see Katharine Park, "Medicine and Magic: The Healing Arts", in Judith C. Brown and Robert C. Davis, eds., *Gender and Society in Renaissance Italy* (London: Longman, 1998), pp. 129-49.

male)⁶⁸ practitioners while, alternately, the fact that such women knew they could call on a professional healer's esoteric knowledge when they needed it may have mitigated against directing their literary skills toward intensive study of medical texts on their own.

Medical Texts for Women

It is thus not surprising that when we turn to the evidence for medical texts addressed to or commissioned by women (Table 2), we find that these fifty-one texts are, for the most part, works intended to help women maintain their health or works that offer basic information on self-treatment but no rationalized explanations of how the body functions or why medicinal substances work.⁶⁹ This is a rich corpus of material and it raises any number of questions about the genesis, circulation, and use of medical works for women. Foremost among these is their historical value itself. Not all of the claims of intended audience carry equal weight as historical evidence for women's relationships with medical writings. At least one declaration of female destination is outright fictitious, and others may prove to be so upon further philological study of the texts.⁷⁰ Nevertheless, I have included even

⁶⁸ There are, of course, important exceptions. On the Jewess Floreta who attended the Queen of Aragón in 1381, for example, see Nancy G. Siraisi, *Medieval and Early Renaissance Medicine: An Introduction to Knowledge and Practice* (Chicago: University of Chicago Press, 1990), p. 31. Mahaut, the countess of Artois, paid a barber named Marguerite 6 s. in 1310 "pour garir le petit Pieret de sa teste"; see Wickersheimer (n. 61 above), 2:537.

⁶⁹ I have chosen to omit the two medical writings of Hildegard of Bingen (1098-1179) from this list for the simple reason that there is no explicit statement in either the *Physica* or the *Cause et cure* that they were intended to be used by the nuns of the Rupertsberg or any other female community. Victoria Sweet has recently made the interesting suggestion that the timing of composition of the texts—around Hildegard's fifty-first year—coincides with the establishment of Hildegard's new community at the Rupertsberg and suggests that the works were composed for the immediate purpose of providing medical texts for her fledgling community of independent nuns. See "Hildegard of Bingen and the Greening of Medieval Medicine", *Bulletin of the History of Medicine* 73 (1999), 381-403. Nevertheless, though a copy of Hildegard's medical writings seems to have remained at the Rupertsberg throughout the Middle Ages, there is no evidence that her works circulated among other female communities; see Green, "Books as a Source".

⁷⁰ Table 2, item 14. Even if the fiction of Dinah's "dialogue" with her father in the Hebrew *Sefer ha-Toledet* can allow us to consider this text "female-addressed" (Table 2, item 4), the genesis of the text was clearly due to its male author's sense that there was need for works in Hebrew; there is no evidence that any historical woman was involved in its composition or, for that matter, ever read it. See Ron Barkai, *A History of Jewish Gynaecological Texts in the Middle Ages* (Leiden: Brill, 1998).

the dubiously attributed texts since they assume that association with a female figure (or at least a *royal* female figure) will be beneficial to the success of the text. What strikes us most immediately in comparing the texts owned by women to those addressed to them (Table 3)⁷¹ is the existence of sex- or gender-specific texts (gynecology, obstetrics, and cosmetics) for which we have no explicit documentation in the surviving evidence of book ownership.⁷² More predictable, given what we already know about other areas of women's reading, is the predominance of the vernaculars over Latin.⁷³

A comprehensive analysis of all these diverse texts is obviously far beyond the scope of this essay, especially since the majority have never been edited. I would nevertheless like to draw a preliminary sketch of what these texts can tell us about the gendering of medical literacy between the twelfth and early sixteenth centuries. A closer look at two of the longest texts addressed to women will give some sense of the degree to which such works were, or were not, intended to allow women entree into knowledge of the workings of the body and intellectual independence. The first text raises the question of the extent to which women's medical reading differed at all from men of the same social class and the same "layness" with respect to a technical, increasingly theorized body of knowledge. The second text presents a type of medicine more immediately tied to the female body and feminine social roles and therefore raises the question of what a separate feminine culture of literate medicine might have looked like.

⁷¹ In Table 3, I count every instance of ownership, not simply the number of discrete books. Thus, when one woman passes a book to another, this counts as two instances of ownership.

⁷² The other anomaly, of course, are the several cases of ownership of texts on theory, praxis, and surgery in numbers so large as to seemingly overwhelm several other categories. As I suggested earlier (p. 13), however, I suspect that many of these are cases where a woman has inherited medical books from a husband or father and is unlikely to have made use of them herself. See, however, the Conclusion below.

⁷³ The use of Latin is limited to three texts of the twelfth century, when Latin was still regularly used by non-clergy (Table 2, items 1-3); two reworkings of earlier Latin texts in the thirteenth century, at least one of which was explicitly meant to be *read to* women (items 6 and 13); and two works on fertility written around the turn of the sixteenth century, when humanist education was again producing latinate women among the upper classes (items 40 and 48). In two cases, the Latin-vernacular transfer is clearly tied to a male-female transfer (items 19 and 29). Cf. also the specious claims to translation in items 14 and 39. One of the French translators of the *Liber de sinthomatibus mulierum* (Table 2, item 8, one of the so-called *Trotula* texts) explicitly claims that "I have rendered this book into a language which [women] understand, so that some women would know how to aid others".

Audiences of Regimens of Health

The thirteenth-century French *Régime du corps* ("Regimen of the Body") belongs to a popular medieval genre of medical writing known as the regimen of health.⁷⁴ The *Régime du corps* is the earliest of these regimens known to have been composed in French and it enjoyed an exceptionally widespread popularity up through the end of the Middle Ages. It was written before 1257 by Aldobrandino of Siena (d. ante 1299). The prologue claims that the text was prepared for Béatrix of Savoy (d. 1287), countess of Provence—for whom Aldobrandino served as personal physician—on the occasion of her visit to her four daughters: Marguerite, wife of Louis IX of France; Eleanor, wife of Henry III of England; Sanchia, wife of Richard of Cornwall; and Béatrix, wife of Charles of Anjou.⁷⁵ Presumably, though her copy does not seem to have survived, Béatrix herself was the first female owner of the text, and given the context of its genesis it would not be improbable to imagine that she had copies made for her four daughters.

Moreover, it seems that the *Régime* continued to function as a "woman's text". Although only five of the seventy-one surviving copies can be documented to have been in the hands of women (and these not before the fifteenth century),⁷⁶ in several other cases female ownership (or composition for a female user) seems possible. In one fourteenth-century manuscript with the original account of the text's genesis for Béatrix, the *Régime* is followed by two brief texts on the Virgin, exactly the kind of devotional reading most typically found in women's hands.⁷⁷ Even without the dedicatory

⁷⁴ For a splendid introduction to the whole genre, see Pedro Gil-Sotres, Juan A. Paniagua, and Luis García-Ballester, "Introducción", in Luis García-Ballester and Michael R. McVaugh, eds., *Arnaldi de Villanova opera medica omnia, X.I: Regimen sanitatis ad regem Aragonum* (Barcelona: C.S.I.C., 1996).

⁷⁵ Table 2, item 12. Only six of the forty-four relatively complete manuscripts of the French *Régime* bear the full prologue which names the author and specifies the circumstances of the text's composition.

⁷⁶ Table 1, items 10, 12, 28, 40, and 41-42; see also Table 1, n. x. My assessments of ownership are based solely on catalogue descriptions of the manuscripts. A full-scale history of the circulation of the *Régime* is needed, with a gender analysis of the programs of illustrations being a particular desideratum. This is equally true of the Italian tradition, where four different translations were made; see n. 99 below.

⁷⁷ Florence, Biblioteca Medicea Laurenziana, MS Ashburnham 1076, s. xiv. In contrast, the contents of the other four manuscripts with the original prologue contain no material that conforms to the "typically feminine" kinds of texts I outlined earlier in this essay. One manuscript is a scientific collection: Gossuin de Metz's *Image du monde* (a treatise on geography, meteorology and astronomy), a work on chronology, and tracts on algorism and geometry. One copy has medical recipes, some of which are in Latin. Another has medical recipes (some of which again are in Latin), a Latin regimen of health, a French *Letter of Hippocrates to Caesar* (a pseudepigraphic regimen), some recipes on domestic

announcement—that is, with no particular "signal" of feminine orientation—codicological indications suggest possible female ownership. One thirteenth-century manuscript situates the *Régime* alongside several other French medical texts plus an Anglo-Norman *Life of Saint Margaret*. According to legend, Margaret was expelled painlessly from the mouth of a dragon, her miraculous deliverance thus earning her a role as patron of women in childbirth. Her *Life* would aid in deliverance if read to a woman in labor. The particular association of this manuscript with childbirth seems apparent from a note on the births of Saint Anne and her daughter which a different hand has added underneath the chapter of the *Régime* that treats the nature of milk, and again underneath some additional recipes for obstetrical problems.⁷⁸ In a late fifteenth-century copy from Malines, the *Régime* is followed by a French herbal and then by an assortment of mostly gynecological and cosmetic recipes in French and Dutch.⁷⁹

Certain adaptations of the *Régime* likewise seem to have been directed toward female audiences—or rather, mixed audiences of males and females. An adaptation dating from perhaps the late fourteenth century is entitled *Lien du corps a l'ame et de l'ame au corps* ("The Connection between the Body and the Soul and between the Soul and the Body"). Here, the *Régime* was conflated with a devotional text, producing a unique exegesis on spiritual and physical health. The earliest extant copy of this version (produced in the late fourteenth century) was owned in the early sixteenth century by Margaret of Austria (1480-1530); it is not known how she acquired it, nor whether it had been passed down through a female line prior to her ownership. In another copy of this same version, written in the late fifteenth century, a contemporary reader/owner described the text as one intended for "plusieurs hommes et femmes prudent". This latter copy has spaces left for the addition of insignia; these were never added so we are ignorant of the original owner, though the two full-page illustrations depicting male figures offer nothing to

economy and an Anglo-Norman translation of the lapidary attributed to Marbode of Rennes. This last codex had in the fifteenth century two different male owners (see below).

⁷⁸ On this manuscript (London, British Library, MS Sloane 1611), see Paul Meyer, "Notice du MS Sloane 1611 du Musée Britannique", *Romania* 40 (1911), 531-58; and Jocelyn Wogan-Browne, "'Clerc u lai, muine u dame': Women and Anglo-Norman Hagiography in the Twelfth and Thirteenth Centuries", in Meale, *Women and Literature* (n. 2 above), pp. 61-85, at pp. 78-79 n. 10. The annotations about Saint Anne appear on ff. 136v-137r and 145v-147r.

⁷⁹ London, British Library, MS Sloane 3152, an. 1492 (Malines). The manuscript ends with a colophon naming the scribe (one Adrien); unfortunately, the line that may have contained the owner's name has been erased.

suggest that the manuscript was prepared for a female recipient.⁸⁰ Another fifteenth-century copy, in contrast, did have the insignia added. This manuscript belonged to Adolphe de Clèves, Lord of Ravestein (1425-1492), nephew of Philip the Good and cousin of Charles the Fearless, confirming that this version could indeed serve the needs of both "hommes et femmes prudent".⁸¹ Another late medieval adaptation of the *Régime* bears explicit appeals to both male and female readers: "Je dy aussi deuant tous, et deuant toutes", and "Et sachient tous ceulx et celles, Que se traictre liront".⁸²

While it is thus quite likely that women constituted an important audience for the French *Régime du corps*, as these last examples indicate it would be a mistake to characterize the *Régime* universally as a "woman's text" and assume, consequently, that this popular work circulated *only* among women. Internally, there is little about the *Régime* to suggest that it was originally intended to meet the needs of women in particular. Almost all the references to sexual relations refer only to the male or are written from the male perspective; there are few gynecological remedies; the chapter on regimen of pregnancy is vague; and there is nothing whatsoever on assistance at normal birth. Beyond the inclusion of instructions for dyeing the hair, Aldobrandino seems to have given little thought to the differing medical concerns or even perspectives of women when he wrote the text. The instructions on choosing a wetnurse, for example, could have been just as useful to the male head of a household as to the expectant mother.⁸³

It is thus hardly surprising to find that the *Régime du corps* came to serve the needs of male readers with no substantial alteration other than the

⁸⁰ Vatican, Biblioteca Apostolica, MS Pal. lat. 1990, s. xv ex. (Flanders).

⁸¹ Valenciennes, Bibliothèque Municipale, MS 329, s. xv.

⁸² London, British Library, MS Lansdowne 380, s. xvi, ff. 263r-268v; quoted passages from f. 267v and f. 268r, respectively. This "enseignement" on sexual relations is followed immediately by a tract on infertility adapted from one of the *Trotula* texts; although this latter text does not address female readers explicitly, female ownership of the manuscript nevertheless seems possible. It contains short moral texts (including a *Doctrinal des filles*), pious works (including a *Vie de sainte Catherine*), lyrics, and various brief medical notes.

⁸³ Françoise Fery-Hue observes that "rien, dans le text du *Régime du corps*, ne permet réellement d'y voir un traité composé spécialement pour une princesse, c'est-à-dire une femme"; see Françoise Fery-Hue, "Le *Régime du corps* d'Aldebrandin de Sienne: tradition manuscrite et diffusion", in *Actes du 110e congrès national des Sociétés savantes (Montpellier, 1985), Section d'histoire médiévale et de philologie*, t. 1: *Santé, médecine et assistance au Moyen Age* (Paris: Editions du C.T.H.S., 1987), pp. 113-34, at p. 114. For an early fourteenth-century regimen of health composed for a male patron that has a comparable amount of obstetric and pediatric content (indeed, it opens the text!), see Giovanni Carbonelli, ed., *Il 'De sanitatis custodia' di Maestro Giacomo Albini di Moncalieri* (Pinerolo: Tipografia Sociale, 1906).

removal of the prologue claiming intended female use. For every manuscript bearing the assertion that it was written expressly for Béatrix of Savoy, there are at least six that lack it. Male owners are amply documented. While we do not know whether such early owners as the physician Anthony of Padua in the late thirteenth century or the Parisian bourgeois Pierre and Philippot de Tongres in the mid-fourteenth century actually commissioned the copies they owned, many copies in the fifteenth century were clearly produced for male recipients: Charles Somerset, Earl of Worcester; Guillaume Le Roux, viconte de Nevers; Francesco Gonzaga; and Henry VII of England.⁸⁴ In the last quarter of the fifteenth century a Flemish scriptorium seems to have mass-produced a special version for noble recipients, the majority of whom were male.⁸⁵ Yet another branch of the manuscript tradition bears a claim to have been written not for countess Béatrix but for the Emperor Frederick the Great; known owners of this version include one Hugues de Salve and John Fastolf (1377-1459).⁸⁶ Even without the removal of the preface, the text seems to have been freely used by men. A richly illuminated early fourteenth-century copy of a version that retains a reference to Béatrix was in the early sixteenth century in the possession of Jean Nerjot de Myge, a resident of Bruges, who noted that it had been loaned to him by Maris Jouris, mother of one Jaqueline.⁸⁷ In the late fifteenth century, a copy bears the conjoined arms of Richard Brugys (or Bridges) of Leglo (Herefordshire) and his wife Margaret.⁸⁸

Aldobrandino's *Régime du corps* functioned, then, as handbook for the maintenance of health for laypersons of both sexes. It may well be that Aldobrandino's work contributed to—and perhaps even stimulated—a

⁸⁴ Males are also documented as owners later in certain manuscripts' histories: for example, London, Wellcome Institute for the History of Medicine, MS 32, s. xiv med., whose original owner is unknown, was owned in the latter half of the fifteenth century by, respectively, Jehan Perrault of Chalon and Johan Cherizier, "mestre bachelier escolier".

⁸⁵ See Fery-Hue (n. 83 above), p. 125, regarding the Anglo-Flemish "remaniement". Five out of the seven extant copies of this version bear the coats of arms of male noblemen. Another copy seems to have been produced for a female recipient (see n. 79 above).

⁸⁶ London, Wellcome Institute for the History of Medicine, MS 31, an. 1390 (Paris), copied for Hugues by Jean Quatredens; and Oxford, Bodleian Library, MS Bodley 179 (SC 2074), s. xv¹, which may have been copied for Fastolf when he was part of the occupying English force in France in the 1420s and 1430s. Despite its orientation toward lay needs, the *Régime* was also owned by physicians, such as Anthony of Padua and Jacques de Plaisance (d. 1348, bishop of Zagreb), the first successive owners of Zagreb, Metropolitanska knjznica, M. R. 92 (ante 1274, N. Italy).

⁸⁷ Table 1, item 40.

