Laura Malfatto

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Correspondence should be addressed to:

Malfatto Laura, Biblioteca Berio – Sezione di Conservazione e Raccolta Locale
Via del Seminario, 16 – 16121 Genova I
e-mail: lmalfatto@comune.genova.it lmalfatto@fastwebnet.it

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Articoli/Articles

BOOKS, PRINTING AND MEDICINE IN THE RENAISSANCE

VIVIAN NUTTON The Wellcome Trust Centre for the History of Medicine, University College London, E

SUMMARY

The history of the medical book in the Renaissance is only just beginning: there still are enormous gaps in our knowledge. Some general points may be emphasised: doctors, surgeons and apothecaries were often literate; the culture of the doctor was founded at least as much upon the book as upon practical experience. Much is known about the history of the printing press: but in focusing on expensive, luxury books such as Vesalius' Fabrica we often leave out average products such as the many other anatomy books printed in the 16th century. The most significant feature of printing is perhaps the increase of the amount and variety of what was available and accessible to readers.

Looking specifically at one type of book, the plague treatise, the amalgamation of public and private allowed by the printing press becomes apparent. Knowledge was disseminated from universities to the general public: plague texts are scattered in many different private and public libraries, and any attempt at a general survey is bound to be provisional.

The history of the medical book in the Renaissance is only just beginning. We are like nineteenth century explorers in the African jungle, for ever making spectacular discoveries, for ever finding something of interest, but at the same time unable to see the wider terrain, either because there are no clear vantage points or, more insidiously, because the maps on which we are forced to rely are often outdated and plain wrong. Different groups of explorers have

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cleared away part of the jungle - we have a serviceable list of medical and scientific books printed before 1501, although much has been added in the nearly 70 years since Klebs published his list¹; we are very well informed of the fortunes of Galen and Hippocrates in the sixteenth century, and, in general, we know far more about the printing, distribution, and interpretation of Greek and Roman authors in that period than about their medieval successors, let alone about Renaissance authors themselves². A few great names, Vesalius, Paracelsus, Fracastoro, for example, have received detailed bibliographies, but they have been the exception. Besides, bibliographers have spoken largely to bibliographers, medical historians to medical historians, and historians of book culture have rarely ventured to consider science - or at any rate science without illustrations. A glance at the excellent recent chapter on the medical book in the sixteenth century by Ian Maclean shows what has been achieved so far, while at the same time pointing to the enormous gaps in our knowledge³. It is not my intention to fill in those gaps nor to cover everything. But rather, I want to emphasise first some general points that are often forgotten by those who see books simply as objects to be consulted in a modern library, and then to look specifically at one type of book, the plague treatise.

I begin with one crucial point: doctors, surgeons, and apothecaries were usually literate, and doctors and leading surgeons were usually literate in Latin as well as in their own language. They were also, on the whole, wealthy, able to buy books out of their own resources and to build up their own libraries. Georg Palma, civic physician of Nuremberg, left his library of 651 volumes on medicine (and much more) to the city of Nuremberg at his death in 1591⁴. Some he inherited from his stepfather, some were given to him by friends, other he bought at fairs, others he ordered from booksellers, still others he acquired