⁸⁸ Table 1, item 10.

tradition of medical reading in French among female readers. As I noted earlier, a third of known medical texts addressed to women are in French, and French (and French-speaking) women are the most densely represented group among female owners of medical books.⁸⁹ The earliest known vernacular texts specifically addressing women's concerns are in French and in fact may predate Aldobrandino's work by several decades.⁹⁰ Moreover, if their prefatory claims have any historical basis, we can view the texts associated with Isabella (d. 1358), daughter of Philip IV (the Fair) of France and wife of Edward II of England (r. 1307-1327), and with Philippa of Hainault (d. 1369) as examples where French-speaking women "exported" literate medical culture to other lands.⁹¹

But leaving aside the texts on "women's medicine", there is nothing about the French textual tradition that constructs a *particularly feminine* medical culture. None of these texts construct women as the primary caretakers of their families, none of them imply women's special knowledge or competence in medical matters or suggest that, as women, female readers have the obligation to inform themselves thoroughly about the nature of disease or the vast fund of therapeutic knowledge. On the contrary, these texts—in their silence on these issues—seem to assume that female readers are responsible for nothing more than care of themselves as individuals. In terms of what they own, French women may have dietaries, herbals, tracts on medicinal stones and waters, receptaries, and personal regimens, but there is no instance of a woman commissioning translations of works of any more theoretical or technical sophistication. Certainly, all the texts women own could be used to care for the ills of members of their households. But French women have no texts that treat "public health" concerns such as tracts on the prevention of plague,⁹² nor does anyone seem to expect that French women's maternal concerns should be supported with pediatric information.⁹³ In fact,

⁸⁹ In addition to the women residing in what is now France, we should add such French speakers as Margaret Courtenay, countess of Devon (Table 1, item 7, whose unidentified "livre de medycyn" may have been in French), and many women of the southern Low Countries (items 38-42).

⁹⁰ Table 2, items 7-11. See below.

⁹¹ Table 2, items 20-22. On this concept of women as exporters of literate culture, see Bell, "Medieval Women Book Owners" (n. 2 above).

⁹² Margaret Beaufort is the only documented owner of any texts that address the causes of plague or efforts at predicting it (Table 1, item 11). The German tract on plague written for a woman of Plauen (Table 2, item 23) deals only with prophylactic measures to be taken by an individual, not broader "public health" or therapeutic measures.

⁹³ The only texts that include pediatric information are of the 15th century (Table 2, items 37, 42, and 48); none is in French. Note that Michele Savonarola's "vernacular" text addressed to Ferrarese women in fact has frequent passages in Latin, while Bonacciuoli's is completely in Latin.

the French evidence seems to suggest that French (or French-speaking) women stand out from their peers elsewhere mostly in being more broadly educated as *laywomen*, not because they actually resemble professional practitioners in their advanced medical knowledge or because they have any access to the learning of the universities.

The gendering of medical literacy suggested by the circulation of Aldobrandino's *Régime du corps* seems to be paralleled by other works in the genre of the regimen of health. These seem to have functioned less as exclusive guides for female readers than as guides for male readers. The brief medical excerpt from the *Secretum secretorum* produced for Queen Tharasia of Spain in the early twelfth century had an extremely wide circulation in the following centuries, yet the majority of copies are found in university or male monastic settings.⁹⁴ The full text of the *Secretum secretorum* (translated ca. 1230 by Philip of Tripoli) combined the regimen of health with other counsel for princes, and had an even more phenomenal popularity; yet aside from a very intriguing translation made by a thirteenth-century German nun, there is little evidence that this text ever circulated among women.⁹⁵ In 1286, Thomas le Bourguignon followed Aldobrandino's lead in composing an 800-line verse regimen for a female recipient (in this case the abbess and nuns of Maubuisson), though it was also addressed to the clergy and lay brothers of the male house of Saint Martin de Pontoise.⁹⁶ A Middle English regimen claims that "euery wyse man and woman shold stodye howe they myght kepe them in good helthe bothe of body and sowle longe to endure".⁹⁷ It is unlikely, however, that there was ever any real parity in the numbers of men and women who owned such texts. The Catalan

⁹⁴ Steven J. Williams, "The Scholarly Career of the Pseudo-Aristotelian *Secretum secretorum* in the Thirteenth and Early Fourteenth Century", Ph.D. dissertation, Northwestern University (Evanston, Illinois, 1991). On the circulation of Philip of Tripoli's translation in the equally male settings of the courts of the papacy and Emperor Frederic II, see idem, "The Early Circulation of the Pseudo-Aristotelian *Secret of Secrets* in the West: The Papal and Imperial Courts", *Micrologus* 2 (1994), 127-144.

⁹⁵ There are approximately three times as many extant manuscripts of Philip's full translation as of John of Seville's excerpt. For the German translation, see Table 2, item 15; and Green, "Books as a Source" (n. 16 above) regarding its limited circulation among nunneries. In Williams' list of 13th- and early 14th-century copies of the *Secretum*, only two are known to have passed through the hands of women: a copy of the John of Seville version (amidst a large collection of Aristotelian texts) that was purchased from the mother of a deceased *magister*, and a copy of a French translation that was presented as a gift to Edward III by Philippa of Hainault (pp. 147 and 164).

⁹⁶ Table 2, item 16.

⁹⁷ Table 2, item 43.

regimen translated for Blanche of Anjou between 1305 and 1310 now exists in three copies; the Latin original, which was composed for her husband, Jaume II, the king of Catalonia-Aragón, is represented in seventy-eight copies.⁹⁸ Zucchero Bencivenni produced his Italian translation of Aldobrandino's text in 1310 from a version that lacked the prologue mentioning Béatrix, and he addressed it to an unnamed male patron; codicological studies have not yet been made of the eighteen extant copies but it would hardly be surprising to find that they were all owned by men.⁹⁹ Just as the content of these texts was structured on the male as the defining form of the human body (with the female body mentioned only in connection to its unique processes of pregnancy and lactation), so in their function these texts were intended to aid those individuals who defined the social body. The relative ease with which texts such as Aldobrandino's *Régime* could go back and forth between men and women suggests that that male orientation did not automatically exclude female reading. But while women may occasionally have used these texts for care of themselves, they do not seem to have been entrusted with any formal duties of overseeing the health of the men of the family. Knowledge of how to care for the self was as vital to any man of power as was knowledge of how to choose one's counsellors or wage war. Men thus have their *own* copies of these regimens; this was a matter too important to leave to women.

"Women's Medicine"

As noted earlier, Table 3 shows a surprising gap between texts addressed to women and texts known to have been owned by them. Aside from the one known copy of a Latin tract on fertility addressed to Anne de Beaujeu (which may have been the presentation copy), there are no proven cases of female ownership for the total of fifteen gynecological texts addressed to women,

⁹⁸ Gil-Sotres et al. (n. 74 above). Obviously, we must make allowance for the fact that, since it was in Latin, Jaume's version had the possibility of a wider European diffusion than a text in the local vernacular.

⁹⁹ See Françoise Féry-Hue, "Zucchero Bencivenni, premier traducteur du Régime du corps d'Aldebrandin de Sienne", in *Bien dire et bien apprendre: Actes du colloque du Centre d'Études Médiévales et Dialectales de Lille III. Traduction, transposition, adaptation au Moyen Age*, Lille, 22-24 septembre 1994, t. 14 (1996), pp. 189-206. I suspect that even the five manuscripts containing the Italian *Régime du corps* alongside one of the Italian *Trotula* translations may well have been for use of the *pater familias* of the household rather than for women themselves. This Italian *Trotula* is not addressed to women; see Monica H. Green, "A Handlist of the Latin and Vernacular Manuscripts of the So-Called *Trotula* Texts. Part II: The Vernacular Texts and Latin Re-Writings", *Scriptorium* 51 (1997), 80-104, p. 100, and the Appendix to this volume, s.v. *Trotula* Ital1.

five texts that combine gynecology with cosmetics, four solely on cosmetics, two that combine obstetrics with pediatrics, or the two that deal solely with obstetrics. I believe that these texts were, in many cases, probably owned by women and that we simply lack the evidence (e.g., *ex libris* marks) to confirm this.¹⁰⁰ But before we leap to an assumption that these texts prove that "women's health was women's business"—that within the realms of gynecology, obstetrics, and cosmetics women had their own feminine literate culture—it is necessary to stress three realities. First, with the important exception of Trota's twelfth-century *De curis mulierum* ("On Treatments for Women"), none of these texts is known to be of female authorship nor, aside from the Salernitan *De ornatu mulierum* and the Anglo-Norman *Ornement des Dames*, do any of them purport to be a direct transcription of women's medical practices. These texts tell us less about women's contemporary medical practices than about the desire to appropriate pre-existing Latin gynecological or cosmetic learning and render it "into a language women can understand".¹⁰¹ Second, the vast majority of medieval gynecological texts, whether in Latin or vernacular, are not addressed to female readers and can be shown to have been in male possession or are found in volumes that suggest association with latinate, if not university culture. Males were often the initial audiences of these texts, women the secondary one.¹⁰² Finally, even if we accept as sincere the authors' claims that the texts we are examining here were *intended* for female audiences, it is clear that they were often reappropriated by male readers.¹⁰³ The reasons why males would have been interested in gynecological and cosmetic texts, despite cultural constraints on male access to the female body, are complicated and will be addressed elsewhere.¹⁰⁴ Here the important point is that gynecology and

¹⁰⁰ Cf. my arguments regarding the Middle English corpus in "Obstetrical and Gynecological Texts in Middle English", *Studies in the Age of Chaucer* 14 (1992), 53-88 (essay IV in this volume), at pp. 64-68.

¹⁰¹ Several of them do, it is true. incorporate contemporary practices into a framework provided by the Latin source texts: see, for example, the Middle English *Sekenesse of Wymmen* 2 (Table 2, item 32), and the third Dutch translation of the *Trotula* (item 31).

¹⁰² See the Appendix to this volume for a comprehensive listing of medieval gynecological texts.

¹⁰³ Regarding male owners of gynecological literature, see Green, "Obstetrical" (n. 100 above); "A Handlist of the Latin and Vernacular Manuscripts of the So-Called *Trotula* Texts. Part I: The Latin Manuscripts", *Scriptorium* 50 (1996), 137-75; and "Handlist", Part II (n. 99 above). See also my review of Britta-Juliane Kruse, *Verborgene Heilkünste: Geschichte der Frauenmedizin im Spätmittelalter*, Quellen und Forschungen zur Literatur- und Kulturgeschichte, 5 (Berlin: Walter de Gruyter, 1996) in *Bulletin of the History of Medicine* 71 (1997), 333-35.

¹⁰⁴ Monica H. Green, *Women and Literate Medicine in Medieval Europe: Trota and*

obstetrics and, to a lesser degree, cosmetics, were contested areas of medical knowledge. I would argue that women were only rarely ceded complete control over the care of the medical and hygienic issues most immediately pertaining to their bodies. Much has been made of two English and two Dutch gynecological texts from the late fourteenth and fifteenth centuries that claim to be addressed to women.¹⁰⁵ Here I would like to examine briefly an entirely different text that is clearly meant for use by women. As we shall see, although this employs a rhetoric of shaking off dependence on physicians, there is no sense in which it grants its female readers a knowledge of women's medicine fully equivalent to that possessed by learned practitioners.

The fourteenth-century Catalan author of *Lo Libre . . . al qual à mès nom Tròtula* ("The Book . . . Which is Called 'Trotula'") addressed his lengthy text to an as yet unidentified queen or perhaps infanta of Aragón (he calls her both "regina" and "flor d'Aragó"), and he speaks directly to her throughout the text, even though he clearly also has a larger audience of women in mind.¹⁰⁶ The title capitalizes on the fame of the most widely circulating Latin texts on women's diseases and cosmetics, the so-called *Trotula* texts, a rhetorical ploy all the more intriguing since the author did not, in fact, employ them as a source.¹⁰⁷ The text encompasses those aspects of medicine with which the author thought the addressee was, or ought to be, concerned: cosmetics (comprising everything from care of the hair to care of the breasts and treatments for stretch marks), recipes for provoking or restraining the menses, others for deodorizing and narrowing the vagina (to enhance sexual relations), and finally a brief regimen for healthy living throughout the year. Whereas Aldobrandino's *Régime* was intended only to be a substitute for Aldobrandino himself when he could not accompany Béatrix of Savoy on her journey, the author of this Catalan text insists that with his book its royal recipient "will not have to obey any doctor unless it is because of the plague or apoplexy, which you cannot avoid". At one point he even invites her to look at other medical books to find detailed descriptions

the 'Trotula' (in progress).

¹⁰⁵ Table 2, items 25, 31, and 32; there are three separate redactions of the Dutch text (item 31) though only two have been edited. For arguments that these texts prove that "women's health was women's business" and my critiques of that position, see Essays I and IV in this volume, *passim*. See also the *Corrigenda et Addenda* in this volume, p. xviii, regarding Delva's claims that the Dutch *Liber Trotula* was authored by a midwife.

¹⁰⁶ Table 2, item 24. The text runs a full 100 pages in Cabré's transcription.

¹⁰⁷ The most important source for this text is the Latin *De ornatu* traditionally attributed to Arnau de Vilanova. The source of the gynecological material has not yet been confirmed.

of compound medicines.¹⁰⁸ What he actually presents to his female reader, however, is a very limited slice of medical knowledge. There is virtually no medical theory here beyond such elementary notions as the hot or cold temperaments of the body, nor are there any advanced therapeutics, not even for gynecological or obstetrical conditions. When the *Libre* was adapted for later users, moreover, the attenuation of medical-theoretical matters was even more pronounced.¹⁰⁹

This Catalan text thus reinscribes more than it challenges the limited expectations of women's involvement in medical literature, as indeed do most of the medical texts addressed to female audiences. As I said, the fact that our Catalan author should have adopted the title of the most widely circulating Latin texts on women's medicine as his own is ironic, since he did not employ the *Trotula* as his source. Yet there is a further irony in the fact that he has so successfully redefined "women's medicine" not principally as gynecology and obstetrics, but as cosmetics. Whereas cosmetics had made up less than one quarter of the widely-circulating *Trotula* ensemble and was there relegated to the latter part of the text, in this Catalan tract cosmetics make up nearly three-fourths of the text, and even some of the gynecological material deals more with hygienic issues than pathological ones. Indeed, it is striking how successfully feminized cosmetic literature became: even if the Latin texts remained largely in the hands of men, every vernacular translation known to me but one is addressed to female audiences.¹¹⁰

For gynecology, in contrast, there was no universal ceding of control to women. The French tradition of gynecological texts is illuminating. Already by the mid-thirteenth century we find three renditions of the Latin *Trotula* into French; a fourth translation dates from the thirteenth or fourteenth century.¹¹¹ The earliest translation is directed to a mixed audience of men and women; the second opens with the powerful claim that this text

¹⁰⁸ Cabré ed., p. 339: "Aiats vos donchs, madona, si a vós plau, aquest libre per ops de estar en vostra sanitat; car si voletz són mandament seguir, nuyl temps no aurets ops a ebeir metge, sinó és per aventura de plages e de feridura, les quals coses no pot hom de tot esquivar que no avenguen sens grat". P. 341: "e aquests letovaris trobarets als libres dels savis metges qui parlaren de les coses naturals".

¹⁰⁹ See Table 2, items 35-36.

¹¹⁰ See Table 2, items 10, 11, 24, 35, 36, 45, and 49. The exception is an Italian translation of the *De ornatu mulierum* (one of the *Trotula* treatises). On the Italian [*Il Libro dello adornamento delle donne per che modo debbono fare belli i loro membri*, see Green, "Handlist", Part II (n. 99 above), pp. 100-1, and the Appendix to this volume (s.v. *Trotula*). Latin cosmetic texts (of which there are few) tend to use such formulations as "let the woman apply . . ." The direct addressee seems to be the male physician, hence the unusualness of a Latin version that adopts feminine addresses (Table 2, item 13).

¹¹¹ Table 2, items 7-9 and 18.

has been translated so that "some women would know how to aid others". Although not as strident, the third and fourth translations likewise claim a female audience. Yet it is precisely this scenario of *independent* female practice of gynecology that soon becomes attenuated in the French *Trotula* tradition. The third translation actually constructs the physician (*le mire*) as the principal agent of medical care. And while the earlier, second French translation continues to circulate through the fifteenth century, the address to female readers is one of the first elements to go when the text is abbreviated for later uses.¹¹² The *Trotula* is translated into French at least three more times in the fourteenth and fifteenth centuries, but it seems to become a professional text for (male?) medical practitioners.¹¹³ The only late medieval French texts with addresses to female readers are what seem to be a translation of the meager gynecological excerpts from the Catalan *Libre . . . Trotula* and the little "enseignement" on sexual relations crafted out of sections from Aldobrandino's *Régime* and an earlier French translation of the *Trotula*.¹¹⁴ In other languages, texts on reproductive issues addressed toward individual women—the Latin and German *Gebärmutterpraktik* written by the Augsburg physician Bartholomeus Metlinger for his wife, the Latin opus on fertility written for Anne de Beaujeu by Bernard Chaussade, and Ludovico Bonacciuoli's Latin obstetric work for Lucrezia Borgia—assume that the technical aspects of diagnosis and preparation of medicines will be handled by latinate medical professionals.¹¹⁵ Several of the new texts of the fifteenth century that address female audiences generally focus on obstetrics to the virtual exclusion of the general pathology and therapeutics of gynecology. In the *Frauenbuchlein* and later in the printed version of the *Rosengarten*, laywomen and midwives are given a list of symptoms of postpartum conditions solely in order that they will know when to call in a (male) physician.¹¹⁶ In Savonarola's "vernacular" tract on proper regimen during

¹¹² Green, "Handlist", Part II, pp. 90-92; and "'Traittié tout de mençonges': The *Secrès des dames*, 'Trotula,' and Attitudes Towards Women's Medicine in Fourteenth- and Early Fifteenth-Century France", in Marilynn Desmond, ed., *Christine de Pizan and the Categories of Difference* (Minneapolis: University of Minnesota Press, 1998), pp. 146-78, at pp. 164-65 (Essay VI in this collection).

¹¹³ Green, "Handlist", Part II, pp. 93-94; one of these three is incomplete, though it is clear that the other two were not meant for laywomen or midwives. There is also a novel French gynecological text, written ca. 1440-50, meant for male physicians. See the Appendix to this volume regarding the anonymous *Des maladies qui peuuent souruenir es membres generatifz de la femme*.

¹¹⁴ Table 2, items 30 and 44. Since the only known copies of *Aydes de la mayre* appear within codices of strongly surgical character, it can be wondered how often even this meager material reached a female audience.

¹¹⁵ Table 2, items 38, 40, and 48.

¹¹⁶ Table 2, items 41-42.

pregnancy and care of the child up through age seven, which is by far the longest of all the texts addressed to women, we find a level of theoretical sophistication similar to that of Chaussade and Bonacciuoli's Latin works. Since Savonarola leaves much of his discussion in Latin, however (with much scholastic name-dropping along the way), we must wonder how it might have been used by the Ferrarese women to whom it was ostensibly addressed.¹¹⁷

Rather than assuming that the English and Dutch gynecological texts addressed to female audiences reflect *normative* expectations that women will be reading gynecological texts, therefore, I think we should instead emphasize how strikingly novel they are. What is most extraordinary about both these vernacular traditions is that, for the first time since late antiquity, detailed obstetrical information is combined with general gynecology and made available explicitly to women.¹¹⁸ These texts thus bring into a single written locus a comprehensive survey of knowledge for addressing the special medical needs of women (though interestingly, cosmetics is left out of these new texts). It is perhaps because these works represented such a rich source of information on the female body that we find, just like so many of the other texts addressed to women before, that they are very soon appropriated by male readers.¹¹⁹

The Medically Literate Layman

Like women, many literate laymen may have deemed the technicalities of medicine to be the exclusive terrain of professional practitioners, and there were many men who owned no medical books. Yet as I have already noted in passing, there are men who did not practice medicine in any professional capacity who can nevertheless be documented owning medical books. These

¹¹⁷ Table 2, item 37. Again, there is no evidence in the three extant manuscripts of Savonarola's work that the text was owned by a woman.

¹¹⁸ On the revival of Muscio's *Gynecology* in the late Middle Ages, see Ann Ellis Hanson and Monica H. Green, "Soranus of Ephesus: *Methodicorum princeps*", in Wolfgang Haase and Hildegard Temporini, general editors, *Aufstieg und Niedergang der römischen Welt*, Teilband II, Band 37.2 (Berlin & New York: Walter de Gruyter, 1994), pp. 968-1075.

¹¹⁹ Green, "Obstetrical" (n. 100 above); "Traittié" (n. 112 above); and "From 'Diseases of Women' to 'Secrets of Women': The Transformation of Gynecological Literature in the Later Middle Ages", *Journal of Medieval and Early Modern Studies* 30 (2000), 5-39. I argue in the latter essay that Johannes Hartlieb seems to have included cosmetics in his fifteenth-century German translation of the *Trotula* so that sexual coupling (which both this text and the paired German *Secreta mulierum* are meant to enhance) can more readily take place.

books no doubt often resided within household libraries, and within this household context, it might be argued, to speak of "men's books" and "women's books" as discreet entities may be putting too much emphasis on *ownership* at the expense of the more important question of *use*. At least some women, presumably, would have had access to the medical books in their husbands' libraries. But did they read them?

Let us return to that well-known example of "domestic medicine", the Paston household. The Paston women's home remedies were apparently thought to be quite efficacious, so much so that John Paston III (1444-1504), at the time away in London, once asked his wife Margery to send him one of her plasters and written instructions on how to use it.¹²⁰ Yet however much the Paston menfolk appreciated their women's medical attentions, they also could participate in a separate literate medical culture. In 1468, Sir John Paston II (1442-1479, John III's elder brother) commissioned a medical compendium from a London scribe, William Ebesham. If A.I. Doyle's identification of an extant Boston manuscript with Paston's "littil booke of pheesyk" is correct, then what Paston commissioned was a sixty-four-leaf volume with three Middle English and eight Latin texts, followed by a set of astrological tables.¹²¹ The presence of the Latin texts alone makes it unlikely that the book was intended for the direct use of John's mother, or other female relatives, none of whom is known to have been *literate*. The Paston women might, of course, have had one of their clerks orally translate John of Burgundy's plague tract or the short piece on the moon in relationship to the zodiacal signs. But would they have had the skills in logical dialectic or mathematics to absorb and assimilate the technical explanations of the "hidden" causes of disease or the calculation of the positions of the moon in the different houses? Even trying to imagine the Paston women reading the English texts in John Paston's "littil booke" begs important questions about the comprehensibility of technical vernacular literature.

A similar instance of a medical volume prepared for lay consumption is a very large compendium of Middle English medical, scientific and liberal

¹²⁰ Davis, *Paston Letters* (n. 52 above), document 389 (1:628).

¹²¹ A.I. Doyle has identified Boston (Massachusetts), Harvard Medical School, Countway Library of Medicine, MS 19 as clearly the work of the well-known London scribe William Ebesham, from whom Paston commissioned his "littil booke". See Marta Powell Harley, "The Middle English Contents of a Fifteenth-Century Medical Handbook", *Mediaevalia* 8 (1982), 171-88; G. A. Lester, "The Books of a Fifteenth-Century English Gentleman, Sir John Paston", *Neuphilologische Mitteilungen* 88 (1987), 200-217; and Linda Ehrsam Voigts, "The 'Sloane Group': Related Scientific and Medical Manuscripts from the Fifteenth Century in the Sloane Collection", *The British Library Journal* 16 (1990), 26-57.

arts texts that may have been commissioned by Sir Thomas Cook (mayor of London, 1462-63, died 1478) and was certainly later owned by his secretary John de Vale (who possibly translated several of the texts in the volume). Had the women of these bourgeois households consulted this massive volume, they would have found a gynecological text claiming to have been written so "that oo [one] womman may help another in hir sikenes and not discure [reveal] hir privitees to . . . vncurteys men".¹²² While this text did indeed circulate in other codicological contexts that can plausibly have been accessible to women, the general contents of the Cook/de Vale codex were aimed at readers who had the kind of advanced education only bourgeois males such as Cook and de Vale commonly enjoyed. It has been suggested that this volume reflects concerns raised by royal investigations into alchemy and the means to prolong life. In fact, what is striking about this codex is that it contains several unique translations of Latin texts into English—texts that normally would have only been used in university contexts.¹²³

As Linda Voigts has shown, the medical compendia of both John Paston and Thomas Cook were just two of a veritable mass production of volumes of medical and scientific texts that employed English and Latin on an essentially equal basis, suggesting that despite the well-documented explosion of vernacular medical writing in England in this period, *bilingual* (i.e., *literate*), not *monolingual*, readers continued to be the targeted audience of most medical books in fifteenth-century England.¹²⁴ Clearly, we need far more study to confirm whether most women were truly *monolingual* or whether the "phonetic literacy" that enabled them to enunciate the Latin prayers in their psalters also allowed them to read brief embedded Latin phrases like *teranda et conficiantur* ("grind and mix together") or *cum succo plantaginis in quo lapis ematicis fuerit fricatus* ("with plantain juice in which hematite has been rubbed") or the names of individual ingredients (which could be identified by means of one of the synonymies of Latin and English medical terms found in numerous manuscripts).¹²⁵ Given what little we

¹²² On this manuscript (Cambridge, Trinity College R.14.52), see Linne R. Mooney, "A Middle English Text on the Seven Liberal Arts", *Speculum* 68 (1993), 1027-52; and eadem, *The Index of Middle English Prose. Handlist XI: Manuscripts in the Library of Trinity College, Cambridge* (Cambridge: D. S. Brewer, 1995), pp. xxiv-xxv and 53-64. For information on the gynecological text, *Sekenesse of Wymmen* 2, see Table 2, item 32.

¹²³ Anthony Gross, *The Dissolution of the Lancastrian Kingship* (Stamford, Lincolnshire: Paul Watkins, 1996); and Linda Voigts's review of it in *Society for Ancient Medicine Review* 24 (1996-97), p. 218, where she questions Gross's dating of the manuscript.

¹²⁴ Voigts, "Sloane Group" (n. 121 above); and "What's the Word?" (n. 10 above).

¹²⁵ Cambridge, Trinity R.14.52, f. 112v. As has been noted elsewhere (Green, "Obstetrical"), the "women's version" of *Sekenesse of Wymmen*—from which these Latin

currently know about bourgeois women's education, however, it is hard to imagine the Cook or de Vale women making much use of this gynecological text, some of whose extensive Latin passages are addressed directly to male readers.¹²⁶

When we look at the books owned by laymen—men who, no less than others of their class, were able to rely on the skills of professional physicians—we find a level of theoretical reading hardly ever documented for women. Among lay English medical book owners, for example, John, Duke of Bedford, had two large volumes copied for him by his surgeon, Jean Tourtier: a French version of the Hippocratic *Aphorisms* (with an accompanying commentary) which reflected the technical nature of university medicine, and a copy of the French *Chirurgie* of Guy de Chauliac.¹²⁷ Thomas Stotville (ca. 1408-ca. 1466), a prominent Suffolk lawyer, owned forty books, not simply on law, but on theology, history, literature, natural philosophy and medicine as well; within the last category were such texts as Constantine the African's medical encyclopedia, the *Pantegni*, and a certain text on "the secrets of women".¹²⁸ Humphrey Newton (1466-1536), a Cheshire country gentleman and minor poet, bound a pamphlet containing Middle English tracts on urines and gynecology plus medical recipes in Latin and Middle English with miscellaneous leaves containing legal and notarial notes, poems (mainly by Newton himself), and various notes, recipes, and brief tracts.¹²⁹

The issue, then, is not so much a simple divide between the masculinized university world (which was, of course, exclusively latinate)

quotations come—ironically has more Latin than the original "men's version", which was genuinely monolingual.

¹²⁶ Cf. Rowland's edition, *Medieval Woman's Guide* (n. 4 above), pp. 152-62, esp. p. 156.

¹²⁷ Cavanaugh (n. 26 above), pp. 470-1; and Danielle Jacquart, "Hippocrate en français: *Le Livre des Amphorismes* de Martin de Saint-Gille (1362-1363)", in eadem, ed., *Les Voies de la science grecque: Études sur la transmission des textes de l'Antiquité au dix-neuvième siècle* (= *Hautes Études Médiévales et Modernes* 78) (Geneva: Droz, 1997), pp. 241-329.

¹²⁸ See D. H. Turner, "The Eric Millar Bequest to the Department of Manuscripts. I. The Medieval and Renaissance Manuscripts", *British Museum Quarterly* 33 (1968-69), 16-37 and pl. 8, for a brief description of London, British Library, MS Additional 54233; the list of Stotville's books, made in 1459-60, is on f. 3r (reproduced as Turner's plate 8). On the genre of "secrets of women", see Green, "Traittié" (n. 112 above); and "From 'Diseases of Women'" (n. 119 above).

¹²⁹ Oxford, Bodleian Library, MS Lat. misc. c. 66, s. xv ex. See Green, "Handlist", Part II (n. 99 above), at p. 87.

and a feminized vernacular. Rather, it is a question of the basic intellectual skills that one would have in order to read, comprehend, and appreciate medical works that aspired to any theoretical sophistication. Emperor Frederick II had stipulated in 1241 that three years' study of logic was necessary prior to pursuing either medical or surgical study.¹³⁰ Pierre Dubois, in his fantastic (and unrealized) scheme for recovery of the Holy Land, had suggested in the early fourteenth century that females as well as males be trained in medicine; yet he also stressed elsewhere in the text that medical training should be preceded by an extensive grounding in logic and natural philosophy.¹³¹ The alliance with Aristotelian natural philosophy was the most distinctive feature of the new theoretical medicine of the High Middle Ages,¹³² and access to advanced learning became a veritable *sine qua non* for participation in this new world of learned medicine. Yet studies of formal education in medieval Europe consistently document only boys moving beyond the elementary stages of schooling (which may have been largely conducted in the vernacular) to the secondary levels where grammar, rhetoric, and logic were taught, most often in Latin.¹³³ Many years ago Walter Ong characterized this training as a male puberty rite,¹³⁴ and it is clear that childhood grounding in the liberal arts and *latinitas* (even when it was taught in the vernacular) would have served a man throughout his life, whether he went on to university or not, as an entree into an exclusively masculine literate culture. While both men and women might have shared a simple vernacular literacy that would allow them equally to make use of regimens and collections of recipes,¹³⁵ it would have been the very rare woman who had the more advanced training in rhetoric, Aristotelian logic,

¹³⁰ Cited in Paul Oskar Kristeller, *Studi sulla scuola medica Salernitana* (Naples: Istituto Italiano per gli Studi Filosofici, 1986), pp. 66-67.

¹³¹ Jacquart, "Medical Practice" (n. 62 above), p. 190.

¹³² See, for example, Luis García-Ballester, "Artifex factivus sanitatis: Health and Medical Care in Medieval Latin Galenism", in Don Bates, ed., *Knowledge and the Scholarly Medical Traditions* (Cambridge: Cambridge University Press, 1995), pp. 127-150.

¹³³ Paul F. Grendler, *Schooling in Renaissance Italy: Literacy and Learning, 1300-1600* (Baltimore and London: The Johns Hopkins University Press, 1989); Ronald Witt, "What Did Giovannino Read and Write? Literacy in Early Renaissance Florence", *I Tatti Studies: Essays in the Renaissance* 6 (1995), 83-114.

¹³⁴ J. Walter Ong, "Latin Language Study as a Renaissance Puberty Rite", *Studies in Philology* 56 (1959), 103-24.

¹³⁵ Though I think Keil is overly sanguine when he speculates regarding books for Hausväter that "wenn neben die *gemeinen Bürger* auch *der gemeinen Bürger Weiber* treten und wenn die Titelphrasen neben der Zuständigkeit des Hausvaters eigens auch die medizinische Kompetenz der *Haus=Mütter* aufrufen" ("Der Hausvater" [n. 9 above], pp. 239-40).

and natural philosophy that would have given her access to the kind of readings that filled the leisure time of a Duke of Bedford, a Thomas Stotewille, a Humphrey Newton, a John Paston, a Thomas Cook or a John de Vale.¹³⁶

Conclusion: Exceptional Women, Medical Professionalization, and Recipe Books

In the process of delineating the normative encounters of women with medical literature, we have also identified some exceptions, some intriguing puzzles that call for more analysis. Lay women who ventured into advanced medical reading do indeed seem to have existed: women like Elizabeth de Burgh, who owned three surgical texts plus a copy of John of Gaddesden's Latin *Rosa anglica*, or Blanche of Navarre, who owned two surgical books, both of which she bequeathed to female recipients.¹³⁷ Such exceptions may encourage us to speculate about other women for whom we as yet have only scraps of evidence. When, for example, we find a woman like Elisabeth von Volkensdorf in fifteenth-century Austria who owned six medical books among her collection of forty-eight volumes (a collection notable not only for its inclusion of medical texts but also books of law and even theology alongside the more "typically feminine" books of daily liturgy, saints' lives, romances and epics), do we assume that she merely inherited them from her husband? Or do we interpret these books as evidence of a literate woman attempting to acquire a theoretical understanding of her body and her medical care?¹³⁸ Another topic ripe for study is the possibility that there are "lineages" of women who own medical books. Is it sheer coincidence, for example, that two countesses of Tonnerre, living one hundred years apart, owned medical books?¹³⁹ And surely it should spark our interest to find that Margaret of Austria, who was ultimately able to acquire five different medical volumes for her library, had been educated by Anne de Beaujeu

¹³⁶ For this phenomenon in the sixteenth century, see Peter M. Jones, "Book Ownership and the Lay Culture of Medicine in Tudor England", in Hilary Marland and Margaret Pellings, eds., *The Task of Healing: Medicine, Religion, and Gender in England and the Netherlands, 1450-1800* (Rotterdam: Erasmus, 1996), pp. 49-68.

¹³⁷ Table 1, items 6 and 19-21, respectively. I plan to discuss the cases of Elizabeth and Blanche at greater length elsewhere.

¹³⁸ Table 1, item 30.

¹³⁹ Table 1, items 18 and 24. The description of Jeanne de Chalon I's "livre en françois de plus[ieurs] medecines" is unfortunately too vague to confirm its identity with Jeanne II's equally unspecific "livre de medecine".

(who had been the dedicatee of a tract on infertility, and who herself was the daughter of medical book-owner Charlotte of Savoy), and that Margaret married into the house of Savoy (where she acquired a regimen of health that had previously been owned by the duchess Yolanda).¹⁴⁰

Yet as fascinated as we may be by these exceptional women—these *rarae aves* who used their literacy and their social and economic position as a way of pursuing intellectual curiosities and/or establishing some element of control over their medical care—we also need to recognize how limited most women's interactions with medical literature seem to have been. Yes, we do find women's literacy increasing from the twelfth through the early sixteenth centuries; yes, we do find some women owning medical books. But women's increasing literacy and involvement with literate culture was not fast enough to keep pace with the rapid developments in literate medicine, which was changing not only in its quantity and content, but in its very role in the formation of professional practitioners. During this period, medical books were increasingly becoming both a tool and a symbol for professional practitioners. As historians of medicine have now well documented, professionalization was spreading in fits and starts through Europe from the twelfth century on. The most visible of these new medical professionals were the university-trained physicians (and, more rarely, surgeons), who were obviously *literate*. Yet even though university credentials served as an automatic license for medical practice, university attendance was by no means the only avenue by which one could become officially authorized to practice. Well into the fifteenth century the majority of documented surgeons in England, France, and eastern Spain had no university connections whatsoever, while for barbers and apothecaries university training was virtually unknown, as it was for most Jewish practitioners of any specialty.¹⁴¹ What increasingly united these practitioners was their participation in a shared literate culture that gave them access to theoretical principles of medical knowledge. Already in 1206, the French poet and Cistercian monk

¹⁴⁰ Table 1, items 26-27 and 41; and Table 2, item 40. One of the medical books Margaret acquired was an adaptation of Aldobrandino's *Régime du corps*, which of course had originally been prepared in the thirteenth century for Béatrix of Savoy.

¹⁴¹ Danielle Jacquart, *Le milieu médical en France du XIIe au XVe siècle: En annexe 2e supplément au "Dictionnaire" d'Ernest Wickersheimer* (Geneva: Librairie Droz, 1981); McVaugh, *Medicine* (n. 121 above); Talbot & Hammond (n. 28 above); Shatzmiller, *Jews* (n. 32 above); and Walton O. Schalick III, "Add One Part Pharmacy to One Part Surgery and One Part Medicine: Jean de Saint-Amand and the Development of Medical Pharmacology in Thirteenth-Century Paris", Ph.D. dissertation (The Johns Hopkins University, 1997). Only in Italy was surgery regularly incorporated into university curricula; even so, the majority of surgeons learned their craft solely through apprenticeship. See Park, *Doctors* (n. 66 above).

Guiot de Provins identified literacy as the key to success for both charlatans and "good, reliable physicians".¹⁴² By the fourteenth century, literacy became a formal requirement of practice. In perhaps the same year that the allegedly illiterate Jacoba Felicie was being prosecuted for unlicensed medical practice in Paris, the apothecaries there were being enjoined to have both a corrected copy of the pharmaceutical authority *Antidotarium Nicholai* and at least one literate person in the shop (preferably the master apothecary himself) who could read it.¹⁴³ The surgeon Henri de Mondeville, who laid out his own simultaneously empirical and theoretical training as a model for others, stressed that his Latin surgical text was intended for "intelligent [practitioners], especially literate ones, who know at least the common principles of medicine and who understand the terminology of the art".¹⁴⁴ Even though surgeons in Paris undoubtedly acquired most of their book-learning from vernacularized surgical texts (and all the major surgical works were indeed available in French translation by the third quarter of the fourteenth century), it was assumed by the legal authorities that many of them also knew some Latin.¹⁴⁵ A large proportion of the newly vernacularized medical texts of this period were, therefore, directed not at a lay populace, but at a literate (if sometimes marginally latinate) professional one. It is here that the differential in basic literate education between boys and girls must have made the most difference. Female practitioners may have formed part of this new, professional audience, but given the general exclusion of women from secondary education (if not elementary as well), those female practitioners who did participate in the new, literate medical culture probably did so because they had had private tutelage at home.

Even as this increasing professionalization was occurring, there was an expanding market for medical literature for lay consumption. As we have

¹⁴² As cited in Tony Hunt, *Anglo-Norman Medicine*, 2 vols. (Cambridge: D. S. Brewer), 2:15. Of the charlatans, Guiot says "Any old rascal with the gift of the gab, so long as he's capable of reading, can take in dim-witted folk". The good physicians are described as "good men and well-read".

¹⁴³ Henri Denifle, ed., *Chartularium universitatis Parisiensis* (Paris: Delalain, 1891-99; repr. Brussels: Culture et Civilisation, 1964), 2:268-69. On Jacoba, see most recently Montserrat Cabré i Pairet and Fernando Salmón Muñiz, "Poder académico versus autoridad femenina: La Facultad de Medicina de París contra Jacoba Félicie (1322)", *Dynamis: Acta Hispanica ad Medicinam Scientiarumque Historiam Illustrandam* 19 (1999), 55-78.

¹⁴⁴ My translation of the Latin text cited in Jacquot, "Medical Practice" (n. 62 above), at p. 191 n. 24.

¹⁴⁵ See the intriguing observations in Geneviève Dumas, "Les femmes et les pratiques de la santé dans le 'Registre des plaidoiries du Parlement de Paris, 1364-1427'", *Canadian Bulletin of Medical History/Bulletin canadien d'histoire de la médecine* 13 (1996), 3-27, at pp. 13-15.

seen, regimens of health (like Aldobrandino's *Régime* and that contained in the *Secretum secretorum* attributed to Aristotle) were the most popular genre, though general "encyclopedic" works like Brunetto Latini's *Trésor*, Gossuin of Metz's *Image du monde*, and the *Livre de Sidrak* included brief sections on medical theory. This sort of edification for the laity was, in principal, as open to female readers as to male ones.¹⁴⁶ Yet as I have noted above, men who had received a formal education in grammar and liberal arts had the capability to take their medical curiosities beyond the introductory level of regimens and recipe collections to more theoretically demanding topics such as the causes of pestilence, astrological influences on health, and the secrets of generation.¹⁴⁷ For many lay male readers, the technicalities of specialized medical language were less forbidding a barrier to comprehension. Thus it is not surprising to find in England and Majorca, for example, so many male owners of medical books who were not professional medical practitioners but laymen.

Laywomen's medical reading, in contrast, seems in general to have been far more limited and contained. As we have seen, when women can be documented owning medical texts or when medical texts are directed to them, these are generally of the most basic nature: regimens, herbals and simple recipe collections. Ownership of regimens and health calendars by women did not upset the professional monopoly of male physicians. On the contrary, such works supported that monopoly since, by inducting the individual reader into a few basic precepts of Galenic medicine, they thereby reaffirmed the ultimate authority of the university-trained physician as well as the surgeon or apothecary aspiring to practice the same theory-based scientific medicine. Women were granted "independence" in cosmetics, a largely non-theoretical field where, as I have noted, virtually every vernacular text is addressed to a female audience. In gynecology, however, where medical theory played a far more significant role, self-treatment was less universally expected or encouraged. Although there existed a rhetorical topos of women's reluctance to bare their ills to male physicians, the majority of high and later medieval gynecological texts (whether in Latin or the vernacular) were not written for women, and even those that were were

¹⁴⁶ In Cavanaugh's study, for example, Roger Jodrell (w. 1423) left a copy of the *Sidrac* to his daughter Anne in 1423 (p. 468), while another was owned by Johanna Kyngeston, prioress of Tarrant Keynston, sometime in the fourteenth century (p. 486). Friedman, *Northern English Books* (n. 2 above) notes a copy that was left to Elizabeth Stapleton by Robert Roos in 1392 (p. 20). Margaret of Austria and Marie of Hungary (Table 1, items 41-42) owned all three of the encyclopedic texts mentioned here, as well as the *Placides et Timéo*.

¹⁴⁷ On this last topic, see Green, "Transformation" (n. 119 above).

often reappropriated by male practitioners and laymen. In obstetrics, the one area of medical practice that remained largely feminized through the fifteenth century, it seems to have been exceptional rather than normative for books to have played any role in disseminating information among women.¹⁴⁸ However much lay women may have served as the "doctor" of first recourse within the household, they seem to have been expected to defer to the physician, surgeon or apothecary when advanced expertise was needed, in the same way mothers deferred to the *magister* when their sons had outgrown the elementary instruction of the nursery.

There is, however, a coda to this story that also forms its subtext. In order to understand medieval women's relationship to the written medical word, we must also attempt to assess the much larger world of orality that is forever just beyond the historian's reach. I have focused throughout this essay on medical texts and medical books, discrete physical entities that conveyed a sustained message and that constituted distinct physical objects on an owner's shelf. But there was also a smaller "unit" of written medical knowledge, the recipe. We have encountered these singly thus far, exchanged for example in women's letters. When gathered together, however, they can add up to a sizable amount of medical lore. Although we cannot know whether the collection of remedies brought into St Katharina's in Nuremberg by Kunigunde Gross Schreiberin in the mid-fifteenth century was her own composition,¹⁴⁹ it is clear that by the sixteenth century both noble and bourgeois women have taken to compiling such recipe collections (sometimes of enormous size) with a passion. From the recipes of women practitioners collected by Anton Trutmann and Ludwig V, Count Palatine, in Germany,¹⁵⁰ to Susanna Fontainblew's medical compendium compiled in England ca. 1510, to Anne de Croy's "Recueil d'aulcunes confections et médecines bien spéciales et singulières" compiled in 1533,¹⁵¹ to the similar collections of women like the nun Anna Maria Stöcklin or laywomen such as Dorothea von Mansfeld, Anna von Diesbach, Eleonore von Hessen-Darmstadt, and Lady Grace Mildmay in the later sixteenth and seventeenth centuries, the collecting (and even publishing) of medical recipes becomes a distinctly feminine undertaking in the early modern period.¹⁵² It should perhaps not surprise us

¹⁴⁸ See Green, "Books as a Source" (n. 16 above), for the slim amount of evidence linking midwives with medical books.

¹⁴⁹ Table 1, item 31.

¹⁵⁰ Table 2, item 47; and Green, "Books as a Source", for further citations.

¹⁵¹ Table 2, items 50-51.

¹⁵² Anna Maria Stöcklin, member of the Cistercian convent of Seligenthal at Landshut, was owner (and perhaps compiler) of a late 16th-century *Arzneibuch*, a collection of miscellaneous recipes (some of which derive from male physicians): Bethesda (Maryland), National Library of Medicine, MS 68, "Arzeney Buech warinen vill unterschiedlich guete

to find that one of these women is none other than Margaret Paston (eldest daughter of Robert Paston, 1631-1683), a descendant of the fifteenth-century women of Norfolk who spoke passingly about various health concerns in their letters.¹⁵³ Far from being a continuation of medieval women's regular engagement with medical literature (as implied by Keil),¹⁵⁴ these early modern compilations suggest a *transformation* in attitudes towards the role that the written word can play in women's medical practices.¹⁵⁵ I would suggest that the hints we find in medieval women's letters—the allusions to remedies, the trading of medical tips—are the outcroppings of "submerged" oral traditions that only in the early modern period become fully visible as *written texts*.¹⁵⁶ Rather than dismissing the occasional medical recipe scrawled into the back of a book owned by a woman as irrelevant, therefore,

Hausmitl zu finden", ff. 1r-90r. For a description of the manuscript, see C. U. Faye and W. H. Bond, *Supplement to the Census of Medieval and Renaissance Manuscripts in the United States and Canada* (New York: Bibliographical Society of America, 1962), p. 143; my thanks to Eliza Glaze for this information. See also Peter Assion, "Die Gräfin von Mansfeld als ärztliche Ratgeberin Luthers", *Medizinhistorisches Journal* 6 (1971), 160-74; idem, "Das Arzneibuch der Landgräfin Eleonore von Hessen-Darmstadt", *Medizinhistorisches Journal* 17 (1982), 317-38; Günther Jaeschke, ed., *Anna von Diesbachs Berner 'Arzneibüchlein' in der Erlacher Fassung Daniel von Werdts (1658)*, Würzburger medizinhistorische Forschungen, 16 (Pattensen/Han.: Horst Wellm, 1978); and Jennifer Wynne Heilwarth, "Be unto Me as a Precious Ointment": Lady Grace Mildmay, Sixteenth-Century Female Practitioner", *Dynamis: Acta Hispanica ad Medicinae Scientiarumque Historiam Illustrandam* 19 (1999), 95-117.

¹⁵³ This later Margaret Paston married a Venetian nobleman and compiled a collection of Paston family receipts in Italian (London, Wellcome Institute for the History of Medicine, MS 3777). A splendid exhibit at the Wellcome Institute for the History of Medicine in London, "A Lady's Closet Opened: Women's Recipe Books and Lay Medical Culture in Stuart England" (12 January to 6 March 1998), assembled a rich array of manuscripts and printed books such as these.

¹⁵⁴ Keil, "Der Hausvater" (n. 9 above), pp. 240-43. Keil makes no acknowledgement of the patriarchal control of the household in Reformation Germany; see Lyndal Roper, *The Holy Household: Women and Morals in Reformation Augsburg* (Oxford: Clarendon, 1989).

¹⁵⁵ Jennifer K. Stine, "Opening Closets: The Discovery of Household Medicine in Early Modern England", Ph.D. dissertation (Stanford University, 1996).

¹⁵⁶ It should also be noted that many of these early modern collections were not all the collector's own remedies, but rather were culled from a variety of different sources. They therefore show the degree to which women had become active medical *readers* as well as writers. For rising levels of lay (and female) ownership of medical books in the age of print, see Paul Slack, "Mirrors of Health and Treasures of Poor Men: The Uses of the Vernacular Medical Literature of Tudor England", in Charles Webster, ed., *Health, Medicine and Mortality in the Sixteenth Century* (Cambridge: University of Cambridge, 1979), pp. 237-73.

perhaps it is time we started paying attention to these snippets of medical lore as evidence for a much broader and wider medical discourse shared orally among medieval women.¹⁵⁷

The rarity of women's ownership of medical books should not encourage us to dismiss it. On the contrary, it should encourage us to raise our antennas even higher so that we might gauge the delineation—and the testing—of the limits of gendered reading practices in high and later medieval Europe.

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¹⁵⁷ Cf. n. 19 above. V.M. O'Mara has raised the important question of women's scribal abilities, concluding that there is scant evidence that medieval English women could even sign their names, let alone write out extended texts; see "Female Scribal Ability and Scribal Activity in Late Medieval England: The Evidence?", *Leeds Studies in English* n.s. 27 (1996), 87-130. Recipes may be one area that might prove fruitful for future research on women's writing capabilities.

TABLE 1: INDIVIDUAL FEMALE OWNERS OF MEDICAL BOOKS

<u>Owner</u>	<u>Medical Books</u>	<u>Total Number of Books^a</u>	<u>Type^b and Date of Source</u>
<u>Catalonia</u>			
[1] Blanche of Anjou (1283-1310), wife of King Jaume II of Aragón	owned a <i>Regiment de sanitat</i> , a Catalan translation of a Latin health regimen that had been written by Arnau de Vilanova for her husband	1/??	O/1323 ^c
[2] Elisenda de Montcada, niece of Elisenda de Montcada (1292-1364), Jaume II's fourth wife	the same copy of <i>Regiment</i> that had been owned by Blanche of Anjou was given to Elisenda in 1326 by Jaume II	1/??	O/1326 ^d
[3] Elisenda and Joaneta, widow and daughter, respectively, of a Barcelonan merchant, Joan Sicart	they receive from Margarida, wife of Bernat Dolç, another merchant, a sack which had belonged to Joan Sicart and contained nine books, including one "de algunes medecines"	1/9	O/1400 ^e
[4] Clara, widow of a Barcelonan silversmith, Romeu Dez-Feu	the post-mortem inventory of her inheritance included "un libre . . . de Medicines"	1/14	IP/1420 ^f
[5] Maria of Castille (1401-1458), wife of Alfons el Magnànim	a <i>Libre de regiment de la senyora reina</i> ("Book of Regimen for Her Lady the Queen") is included among the books in her postmortem inventory	1/71	IP/1458 ^g
<u>England</u>			
[6] Elizabeth de Burgh (d. 1360), Lady of Clare, cousin of King Edward III	1-3) three books of surgery confiscated by Edward II were returned to her in February 1327 by the newly crowned Edward III; it is not clear whether they had initially been hers or her	3/7 ^h	O/1327

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
	husband's property 4) gave (?) a copy of the <i>Rosa Anglica</i> (a large Latin compendium of medical theory and practice) to Simon Bredon (d. 1372), a fellow of Merton College, canon of Chichester and noted physician, who served in her household from 1357 through 1359	1/ca. 27	B/1368 ⁱ
[7] Margaret Courtenay, countess of Devon	willed that "a book of medicines and of Marchalsy [i.e., horse medicine]" ("un livre de medycynys et de marchasye") be left to a certain Anneys Chambernon	1/10+	W/1390/91 ^j
[8] Anneys Chambernon	received "a book of medicines and of Marchalsy [i.e., horse medicine]" from Margaret Courtenay (as above)	1/3	B/1390/91
[9] Elizabeth Lewkenore, widow of Sir Thomas Lewkenore	at her death, an inventory of her goods recorded a book of "medicyne"	1/2	I/1469 ^k
[10] Margaret, wife of Richard Bridges of Leglo in Herefordshire	a late 15th-century copy of Aldobrandino's <i>Régime du corps</i> bears the conjoined coat of arms of Richard and Margaret	1/??	M/late 15th cent. ^l
[11] Lady Margaret Beaufort (1443-1509), mother of Henry VII, a noted patron of literature and an accomplished translator (from French) in her own right ^m	1) had a copy of Latin and English plague tracts prepared especially for her 2-3) owned two printed copies of the <i>Kalender of Shepeherdes</i> (1506 and 1508), which has been called "a strange pot-pourri of pastoral manual, astrological guide, and medical handbook"	2/"grete nombre both in Englysshe & in Frensshe"	M/ca. 1500 + O/1507 & 1509 ⁿ
[12] Elizabeth of York (1466-1503), wife of Henry VII	a copy of Aldobrandino of Siena's <i>Régime du corps</i> bears her arms conjoined with those of her husband	1/??	M/late 15th cent. ^o

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
[13] Susanna Fontainblew	gave a large collection of recipes (over 500 pages) which had been prepared by Donatus Antonius the younger to one T. Nonne	1/??	M/ca. 1510 ^p
[14] Elizabeth Wellys	willed that an herbal of hers remain to the common use of the female house of the Minories in London	1/??	W/1520 ^q
[15] Alice Edwards, widow of David Edwards, a Cambridge M.D. and medical author	a post mortem inventory lists (1) "a lytle booke of physyck"; and (2) a copy of Mesue's compendium of compound medicines	2/21+	I/1546 ^r
<u>France</u>			
[16] Theutberga, wife of Lothar II of Lotharingia	was willed an unspecified "book of medicine" (<i>medicinalis liber</i>) by Eckhard, count of Auton and Mâcon	1/??	B/876 ^s
[17] Béatrix of Savoy, countess of Provence (d. 1287)	commissioned the <i>Régime du corps</i> , a general regimen of health, from her physician, Aldobrandino of Siena, on the occasion of her visit to her four daughters in 1256	1/??	O/1256 or 1257
[18] Jeanne de Chalon, countess of Tonnerre (d. 1360)	owned "a book in French of many remedies" (<i>ung livre en françois de plus[ieurs] medicinnes</i>)	1/20	IP/1360 ^t
[19] Blanche of Navarre, queen of France (d. 1398), second wife of Philip VI (d. 1350)	1) gave one surgical book to her lady-in-waiting, Jehanne de Rouieres 2) gave her other surgical book to her chambermaid and medical attendant, Symmonete	2/41	W/1396, 1398 ^u
[20] Jehanne de Rouieres, lady-in-waiting to Blanche of Navarre	was willed a book of surgery by Blanche	1/4	B/1396 ^v

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
[21] Symmonete, medical attendant and chambermaid to Blanche of Navarre	was willed a book of surgery by Blanche	1/1	B/1398 ^w
[22] Margaret of Flanders (d. 1405), Duchess of Burgundy	her postmortem inventory listed six books of medicine: 1) a "livre de la propriété d'aucune pierres" 2) a "livre ouquel est traité de médecine" 3) a "livre de médecine" 4) "le livre de Zacarye Albazarye" (perhaps a copy of one of Rhazes's writings) 5) another "livre de la propriété des pierres" 6) another "livre de médecine"	6/145	IP/1405 ^a
[23] Perretta Petonne, surgeon, tried by the corporation of surgeons of Paris for unlicensed medical practice	presents as proof of her medical knowledge "un livre en francois" ("a book in French"), later described as "bon contenues plusieurs beaux remedes" ("full of many good remedies")	1/1	O/1410 ^y
[24] Jeanne de Chalon, countess of Tonnerre (d. 1450)	1) one unspecified book of medicine ("livre de médecine") worth five sous 2) one entitled <i>The Testament [of] Master Regnault of Villon on Medicine</i>	2/27	IP/1450 ^z
[25] Gabrielle de la Tour (d. 1474), countess of Montpensier	1) "la Propriété des herbes" (perhaps a French translation of ps-Macer's <i>Herbal</i>) 2) "Ung livre de plusieurs eaus et médecines" ("a book of many [medicinal] waters and medicines") 3) "Ung petit livre de médecine" ("a little book of medicine") 4) "Ung lapidaire, qui devise de plusieurs piarres et herbes" ("a lapidary, which discusses many stones [having medicinal powers] and herbs")	5/162	IP/1474 ^{aa}

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
	5) "Ung petit livre pour cognoistre la vertu des herbes" ("a little book for understanding the properties of herbs")		
[26] Yolanda (d. 1479), sister of Louis XI of France and wife of Amadeus IX, Duke of Savoy	at the time of her death, there was at her chateau at Vigon "a small book in paper called <i>heronchel</i> ", i.e., Heronchel's <i>Le Régime pour garder santé</i> , a translation of Arnau de Vilanova's <i>Regimen sanitatis ad inclitum regem Aragonum</i> probably made for Amadeus's father, Louis I (Duke of Savoy 1440-65) ^{ab}	1/89	IP/1479 ^{ac}
[27] Charlotte of Savoy (d. 1483), second wife of King Louis XI	included in her inventory are: (1) a French translation of the pseudo-Aristotelian <i>Secretum secretorum</i> ("ung livre des secretz d'Aristote . . . qu'il envoya à Alixandre") (2) a "book of herbs and trees" ("livre des herbres et abres" [<i>sic</i>]) (3) a "small book . . . on diseases" ("ung autre petit livre . . . de doloribuz") ^{ad} (4) "a large book" with what seem to have been French medical recipes ("ung grant livre . . . commançant: les Remèdes pour la maladie de la teste")	4/ca. 160 (in French and Latin)	IP/1484 ^{ae}
[28] Marie of Luxembourg (d. 1546 or 1547), wife of François de Bourbon, vicomte of Vendôme	owned a huge (300+ folios) early 14th-century volume containing Aldobrandino of Siena's <i>Régime du corps</i> along with encyclopedic and moral works as well as poetry	1/??	M/late 15th or early 16th cent. ^{af}
<u>Germany</u>			
[29] <i>Juncfrow</i> Guoteline von Eßlignen of Speyer	compiled or had compiled for her a diverse collection of medical texts written in Alsatian dialect	1/??	M/1321 ^{ag}

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
[30] Elisabeth von Volkensdorf, an as yet unidentified Austrian woman	owned five books simply described as "medicine books" (<i>erczpuech</i> or <i>erczpuchel</i>), plus a "Book on the Virtue of Herbs" (<i>Daz Puch der Tugent der Wurtzen</i>)	6/48	I/1st half of 15th cent. ^{ah}
[31] Kunigunde Gross Schreiberin (d. 1470), a patrician widow turned Dominican nun	when she entered the convent of St Katharina's in Nuremberg, she brought with her a book of recipes; she apparently gave it immediately to the convent library, since it is not listed among the books in her personal possession in 1451-57	1/19	C/ca. 1455-61 ^{ai}
[32] Barbara Holländersche (no further identification)	owned a fifteenth-century collection of German medical texts, including a plague tract, a prayer for pregnant women, a book of herbs, and a large medical compendium	1/??	M/15th cent. ^{aj}
<u>Italy</u>			
[33] Rikina, the wife of one Master Andreas Spallicta, in the Sicilian town of Corleone	after Rikina's death, her father (who was guardian to her children from her first marriage) ordered that her and her current husband's common goods be inventoried; among them are a book on the art of barbering (<i>quidam liber artis barbitonsoris</i>) as well as some barbering equipment	1/2	IP/1417 ^{ak}
[34] Constantia, daughter and universal heir of Master Petrus Fica, doctor of arts and medicine of the Sicilian town of Trapani	in his testament, Petrus leaves Constantia all his books, of which more than half are medical; ^{al} Petrus stipulates, however, that if Constantia does not abide by the terms of his will, all his goods are to go to the pious society of San Domenico	39/77	B/1433 ^{am}

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
[35] the Jewish sisters Rebecca and Musuta of Palermo	they inherit from their father, Master Vita Xifuni, a physician, two books of medicine (contents and language are unspecified)	2/4	B/1443 ^{an}
[36] Garita, a woman of Palermo	after her death, Master Antonius de Leone, her husband and guardian of her daughter (her universal heir), makes an inventory of their common goods, among which are three surgical texts (language unspecified)	3/3	IP/1449 ^{ao}
[37] Perina, widow of Pinus de Consule, and mother of Jacobus de Consule, a surgeon and citizen of Messina	at her son's death, she inherits all his goods, among which are at least six medical books; ^{ap} at her own death the next year, only four medical books seem to be listed in her postmortem inventory	6/16 4/10	B/1464 IP/1465 ^{aq}
<u>Low Countries</u>			
[38] Isabelle le Mairesse of Tournai	ordered that a medical book ("un livre de médecine") she had borrowed be returned to its rightful owner, master Jehan de Maulcachiet	1/1	W/1389 ^{ar}
[39] Jacqueline of Bavaria (1401-1436/7), countess of Hainault, Holland and Zeeland, wife of (1) John, the dauphin of France; (2) John, Duke of Brabant; (3) Humphrey, Duke of Gloucester; ^{as} and (4), in 1432, Frank van Borselen	1-3?) when she died, she left behind "six English books: some of ancient history, some containing medicine" (how much of each is obviously unclear); eight years after her death, these were sold to an English merchant passing through the Lowlands since no one locally was interested in them	37/6	I/1444 ^{at}
[40] Maris Jouris	in 1501, Jean Nerjot de Myge, a resident of Bruges, noted in a copy of Aldobrandino of Siena's <i>Régime du corps</i> that it had been loaned to him by Maris Jouris,	1/1	M/1501 ^{au}

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
	mother of one Jaqueline (his wife?)		
[41] Margaret of Austria (1480-1530), regent of the Netherlands	(1) she acquired a copy of Heronchel's French translation of Arnau de Vilanova's <i>Regimen sanitatis</i> from the ducal library of the house of Savoy at the death of her second husband Philibert II, duke of Savoy (d. 1504); the manuscript had originally been prepared for Louis I, duke of Savoy, Philibert's grandfather, though in 1479 it was in the possession of Yolanda of France, wife of Amadeus IX, Duke of Savoy ^{av} (2) at some point prior to 1516, she acquired a late 14th-cent. copy of a version of Aldobrandino's <i>Régime du corps</i> in which it was conflated with material on ascetic devotion; the manuscript also contains three other short medical texts in French (3) at some point after 1516, Margaret acquired a copy of the <i>Livre des simples médecines</i> (a French adaptation of the leading Latin text on uncompounded medicaments) from Charles de Croy (4) Margaret also received from Charles de Croy a small book <i>qui ce nomme Avysseinne</i> , which was probably a medical book (5) it is not known how or when the last medical book owned by Margaret entered her collection; it was called <i>Les vertus des phisiciens, herbes, viandes et aultres choses</i>	1/ca. 30 mss acquired from Duke of Savoy 2/180 5/356	M/mid-15th cent. ^{aw} I/1516 + M ^{ax} I/1523-24 + M/ca. 1460 ^{ay} I/1523-24 ^{az} I/1523-24 ^{ba}
[42] Marie of Hungary, niece of Margaret of Austria and regent of	inherited all of Margaret's medical books (as well as most of her others) at her aunt's death	5/333	I/1556 ^{bb}

Table 1

<u>Owner</u>	<u>Medical Books</u>	<u># of Books</u>	<u>Source</u>
the Netherlands	in 1530		
<u>Majorca</u>			
[43] Alegra, wife of a Jewish tailor, Abraham Crespi	owned a Hebrew text called <i>Catonim</i> , perhaps a Hebrew translation of Rhazes' work on pediatrics	1/2	I/1388 ^{bc}

NOTES

^a The first figure is the total number of medical books, the second the total number of books of any sort in the woman's library (to the extent that it can be documented).

^b W = will or last testament of the woman herself; B = bequest to the woman in someone else's will; I = inventory of the woman's possessions; IP = postmortem inventory of the woman's possessions; M = extant manuscript; O = other type of list or reference.

^c Listed in 1323 inventory of Blanche's husband, Jaume II. See next entry.

^d Arnau de Vilanova, *Obres catalanes, volum II: Escrits medics*, ed. Miquel Batllari, proleg de Joaquim Carreras i Artau (Barcelona: Barcino, 1947), at pp. 76-77.

^e Josep Hernando, *Llibres i lectors a la Barcelona del s. XIV*, 2 vols., Textos i Documents, 30-31 (Barcelona: Fundació Noguera, 1995), 2:653-55. The document witnesses receipt of the sack and indemnifies Margarida from further liability for it.

^f Josep M.^a Madurell i Marimon, *Manuscrits en Català anteriors a la impremta (1321-1474): Contribució al seu estudi* (Barcelona: Associació Nacional de Bibliotecaris, Arxivers i Arqueòlegs, 1974), p. 44. How many of these fourteen books were properly Clara's and how many were the patrimony of her late husband is impossible to tell. The two books of alchemy would certainly have been "professional" books for her silversmith husband.

^g V. Velasco, *Inventari dels llibres de la senyora donna Maria, reina de les sicilies e de Aragó* (Madrid: M. Rivadeneyra, 1872), p. 35. From the incipit (*Fortuna que d'abans volia*) it is clear that this is not the same text as Blanche's *Regiment*. My thanks to Montserrat Cabré i Pairet for help with all these Catalan materials.

^h These numbers refer only to those books entered in the list of returns. My thanks to Jenny Stratford of the University of London for information on the reference to de Burgh's property in London, British Library, MS Additional 60,584, f. 13v, and for clarifying the nature of the document. Note that if "surgerie" was used as a generic label for "medicine" in the accounts of Edward III, the *Rosa medicine* (which was composed before 1317) may have been among the three books returned to Elizabeth in 1327.

ⁱ In writing his will in 1368, Bredon identifies the book (one of two copies of the *Rosa* that he owns) as *rosam meam que fuit domine mee de Clare*; it is not clear from this note whether he received the book from de Burgh as a gift or acquired it from her estate after her death. Bredon gives the book to his secretary. See F.M. Powicke, *The Medieval Books of*

Merton College (Oxford: Clarendon, 1931), p. 85, who mistakenly identifies this Lady of Clare as another Elizabeth de Burgh (d. 1362 [correctly, 1363]), first wife of Lionel, Duke of Clarence. On the elder de Burgh, see Susan H. Cavanaugh, "A Study of Books Privately Owned in England, 1300-1450", Ph.D. dissertation, Department of English, University of Pennsylvania, 1980), at pp. 130 and 151-52; Jennifer C. Ward, "Elizabeth de Burgh, Lady of Clare (d. 1360)", in *Medieval London Widows, 1300-1500*, ed. Caroline M. Barron & Anne F. Sutton (London and Rio Grande: Hambledon, 1994), pp. 29-45; idem, *English Noblewomen in the Later Middle Ages* (New York & London: Longman, 1992); and Frances Underhill, "Elizabeth de Burgh: Connoisseur and Patron", in June McCash Hall, ed., *The Cultural Patronage of Medieval Women* (Athens, GA: University of Georgia Press, 1996), pp. 266-87. My total count of de Burgh's books (see previous note) derives from Underhill's calculations (I have not been able to consult Underhill's forthcoming biography of de Burgh). On Bredon, see Charles H. Talbot and E. A. Hammond, *The Medical Practitioners in Medieval England: A Biographical Register* (London: Wellcome Historical Medical Library, 1965), pp. 320-22; and J.B. Post, "Doctor Versus Patient: Two Fourteenth-Century Law Suits", *Medical History* 16 (1972), 296-300.

^j Will of Margaret Courtenay, as cited in Carol M. Meale, "... alle the bokes that I haue of latyn, english, and frensch": Laywomen and Their Books in Late Medieval England", in *Women and Literature in Britain, 1150-1500*, ed. Carol M. Meale (Cambridge: Cambridge University Press, 1993), pp. 128-58, at p. 139; see also Cavanaugh (n. i above), p. 213. On equine medicine, see Brigitte Prévot and Bernard Ribémont, eds., *Le Cheval en France au Moyen Age: Sa place dans le monde médiéval, sa médecine: l'exemple d'un traité vétérinaire du XIV^e siècle, la 'Chirurgie des chevaux'* (Orleans: Paradigme, 1994); and B. Odenstedt, ed., *The Book of marshals: A 15th century treatise on horse breeding . . . edited from MS. Harley 6398* (Stockholm, 1973).

^k Mavis E. Mate, *Daughters, Wives and Widows after the Black Death: Women in Sussex, 1350-1535* (Woodbridge: Boydell Press, 1998), pp. 117 and 190. Mate raises the possibility that this is a copy of Henry of Lancaster's *Livre de Seyntz Medicines*, a devotional book, rather than a collection of physical cures. Since there is no evidence to determine the identification one way or another, however, I retain it in this list.

^l London, British Library, MS Sloane 2401 (s. xv ex.), a copy of redaction B, "roger male branche", of the *Régime du corps*. Other contents: medical recipes; *Lettre d'Hippocrate à César*; tract on medicinal waters; herbal; recipes on "domestic economy." On f. 2v is the coat of arms, which are described as follows: "This armes here made are Richard Brugys of Leglo in Hereford shire and Margaret [h]is wyfe."

^m Margaret was the first Englishwoman to have her work appear in print, with the publication of her translation of the fourth book of *The Imitation of Christ* in 1504 and a devotional work, *Mirror of Gold for the Sinful Soul* in 1506. See Michael K. Jones and Malcolm G. Underwood, *The King's Mother: Lady Margaret Beaufort, Countess of Richmond and Derby* (Cambridge: Cambridge University Press, 1992); and Jennifer Summit, "William Caxton, Margaret Beaufort and the Romance of Female Patronage", in Lesley Smith and Jane H. M. Taylor, eds., *Women, the Book and the Worldly: Selected Proceedings of the St Hilda's Conference, 1993*, vol. II (Cambridge: D. S. Brewer, 1995), pp. 151-165.

ⁿ The plague manuscript is Cambridge, Fitzwilliam Museum Library, MS 261 (England, ca. 1500); see Francis Wormald and Phyllis M. Giles, "A Handlist of the Additional Manuscripts in the Fitzwilliam Museum. Part I", *Transactions of the Cambridge Bibliographical Society* 1, pt. 3 (1951), 197-207, at p. 201. My thanks to Linda Voigts for sharing with me the results of her own analysis of this manuscript. On the *Kalender*, see Susan Powell, "Lady Margaret Beaufort and her Books", *The Library* ser. 6, 20 (1998), 198-240, at p. 234. Powell surveys the vast evidence for Beaufort's books, though it is not

amenable to precise quantification. The quotation comes from a eulogy praising Lady Beaufort's learning (Powell, p. 239).

^o Cambridge, Cambridge University Library, MS li.V.11 (s. xv ex.): Whether Elizabeth owned this in her own right or conjointly with her husband is not clear. At the end of a table of contents at the front of the volume is the inscription *Roy Henry VII. a qui dieu doint bonne vie et paradis*. My thanks to Miss Janet Backhouse, former Curator of Illuminated MSS at the British Library, for advice on the significance of Elizabeth's arms.

^p London, British Library, MS Harley 4349, an. 15107, f. ix: "T Nonne, Ex dono prudentissime atque peritissime femine domine Susanne Fontainblew. This booke was written by Donatus Antonius the younger, in the yeare of our Lord Christ one thousand five hundred and tenn, in which yeare he was Pryor of the Great Abbey or Monastery of Bury St Edmund's in Suff." See *A Catalogue of the Harleian Manuscripts in the British Museum*, 4 vols. (London, 1808-1812; repr. Hildesheim/New York: Georg Olm, 1973), 3:137. I suspect that the manuscript was made, if not for Susanna herself, at least for some female recipient. See Table 2.

^q Catherine Paxton, "The Nunneries of London and Its Environs in the Later Middle Ages" (Lincoln College, Oxford, D. Phil., 1992), p. 106. My thanks to Marilyn Oliva for bringing this citation to my attention.

^r E. S. Leedham-Green, *Books in Cambridge Inventories: Book-lists from Vice-Chancellor's Court Probate Inventories in the Tudor and Stuart Periods*, 2 vols. (Cambridge: Cambridge University Press, 1986), 1:77-78. See also Peter M. Jones, "Book Ownership and the Lay Culture of Medicine in Tudor Cambridge", in Hilary Marland and Margaret Pelling, eds., *The Task of Healing: Medicine, Religion and Gender in England and the Netherlands, 1450-1800* (Rotterdam: Erasmus Publishing, 1996), pp. 49-68.

^s The will of Eckhard, count of Auton and Mâcon, written in 876, records the gift of an amazing number of books. See Maurice Prou and Alexandre Vidier, eds., *Recueil des chartes de l'Abbaye de Saint-Benoit-sur-Loire*, 2 vols., Documents publiés par la Société historique et archéologique du Gatinais, V (Paris and Orleans, 1900-7), 1:66.

^t Ernest Petit, "Inventaire et testament de Jeanne de Chalon, comtesse de Tonnerre, 1360", *Bulletin de la Société des Sciences Historiques et Naturelles de l'Yonne* (premier semestre, 1912), pp. 653-77. My thanks to Françoise Duvernier of the Bibliothèque Municipale d'Auxerre for kindly providing me with a copy of this article. See also Geneviève Hasenohr, "L'essor des bibliothèques privées aux XIV^e et XV^e siècles", in *Histoire des bibliothèques françaises, 1: Les bibliothèques médiévales du VI^e siècle à 1530*, ed. André Vernet ([Paris]: Promodis-Éditions du Cercle de la Librairie, 1989), pp. 214-63, at p. 248.

^u Léopold Delisle, "Testament de Blanche de Navarre, Reine de France", *Mémoires de la Société de l'Histoire de Paris et de l'Île-de-France* 12 (1886), 1-64, at pp. 35 and 46.

^v See item 19 above.

^w See item 19 above.

^x Patrick de Winter, *La Bibliothèque de Philippe le Hardi Duc de Bourgogne (1364-1404)* (Paris: CNRS, 1985), pp. 143, 149, 150, 160, 161, and 171. It is possible that one of these "livres de médecine" was a copy of Aldobrandino's *Régime du corps*. A later inventory of the duke of Burgundy's library in 1420 referred to a medical book "commençant ou II^e feuillet est de l'air, et ou derrenier la graisse qui est meslée" (de Winter, p. 149). The phrase *est de l'air* corresponds to the first chapter title listed after the introduction in Aldobrandino's *Régime* (ed. Landouzy & Pépin, p. 5, l. 30). I have not been able to locate the incipit of the last folio in the text of the *Régime*, but it may come from an added text or recipe.

^y The book is mentioned in the course of Perretta's trial for illegal practice of surgery

in Paris in 1410. Geneviève Dumas, "Les femmes et les pratiques de la santé dans le 'Registre des plaidoiries du Parlement de Paris, 1364-1427'", *Canadian Bulletin of Medical History/Bulletin canadien d'histoire de la médecine* 13 (1996), 3-27.

^z Marie-Thérèse Caron, *La Noblesse dans le duché de Bourgogne 1315-1477* (Lille: Presses Universitaires de Lille, 1987), pp. 292-3 and 366-7, n. 350: "livre de médecine, couvert de 2 ais, 5 s.; petit livre, Le Testament le [sic] maître Regnault de Villon sur médecine." I have not been able to identify this Regnault de Villon in Wickersheimer/Jacquart. Ten books in the collection have an assessed value, ranging from 2 s. 6 d. to 12 écus d'or, 16 L. 10 s.; the "livre de médecine" has the second lowest value. Jeanne had one book (apparently a book of St Augustine) in Latin; all the rest are in French. On Jeanne, see also Caron, "Vie et mort d'une grande dame: Jeanne de Chalon, comtesse de Tonnerre (vers 1388 - vers 1450)", *Francia* 8 (1980), 147-90.

^{aa} Arthur de Boislisle, "Inventaire des bijoux, vêtements, manuscrits et objets précieux appartenant à la comtesse de Montpensier", *Annuaire-Bulletin de la Société de l'Histoire de France* 17 (1880), 269-309; medical items are found on pp. 302-5.

^{ab} Cf. item 41 below.

^{ac} Sheila Edmunds, "The Medieval Library of Savoy. Part II", *Scriptorium* 25 (1971), 253-284, at p. 279.

^{ad} Since it is conceivable that *De doloribus* refers to spiritual suffering of some kind rather than physical, it is possible that this was not really a medical book.

^{ae} Alexandre Tuetey, "Inventaire des biens de Charlotte de Savoie", *Bibliothèque de l'école des chartes* 26 (1865), 338-66, 423-42, at p. 358, 359, 423 and 424.

^{af} Paris, Bibliothèque Nationale, MS fr. 1109. The manuscript, having been produced ca. 1310, was already two centuries old when Marie acquired it; its previous owners are not known. See Édith Brayer, "Notice du manuscrit: Paris, Bibliothèque Nationale, Français 1109", in *Mélanges dédiés à la mémoire de Félix Grat*, 2 vols. (Paris: Pecqueur-Grat, 1949), 2:223-250.

^{ag} Heidelberg, Universitätsbibliothek, Cod. Pal. germ 214 (an. 1321). See Gundolf Keil, "Der Hausvater als Arzt", in Trude Ehlert, et al., eds., *Haushalt und Familie in Mittelalter und früher Neuzeit* (Sigmaringen: Jan Thorbecke, 1991), pp. 219-43, p. 232.

^{ah} *Mittelalterliche Bibliothekskataloge Österreichs*. Bd. 5: *Oberösterreich*, ed. Herbert Paulhart (Vienna: Hermann Böhlau, 1971), pp. 145-47.

^{ai} Paul Ruf et al., *Mittelalterliche Bibliothekskataloge Deutschlands und der Schweiz*, 4 vols. (Munich: Beck, 1918-1983), 3/3:618. For the books in Kunigunde's possession, see Ruf, p. 585.

^{aj} Vienna, Österreichische Nationalbibliothek, MS 14545. For an edition of the prayer, see Britta-Juliane Kruse, *Verborgene Heilkünste: Geschichte der Frauenmedizin im Spätmittelalter*, Quellen und Forschungen zur Literatur- und Kulturgeschichte, 5 (Berlin: Walter de Gruyter, 1996), pp. 62-63.

^{ak} Henri Bresc, *Livre et société en Sicile (1299-1499)* (Palermo: Centro di Studi Filologici e Linguistici Siciliani, 1971), document 43.

^{al} The breakdown is: theory - 22; practicae - 10; herbals - 4; and surgery - 3. All of them appear to be in Latin.

^{am} Bresc, document 67.

^{an} Bresc, document 88.

^{ao} Bresc, document 103.

^{ap} The breakdown is: practicae - 3; surgery - 2 (one in Italian, one in Latin); and theory - 1.

^{aq} Bresc, documents 149 and 153.

^{ar} A. de La Grange, "Choix de testaments tournaisiens antérieurs au XVI^e siècle",

Annales de la Société Historique et Archéologique de Tournai, new ser., 2 (Tournai: Casterman, 1897), pp. 5-365, p. 108: "Ysabel le [sic] Mairesse . . . Item, je voel et ordonne que on renga [read rende] à mestre Jehan Malcauchiet un livre de médecine couviert de ij assielles sans quir, lequel j'ay du sein." My thanks to Judith Oliver for bringing this will to my attention.

^{as} Humphrey was among the most remarkable English bibliophiles of the period; his donation of books served as the foundation for the Bodleian Library at Oxford. Jacqueline gave him a copy of Abulcasis' Latin *Antidotarium* (now London, British Library, MS Sloane 248), signing it twice with a personal dedication (first leaf: "Loyale et belle a Gloucester", and again on a blank leaf at the end: "Loyale et belle de Gloucestre. Loyalement vostre la Duchesse"). There is, however, no evidence that she herself used it. Cf. Cavanaugh, p. 466; and Alfonso Sammut, *Unfredo duca di Gloucester e gli umanisti italiani* (Padua: Antenore, 1980), p. 102.

^{at} Cavanaugh (n. i above), pp. 465-67. My thanks to Luke Demaitre for his translation of the Dutch text.

^{au} Paris, Bibliothèque de l'Arsenal, MS 2510 (s. xiv in.). On f. Av is the inscription, "Se present livre est à Jhan Nerjot de Myge, et l'a pris à Bruge en Flendre, en la messon à madame de Vandome auprès Saint Jaque. Priés Dieu pour l'âme de Husson de la Faileque et de Lois son fiiz. A Bruge en Flendre, l'an v^e et un. La mère à Jaqueline le m'a baillé, laquelle se apelle Maris Jouris."

^{av} Cf. item 26 above.

^{aw} Brussels, Bibliothèque Royale, MS 11198 (ca. 1450-60). See Marguerite Debae, *La Bibliothèque de Marguerite d'Autriche: Essai de reconstitution d'après l'inventaire de 1523-1524* (Louvain/Paris: Editions Peeters, 1995), pp. 473-75.

^{ax} Brussels, Bibliothèque Royale, MS 11130-32 (s. xiv ex., southern Netherlands); see Debae, pp. 158-59. It is possible that this copy is related in some way to one prepared for Adolph de Clèves and la Marck, the seigneur of Ravenstein (1425-1492); Adolph's manuscript, one of only two other copies of this peculiar version of the *Régime*, is now Valenciennes, Bibliothèque Municipale, MS 329 (s. xv). Margaret received from Adolph's widow, Anne of Burgundy (d. 1508), three other manuscripts, and the ties between the two women seem to have been close (see Debae, pp. 380, 459, and 503).

^{ay} Brussels, Bibliothèque Royale, MS 10226 (ca. 1460, NE France); see Debae, pp. 356-59.

^{az} See Debae, p. 460.

^{ba} See Debae, p. 207.

^{bb} Debae, p. xviii.

^{bc} J. N. Hillgarth, *Readers and Books in Majorca, 1229-1550*, 2 vols. (Paris: Éditions du Centre National de la Recherche Scientifique, 1991), 2:449.

**TABLE 2: MEDICAL TEXTS COMMISSIONED BY AND/OR
ADDRESSED TO WOMEN, 1100-1533**

<u>Text and Author (if known)</u>	<u>Commissioner or Addressee</u>	<u>Date</u>
[1] medical excerpt from pseudo-Aristotle, <i>Secretum secretorum</i> , translated from the Arabic into Latin by John of Seville	addressed to "Lady T., queen of Spain" (<i>Domina T. hispaniarum regina</i>), perhaps to be identified with Tharasia (d. 1130), daughter of Alfonso VI of Castile and Leon, and wife of Henry of Burgundy, count of Portugal (d. 1114)	1st third of 12th cent. ^a
[2] <i>Liber de sinthomatibus mulierum</i> , a Latin work on gynecology and obstetrics by an anonymous (and probably male) author in Salerno	the author does not speak directly to a female addressee, but he does claim that he was inspired to write the work by "a certain woman" (<i>quedam mulier</i>) and that he labored intensively "for the sake of women" (<i>labore non minimo mulierum gratia desudaui</i>)	early or mid-12th cent. ^b
[3] <i>De curis mulierum</i> , a Latin work on gynecology, obstetrics, cosmetics and miscellaneous disorders, by or compiled from material by the Salernitan healer Trota	although not explicitly addressed to a female audience (there are, in fact, no direct addresses to any audience, nor is there a prologue), the work seems to presume that readers will be female	mid-12th cent. ^c
[4] <i>Sefer ha-Toledet</i> ("The Book of Generation"), a Hebrew translation of the Latin <i>Gynecology</i> of Muscio	the dialogue form (it is framed as a series of questions that the Biblical figure Dinah asks her father) may suggest that the work was directed toward women	ca. 1197 ^d
[5] so-called "Elder German Macer", a German compilation on <i>materia medica</i> dating from ca. 1200 (based on the Latin <i>Macer floridus</i>)	said to have been composed at the instigation of a woman and subsequently dedicated to her; it is actually addressed, however, to lay physicians	ca. 1200 ^e
[6] anonymous Latin verse <i>De secretis mulierum</i> and <i>De ornatu mulierum</i> , both in dactylic hexameters, are reworkings (with substantial elaborations) of all three <i>Trotula</i> texts	prologue to the gynecological text claims women as a <i>listening audience</i> , yet the "reader" (<i>lector</i>) addressed in the text itself seems to be male; similarly in the cosmetic text, women are constructed as the users of the information but not as the readers of the	early to mid-13th cent. ^f

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
	text. It is likely that both texts, if in fact they were read to women, would have been read in simultaneous vernacular translation	
[7] <i>Les Secrés de femmes</i> , an anonymous French verse adaptation of the material on fertility from the Latin <i>Tractatus de egritudinibus mulierum</i>	although not addressed in its entirety to a female audience, it does include some passages addressed particularly to women (e.g., "Aprés[s] a vostre baron en .i. lit coucherez,/Vous et il ensemble vos volentés facez")	1st half of 13th cent. ^g
[8] anonymous French prose translation of <i>Liber de sinthomatibus mulierum</i>	earliest version claims to have been translated so that "some women would know how to aid others" ("si lor fax icest liure en language ke eles lentendent, que les unes sachent les autres aidier")	early or mid-13th cent. ^h
[9] anonymous French verse version of the previous prose text	opens with direct address to women ("Bien sachies, femmes, de ce naies dotaunce / Ci est escrit por uoir de lor science")	mid-13th cent. ⁱ
[10] <i>L'Ornement des Dames</i> (<i>Ornatu mulierum</i>), an anonymous Anglo-Norman cosmetic text	addressed to "women of nowadays" so that "you yourselves can preserve your beauty and even increase it" ("les dames que ore sunt . . . Pur ceo vus fas jeo cest livre / que tres bien seez delivre / Vus memes en bauté garder / Et vos acunit el amender")	early or mid-13th cent. ^j
[11] anonymous octosyllabic verses on beauty treatments (extant now in Anglo-Norman form, but probably composed on the Continent)	addressed to "whatever woman, be she lady or maid, who wishes to have a beautiful face" ("La quele, que soit dame ou pucele, / Ki desire avoir la face bele")	early or mid-13th cent. ^k
[12] <i>Régime du corps</i> ("Regimen of the Body"), a French health manual composed by Aldobrandino of Siena (d. ante 1299)	written for Béatrix of Savoy (d. 1287), countess of Provence, on the occasion of her journey to visit her four daughters, who were likewise consorts of princes	ante 1257 ^l
[13] Salernitan <i>De ornatu mulierum</i> , 3rd redaction	although the original version of <i>De ornatu mulierum</i> had been directed to male physicians, this third redaction changes many of the third-person references to the woman to second-person forms, e.g., "And when you have sweated sufficiently [in the steambath], enter into warm water and	mid- to late 13th cent. ^m

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
	wash yourself thoroughly" (<i>Cumque bene sudaueris intres aquam calidam et abluas te optime</i>)	
[14] <i>Epistola quedam brevis Ascari philosophi</i> , a late thirteenth-century preface to the late antique Latin <i>Gynecia Cleopatre</i>	declares that the work was written originally by a certain Ascaritan philosopher for his daughter Margaret; the work was then, it is claimed, translated into Latin (presumably from Greek) by one Henry of Constantinople, a courtier of the Byzantine emperor Manuel (presumably Manuel Comnenus, 1143-1180), for the queen of England	late 13th cent. ⁷ⁿ
[15] German translation of the pseudo-Aristotelian <i>Secretum secretorum</i> by a nun of the Cistercian convent of Zimmern, Hiltgart von Hürnheim	Hiltgart says that her translation was made "at the behest of and as a service for" (<i>durch die gepet und ze dienst</i>) the priest and monk Rudolf of the Cistercian house of Kaisheim; nevertheless, she envisions both male and female readers of the book	1282 ^o
[16] <i>Traité d'Hygiène</i> ("Treatise on Hygiene"), an 800-line French didactic medical poem by Thomas le Bourguignon	addressed to the abbess and nuns of Maubuisson as well as to the clergy and lay brothers of the male house of Saint Martin de Pontoise	1286 ^p
[17] <i>Liber magistri Petri de Salerno</i> , a brief French tract on the four humors	said to have been translated into French by one Master Peter of Salerno at the insistence of queen Margaret Fregilla [<i>sic</i>] of Spain	late 13th or early 14th cent. ⁹
[18] Anglo-Norman verse version of the <i>Liber de sinthomatibus mulierum</i> , probably related to the French version mentioned above (item 5)	repeats claim that the text is intended to be used by women ("Pur ceo aprendre medecine / E a dame et a meschine / Par quei puse priuement / Sei eider sanz afient")	early 14th cent. ⁷
[19] <i>Regiment de sanitat</i> , a Catalan translation of Arnau de Vilanova's Latin <i>Regimen of Health for the Glorious Aragonese King</i> , made by one of the Aragonese court surgeons, Berenguer çà Riera	Blanche of Anjou (d. 1310), wife of the king of Catalonia-Aragón, Jaume II, herself commissioned this Catalan translation of the Latin work that had been prepared for her husband	between 1305 and 1310 ⁸
[20] <i>De conferentibus</i> , a dietary listing the beneficial and harmful	said to have been written for Isabella (d. 1358), only daughter of Philip IV (the Fair)	ca. 1307 ¹

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
	effects of various foods on different parts of the body (brain, eyes, breast, heart, and stomach); the text seems to be extant only in English, though presumably it was originally composed in French	
[21] <i>Queen Isabella's Book of Medicines</i> , a collection of some seventy different recipes arranged in a <i>capite ad calcem</i> order; the text seems to be extant only in English, though presumably it was originally composed in French	of France and wife of Edward II of England (r. 1307-1327), by the physicians of Montpellier at the behest of the French king, probably her father	ca. 1307 ^u
[22] <i>On the Virtues of Rosemary</i> , a Latin? (and later English) tract on the cultivation and uses of the herb rosemary	ends with the claim that "ale this medic[in]es were sende fro alle the leches and fro fysicenus of mounpalers to dame isabell the qweyne of englande at the preyour of the kyng of frawns hyre fadyre"; this may well have been intended to complement Isabella's dietary	ca. 1307 ^u
[22] <i>On the Virtues of Rosemary</i> , a Latin? (and later English) tract on the cultivation and uses of the herb rosemary	supposedly commissioned by Jeanne of Valois (ca. 1294-1342), countess of Hainault and sister of Philip VI of France, and sent in 1338 to her daughter, Philippa of Hainault (d. 1369), wife of King Edward III of England (r. 1327-77)	1338 ^v
[23] <i>Brief an die Frau von Plauen</i> , a very short German plague tract for laypeople, which listed rules for bloodletting	said to have been composed by the physician of the king of Rome ⁸ for an unnamed noblewoman of Plauen (Bohemia)	<i>ante</i> 1375 ^a
[24] <i>Lo Libre . . . al qual à mès nom Tròtula</i> , a Catalan text on cosmetics, gynecology and hygiene	addressed to an unnamed queen or infanta of Aragón	late 14th cent. ^y
[25] <i>The Knowyng of Womans Kynde and Chyldyng</i> , a Middle English gynecological compendium based on the <i>Trotula</i> and other sources	claims a general female audience ("[let] every womann redet vnto other that can not so do and helpe hem and concell theme in her maladis withowt schewyng her desses unto mann")	late 14th cent. ^z
[26] <i>The Wyse Boke of Maystyr Peers of Salerne</i> , a composite Middle English text that derives from the <i>Liber magistri Petri de Salerno</i> (item 17 above) and other texts	like its source text, it claims to have been composed "at the requeste and desyre of Margerye ffygyll the qwene of Spayne"	late 14th cent. ^{aa}

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
[27] <i>Lyen du corps a l'ame et de l'ame au corps</i> ("The Link Between the Body and the Soul, and Between the Soul and the Body"), an adaptation of Aldobrandino's <i>Régime du corps corps</i> which fuses it with a work on spiritual devotion	retains (in somewhat modified form) the <i>Régime's</i> original preface stating that the work had been prepared for the countess of Provence	late 14th or early 15th cent. ^{ab}
[28] <i>Ordnung der Gesundheit</i> , a German translation and adaptation of Konrad of Eichstätt's <i>Regimina sanitatis</i>	dedicated to Rudolf VI of Hohenburg and his wife, Margaret of Tierstein	ca. 1400 ^{ac}
[29] French text on herbs and distilled waters; it is said to have been translated from a Latin original attributed (speciously) to the famous Catalan physician, Arnau de Vilanova	according to at least one extant manuscript, Isabeau of Bavaria (ca. 1370-1435), wife of the French king Charles VI, had this translated out of the Latin into French	early 15th cent. ^{ad}
[30] <i>Aydes de la mayre</i> , a French version of the gynecological sections found in the Catalan <i>Libre . . . Trotula</i>	the French has all the same direct addresses to the female reader as the Catalan	early 15th cent. ^{?ae}
[31] anonymous Dutch <i>Liber Trotula</i>	all three redactions (which differ significantly from one another) claim a female audience: "I ask all women who might see this or hear it read . . ." ("Ic bidde alle vrouwen die dit sullen sien ofte horen lesen . . .")	early to mid-15th cent. ^{af}
[32] <i>The Sekenesse of Wymmen</i> 2, a Middle English treatise on gynecology and obstetrics, with extended sections in Latin	adapted from an earlier Middle English translation of the gynecological chapters of Gilbertus Anglicus's <i>Compendium medicine</i> (<i>Sekenesse of Wymmen</i> 1), <i>Sekenesse</i> 2 adds a prologue claiming that the work has been written so "that oo womman may help another in hir sikenes"	early or mid-15th cent. ^{ag}
[33] Italian translation of the gynecological sections of the Latin <i>Trotula</i>	the opening sentence suggests that it was intended for a female audience ("Ergo per voler acomenziare vna opera de picol volume e bona utilitate e maximente per le done per la sua infirmitade de la matrice"); there is nothing, however, in the	mid-15th cent. ^{?ah}

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
	rest of the text that addresses women in particular	
[34] <i>Regiment de la Senyora Reyna</i> ("Regimen of the Lady Queen")	presumably prepared expressly for Maria (d. 1458), wife of Alfons el Magnànim, in whose postmortem inventory it was found	before 1458 ^{ai}
[35] <i>Flos del tresor de beutat</i> , anonymous Catalan text on cosmetics, hygiene, and minor medical complaints	addressed to "molt honorables senyores" ("very honorable ladies")	15th cent. ^{aj}
[36] <i>Flos de veritat del tresor de beutat</i> , an abbreviation of the previous text	addressed to a individual, unnamed woman ("molt honorable senyora")	15th cent.
[37] Michele Savonarola, <i>Ad mulieres ferrarienses de regimine pregnantium et noviter natorum usque ad septennium</i> , vernacular tract on pregnancy and care of the newborn	addressed to the women of Ferrara, though with hopes that it will prove useful "a tute le done taliane" ("to all Italian women"); given the extensive Latin quotations, however, it must be wondered how sincere these audience claims were	ca. 1460 ^{ak}
[38] <i>Gebärmutterpraktik</i> , a short collection of remedies for comforting the womb	written by Bartholomeus Metlinger, an Augsburg physician, for his wife; the German section of the text is couched in direct second-person address to her, while the Latin sections describe remedies to be prepared by an apothecary	ca. 1470 ^{al}
[39] a copy of the <i>Arzneibuch</i> of Ortolof of Bayerland	opens with the claim that Master Nicholas Johannes has translated the text on urines for his wife; although the claim to have authored the translation is specious, presumably the dedication to his wife is not	1475 ^{am}
[40] <i>Tractatus de conceptione et generatione praecipue filiorum</i> , Latin tract on problems of fertility by Bernard Chaussade, personal physician to Charlotte of Savoy (wife of Louis XI), Queen Margaret, and Anne of Brittany (wife of Charles VIII)	addressed to Anne de Beaujeu (1461-1522), sister of Charles VIII and Duchess of Bourbon	1488 ^{an}
[41] <i>Das Frauenbüchlein</i> , a brief, anonymous German text	the manuscript version of the text is written as instructions to the pregnant woman	late 15th cent. ^{ao}

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
on regimen during pregnancy, childbirth, and postpartum care	herself; the printed text is addressed to both pregnant women and midwives	
[42] German text on obstetrics and neonatal pediatrics; when later printed by Eucharius Rößlin, an apothecary and physician, under the title <i>Der Swangern Frawen und Hebammen Rosengarten</i> ("The Rosegarden of Pregnant Women and Midwives"), it was expanded with material from the <i>Frauenbüchlein</i>	addressed in the manuscript version to "the common man" (<i>gemeiner Mann</i>); when printed in 1513, a dedication to Duchess Katharina of Braunschweig-Lüneburg was added, as well as an introductory poem addressed to laywomen and midwives	late 15th cent. ^{ap}
[43] anonymous Middle English <i>Regiment of Helthe</i> , a collection of precepts for maintaining both spiritual and physical health	in the prologue, the author declares that "euery wyse man and woman shold stodye howe they myght kepe them in good helthe bothe of body and sowle longe to endure"; in the one known copy, it is found with a gynecological text addressed explicitly to women (item 25 above)	15th or early 16th cent. ^{?aq}
[44] "Enseignement de Medicine", a brief French text on sexuality (based in part on a section of Aldobrandino's <i>Régime du corps</i> and portions of the French translation of the <i>Liber de sinthomatibus mulierum</i> [item 8 above])	closes with the claim that it was "fist et composa [par] maistre Albert de Florence pour la royne Sebille, qui en son temps fut tresnoble princesse, prudent et saige"; the text itself is addressed to female as well as male readers	late 15th or early 16th cent. ^{ar}
[45] <i>Manual de mugeres en el qual se contienen muchas y diversas receutas muy buenas</i> ("Manual for Women, in Which are Contained Many Very Good Recipes"), an anonymous Spanish collection of culinary, cosmetic and medical recipes	as the title indicates, this is meant to be used by women	late 15th or early 16th cent. ^{as}
[46] <i>Boke mad [by] a woman named Rota</i> , a Middle English gynecological text based on the <i>Trotula</i>	one of the two extant copies consistently uses second-person addresses to female patients/readers (the other copy, which was made by a male physician for his own use, omits these second-person forms)	late 15th or early 16th cent. ^{at}

Table 2

<u>Text and Author</u>	<u>Addressee</u>	<u>Date</u>
[47] German iatromathematical <i>Hausbuch</i> containing, among other things, charms, instructions, and surgical recipes (some of which have been extracted from the popular <i>Chirurgia</i> of Peter of Ulm)	compiled (presumably for her own use) by Regina Hurlweg somewhere in the upper Rhine area	late 15th or early 16th cent. ^{au}
[48] Ludovico Bonacciuoli's <i>Enneas muliebris</i> ("The Female <i>Ennead</i> "), a Latin treatise on obstetrics, embryology, and care of the newborn in nine books	dedicated to Lucrezia Borgia, duchess of Ferrara	published ca. 1505 ^{av}
[49] German cosmetic text, translated from the cosmetic sections of the Latin <i>Trotula</i> ensemble	despite the heading that opens the text ("This chapter speaks of how one should adorn men and women"), the work is devoted to women's concerns only; its second-person addresses seem directed at a female audience	<i>ante</i> 1509 ^{aw}
[50] book of English medical recipes and short tracts by an Italian physician, Donatus Antonius the younger, when he was prior of Bury St Edmund's	probably prepared by Donatus himself for Susanna Fontainblew or another female recipient	1510 ^{ax}
[51] "Recueil d'aulcunes confectiions et médecines bien spéciales et singulières, que madame la duchesse d'Arscot princesse de Chimay, marquise de Remy, comtesse de Porneau de Beaumont, etc. fait mectre en ordre l'an mil V ^e trente trois, hors de beaucoup de receptes particulieres qu'elle avoit chieux soy" ("Collection of special and unique confectiions and medicines, which Madame, the Duchess of Arscot, Princess of Chimay, Marquise of Remy, Countess of Porneau de Beaumont, etc. had put in order in the year 1533, together with many special recipes which she [Anne] chose herself")	a collection of French and Dutch medical recipes commissioned by Anne de Croy (d. 1539), princess of Chimay	1533 ^{ay}

NOTES

^a The text has been edited twice: H. Suchier, *Denkmäler provenzalischer Literatur* (Halle: M. Niemeyer, 1883), 473-80; and J. Brinkmann, *Die apokryphen Gesundheitsregeln des Aristoteles für Alexander den Grossen in der Übersetzung des Johann von Toledo*, inaugural diss. (Leipzig: Metzger & Wittig, 1914). At least 150 copies are known to be extant; see Charles B. Schmitt and Dilwyn Knox, eds., *Pseudo-Aristoteles Latinus* (London: Warburg Institute, University of London, 1985), pp. 54-75, and for those dating before the mid-14th century, Steven J. Williams, "The Scholarly Career of the Pseudo-Aristotelian *Secretum secretorum* in the Thirteenth and Early Fourteenth Century", Ph.D. dissertation, Northwestern University (Evanston, Illinois, 1991).

^b On this work, see Monica H. Green, "The Development of the *Trotula*", *Revue d'Histoire des Textes* 26 (1996), 119-203 (essay V in the present collection). An edition of one of the two extant manuscripts of the first Latin version can be found in Tony Hunt, *Anglo-Norman Medicine*, 2 vols. (Cambridge: D. S. Brewer, 1995-97), 2:116-28.

^c Green, "Development"; and eadem, *Women and Literate Medicine in Medieval Europe: Trota and the 'Trotula'* (forthcoming), Chapter 2.

^d Edited in Ron Barkai, *Les Infortunes de Dinah: le livre de la génération. La gynécologie juive au Moyen-Age*, trans. Jacqueline Barnavi & Michel Garel (Paris: Cerf, 1991); for corrected dating, see Barkai's later book, *A History of Jewish Gynaecological Texts in the Middle Ages* (Leiden: Brill, 1998).

^e Gundolf Keil, "The Textual Transmission of the *Codex Berleburg*", in Margaret R. Schleissner, ed., *Manuscript Sources of Medieval Medicine: A Book of Essays*, Garland Medieval Casebooks (Garland: New York, 1995), pp. 17-34, at p. 20.

^f Edited by Charles Daremberg in Salvatore De Renzi, *Collectio Salernitana ossia documentum ineditum, e trattati di medicina appartenenti alla scuola medica salernitana*, 5 vols. (Naples: Filiatre-Sebezio, 1852-59; repr. Bologna: Forni, 1967), 4:1-38. See also Monica H. Green, "A Handlist of the Latin and Vernacular Manuscripts of the So-Called *Trotula* Texts. Part II: The Vernacular Translations and Latin Re-Writings", *Scriptorium* (1997), 80-104, pp. 101-2 (LV1).

^g Green, "Handlist", pp. 89-90 (*Trotula* Fren1).

^h Green, "Handlist", pp. 90-91 (*Trotula* Fren21). Later versions delete the claim to a female audience.

ⁱ Green, "Handlist", p. 92 (*Trotula* Fren3); edition in Hunt, *Anglo-Norman Medicine*, 2:76-107.

^j Pierre Ruelle, ed., *L'Ornement des Dames (Ornatus mulierum): Texte anglo-normande du XIIIe siècle. Le plus ancien recueil en français de recettes médicales pour les soins du visage, publié avec une introduction, une traduction, des notes et un glossaire*, Bruxelles: Presses Universitaires de Bruxelles, 1967).

^k Tony Hunt, ed., *Popular Medicine in Thirteenth-Century England: Introduction and Texts* (Cambridge: D.S. Brewer, 1990), pp. 204-7 and 215-6; see also J. R. Gilleland, "Eight Anglo-Norman Cosmetic Recipes: MS. Cambridge, Trinity College 1044", *Romania* 109 (1988), 50-67.

^l Louis Landouzy and Roger Pépin, eds., *Le régime du corps de Maître Aldebrandin de Sienna: Texte français du XIIIe siècle* (Paris: Librairie Ancienne, 1911). See also Françoise Fery-Hue, "Le Régime du corps d'Aldebrandin de Sienna: tradition manuscrite et

diffusion", in *Actes du 110e congrès national des Sociétés savantes (Montpellier, 1985), Section d'histoire médiévale et de philologie*, t. 1: *Santé, médecine et assistance au Moyen Age* (Paris: Editions du C.T.H.S., 1987), pp. 113-34 [hereafter "Diffusion"]; and eadem, "Le Régime du corps d'Aldebrandin de Sienna: Complément à la tradition manuscrite", *Romania* 117 (1999), 51-77.

^m Paris, Bibliothèque Nationale, MS lat. 16089, s. xiii ex. (France?), f. 113ra; see also Green, "Development", pp. 142-43. Interestingly, these addresses to the female reader become attenuated in later copies of *De ornatu mulierum* 3, which circulates most frequently with alchemical texts.

ⁿ Cambridge, Trinity College, MS R.14.30 (903), s. xiii ex. (France), f. 211r: "Incipit epistola quedam brevis Ascaris philosophi. Ascaritanus philosophus scripsit hanc epistolam decerptam et defloratam a libris phisicalibus virtute filie sue Margarite de signis egritudinum mulierum et cure quas in gremio nature patientes rubore confuse veretur medicis elicere. Hic autem Ascaris[anus] Cleopatre regine fuit phisicus denunciatus. Hunc autem libellum transtulit Enricus Constantinopolim, familiaris Manuel imperatoris, et scripsit regine Anglie." This is a fascinating scenario of composition, complicated only by the fact that the text to which this preface is attached is the so-called *Gynaecia Cleopatrae*, a work that had already been circulating in western Europe, in Latin, since late antiquity. The preface is found in none of the other twenty-two extant copies of the *Gynaecia Cleopatre*.

^o Hiltgart von Hürnheim, *Mittelhochdeutsche Prosaübersetzung des 'Secretum secretorum'*, ed. Reinhold Möller, Deutsche Texte des Mittelalters, 56 (Berlin: Akademie-Verlag, 1963), p. 4: "Ich pit euch leser und leserinne/Das ir geleubig seit meinem krancken sinne . . ."

^p A. Collet, "Traité d'Hygiène de Thomas le Bourguignon (1286)", *Romania* 112 (1991), appeared 1994), 450-87. The text is extant in a single fourteenth-century manuscript. At the time the poem was composed, Maubuisson was under the direct authority of Marguerite of Provence (d. 1295), daughter of Béatrix of Savoy and widow of Louis IX. Thomas' own Savoyard origins, therefore, and the association with Marguerite may indicate that Thomas deliberately took Aldobrandino's *Régime* as his model and inspiration.

^q In Cambridge, St John's College, MS D.4 [James 79], s. xiii ex./xiv in. (England), ff. 83ra-rb: *Incipit liber magistri Petri de Salerno transpositus a latino in romanum ad instantiam Margaram [corr. Margarete?] Fregille regine Yspanie de omnibus op[er]n[on]ibus uniuersorum magistrorum tunc salerine [corr. Salernie] commorancium*. My thanks to Consuelo Dutschke for her expert paleographical dating of this manuscript. See also Tony Hunt, *Popular Medicine in Thirteenth-Century England: Introduction and Texts* (Cambridge: D. S. Brewer, 1990), p. 146. There is also an expanded and modified Middle English version; see Carol F. Heffernan, "The Wyse Boke of Maystyr Peers of Salerne: Edition and Study of a Fourteenth-Century Treatise of Popular Medicine", *Manuscripta* 37 (1993), 290-321, which includes a transcription of the French text from St John's College MS D.4. Not noted by Heffernan is another copy of the English text in Oxford, Bodleian Library, MS Rawlinson C 506, s. xv (England), ff. 2v-4v; as in the St John's manuscript, this copy appears with predominantly Latin texts. Heffernan identifies her "Maystyr Peers" as Peter de Barulo (also known as Peter de Salernia), an Italian physician living in London ca. 1387; this identification is contraindicated, however, by the early date of the St John's manuscript.

^r Green, "Handlist", pp. 92-93 (*Trotula* Fren4).

^s Edited P. Miquel Batllori, *Arnau de Vilanova. Obres catalanas. Volum II: Escrits mèdics* (Barcelona: Barcino, 1947), pp. 99-200. On the translator, Berenguer çà Riera, see Michael R. McVaugh, "Royal Surgeons and the Value of Medical Learning: The Crown of Aragon, 1300-1350", in *Practical Medicine from Salerno to the Black Death*, ed. Luis García-Ballester, Roger French, Jon Arrizabalaga, and Andrew Cunningham (Cambridge:

Cambridge University Press, 1994), pp. 211-236.

¹ Walton O. Schalick III (personal communication, June 1995) thinks it most likely that the dietary of Isabella was commissioned not by Isabella's brother (as asserted in one of the manuscripts), but her father, Philip IV (the Fair), who was very involved with medical matters during his reign (see Danielle Jacquart, "Medical Practice in Paris in the First Half of the Fourteenth Century", in García-Ballester, *Practical Medicine*, pp. 186-210). The English version is extant in at least six copies, for which see W. L. Braekman, *Studies on Alchemy, Diet, Medicine [sic] and Prognostication in Middle English*, Scripta: Medieval and Renaissance Texts and Studies, 22 (Brussels: Omirel, UFSAL, 1986), pp. 42-82. A forthcoming study by Françoise Féry-Hue on the so-called *Lapidaire du Roi Philippe* (composed in French before 1310) may help clarify the medical activities in Philip's court.

^u As yet unedited, the collection (or parts of it) is found in London, British Library, MS Sloane 2270, f. 57r; London, Wellcome Institute for the History of Medicine, MS 404, ff. 37r-41v; and Oxford, Bodleian Library, MS Ashmole 1438, pp. 8-28. My thanks to Linda Voigts for this information.

^v In its English version, this text opens: "This is the lytil boke of the vertuys of rosmaryn that the scole of selerne gaderyd and compiled at instance of the countesse of henowde, and she send the poepe and rosmaryn there with to her doughter qwene philyppe of yngelonde abowten the year of oure lord ccc and xliij [other mss give 1338], for befor that tyme was neuer rosmaryn knowyn in engelond" (Cambridge, Trinity College, MS O.1.13, ff. 77v-82v, at f. 77v). The text is said to have been translated out of the Latin, though if its alleged circumstances of production are to be believed, a French original would seem more likely. A partial edition is available in John H. Harvey, "Mediaeval Plantsmanship in England: The Culture of Rosemary", *Garden History* 1, no. 1 (September 1972), 14-21. On the English translator Henry Daniel, a Dominican friar of the latter part of the fourteenth century, see Ralph Hanna III, "Henry Daniel's *Liber uricisiarum*", in Lister Mathison, ed., *Popular and Practical Science of Medieval England*, pp. 185-218; and John H. Harvey, *Medieval Gardens*, rev. ed. (London: B. T. Batsford, 1991), pp. 159-62. The text has no obvious parallels with known French, Italian, or German treatises on the same subject; see Françoise Féry-Hue, "Le Romarin et ses propriétés: Un traité anonyme faussement attribué à Aldebrandin de Sienne", *Romania* 115 (1997), 138-92.

^w One manuscript says that it was the queen of Rome.

^x Hans-Peter Franke, *Der Pest-Brief an die Frau von Plauen: Studien zu Überlieferung und Gestaltwandel*, Untersuchungen zur mittelalterlichen Pestschrift, III 2; Würzburger Medizinhistorische Forschungen, 9 (Pattensen/Hannover: Horst Wellm, 1977).

^y Transcript in Montserrat Cabré i Pairet, "La cura del cos femení i la medicina medieval de tradició llatina", Ph.D. dissertation, Universidad de Barcelona, 1994, available on microfiche from Universitat de Barcelona, Col.lecció de Tesis Doctorals Microfitxades, núm. 2794, pp. 252-353. Despite its title, this text is not a translation of the *Trotula* but rather of the Latin *De ornatu* traditionally ascribed to Arnau de Vilanova and several other texts. See also the Appendix to this volume, s.n. Johan de Reimbamaco.

^z See Monica H. Green, "Obstetrical and Gynecological Texts in Middle English", *Studies in the Age of Chaucer* 14 (1992), 53-88 (essay IV in the present collection, hereafter cited as Green 1992), at pp. 64-68; and eadem, "Handlist", pp. 84-86 (*Trotula* Eng). A partial transcript can be found in Alexandra Barratt, *Women's Writing in Middle English*, Longman Annotated Texts (London and New York: Longman, 1992), pp. 29-35.

^{aa} See edition in Heffernan, "The Wyse Boke" (n. q above). This expanded text includes sections on astrology, signs of death, a Latin blessing on herbs, and recipes for "salves, playsterys, and oynementes."

^{ab} Féry-Hue, "Diffusion" (n. l above), pp. 124-25 and 134 (n. 48).

^{ac} Manfred Peter Koch and Gundolf Keil, "Konrad von Eichstätt", in Kurt Ruh, general ed., *Die deutschen Literatur des Mittelalters: Verfasserlexikon*, 2nd ed., in progress (Berlin/New York: Walter de Gruyter, 1978-), 5:162-69 (hereafter VL; entries will be cited by volume number and column number).

^{ad} Paris, Bibliothèque de l' Arsenal, MS 2889, s. xv, ff. 83r-138r: "L'erbier, composé par maistre Arnault de Villenoeuve, cathellain, translaté de latin en françois a la requeste de tre noble et souverainne dame, madame Ysabel de Bavieres, jadis royne de France." After explaining the genesis of the text for the king of Aragón, the preface concludes: "Puis apres par une espasse de temps ce present traitie vient a la congnaissance de la tres souuerainne dame, dame ysabel de bauieres, jadis royne de france, la quelle expressement comanda a vng sien souuerain medecin et secretaire qui fut mis de latin en françois affin quelle le peust aulcunement entendre." This manuscript also contains the second French translation of the pseudo-Albertus Magnus, *Secreta mulierum* and "Le Tresor et petit traité utile pour les simples gens sur l'art de medecine et cyrurgie", speciously attributed (like the herbal) to Arnau de Vilanova. The same group of texts is found in Vatican, Biblioteca Apostolica Vaticana, Reg. lat. 1264.

^{ae} *Aydes de la mayre* is extant in three mss; see the Appendix to this volume.

^{af} Green, "Handlist", pp. 83-84 (*Trotula* Dut3).

^{ag} Cambridge, Trinity College, MS R.14.52 (922), ff. 107r-134v. This text, misidentified as a translation of the *Trotula*, was edited from London, British Library, MS Sloane 2463 in Beryl Rowland, *Medieval Woman's Guide to Health: The First English Gynecological Handbook* (Kent, Ohio: Kent State University Press, 1981). For fuller discussion of the text's sources, see Green (1992), pp. 72-82.

^{ah} Green, "Handlist", p. 101 (*Trotula* Ital2).

^{ai} Ferran Soldevila, "La reyna Maria, muller del Magnànim", *Sobiranes de Catalunya. Recull de monografies històriques* (Barcelona: Fundació Concepció Rabell i Cibils, viuda Romaguera, 1928), pp. 317, 321.

^{aj} Transcription in Cabré (n. y above).

^{ak} See the Appendix to this volume, s.n. Michele Savonarola.

^{al} See the entry for Metlinger by Gundolf Keil and Friedrich Lenhardt in VL 6:460-67.

^{am} Dresden, Landesbibliothek, MS 278: "Item hab ich Meister Nichl(aus) Johannes vor meine Hussfrawe gedicht, auss dem latein deut zcu machen Egidius de vrinis." See Gundolf Keil, "Der Hausvater als Arzt", in Trude Ehlert, et al., eds., *Haushalt und Familie in Mittelalter und früher Neuzeit* (Sigmaringen: Jan Thorbecke, 1991), pp. 219-43, at p. 220.

^{an} Paris, Bibliothèque Nationale, MS lat. 7064 (28 Dec. 1488): Bernardus Chaussade, *Tractatus de conceptione et generatione praecipue filiorum*, ff. 1r-82v. On Chaussade, see Wickersheimer/Jacquart, 1:73. Chaussade does not name Anne, but refers to her as "christianissimi karol. octavi francorum regis soror inclita et primogenita. eiusdemque regis regni incolarum et tocius rei publice fautrix, benefactrix, et defensatrix. Ac nobilissimorum borboniorum ducissa et prepotensima domina multa dictauerint."

^{ao} Edited in Britta-Juliane Kruse, *Verborgene Heilkünste: Geschichte der Frauenmedizin im Spätmittelalter*, Quellen und Forschungen zur Literatur- und Kulturgeschichte, 5 (Berlin: Walter de Gruyter, 1996). See also her earlier study, "Neufund einer handschriften Vorstufe von Eucharius Rößlins Hebammenlehrbuch *Der schwangeren Frauen und Hebammen Rosengarten* und des *Frauenbüchleins* Ps.-Ortolfs", *Sudhoffs Archiv* 78 (1994), 220-236.

^{ap} The one known manuscript of the text is described by Kruse in "Neufund" (see previous note); on the definition of "the common man", see p. 231. The text was printed in

Table 3

	<u>C</u>	<u>D</u>	<u>E</u>	<u>F</u>	<u>G</u>	<u>H</u>	<u>I</u>	<u>L</u>	<u>S</u>	<u>U</u>	<u>Total</u>
owned	—	—	1	4	1	—	—	—	—	—	6
addressed	—	—	2	1	—	—	—	—	1	—	4
Surgery											
owned	—	—	—	7	—	—	1	4 ⁱ	—	3	15
addressed	—	—	—	—	—	—	—	—	—	—	0
Theory											
owned	—	—	—	—	—	—	—	23 ⁱ	—	—	23
addressed	—	—	—	1	—	—	—	—	—	—	1
<hr/>											
TOTALS											
owned	4	0	8	47	9	1	1	46 ⁱ	2	10	128
addressed	4	1	9	14	10	1	2	8	2	0	51

NOTES

^a Note that women in England and the Low Countries were among the owners of these French texts.

^b This category includes all texts designated in the sources solely as "medical books", with no further specification of contents.

^c These may include some obstetrical material.

^d In these three texts (Table 2, items 24, 35, and 36) the cosmetic material predominates over the gynecological; they also include some general regimen material.

^e I have included treatises on the properties of stones in this category.

^f I have entered the tract on rosemary made for Philippa of Hainault (Table 2, item 22) only under English, since that is the only language in which it is currently known to be extant.

^g This group includes texts that, although highly ordered and including theoretical explanations of, for example, etiology and symptomatology, are ultimately therapeutic in orientation. See Table 1, items 6 (#4), 11 (#1), 15 (#2), 22 (#4), and 29.

^h I have entered Margaret Beaufort's Latin and English collection of plague tracts (Table 1, item 11, #1) only under "English" since it is known that she knew no Latin.

ⁱ See the caveats on p. 13 of the text concerning the problems of considering inheritance equivalent to "ownership".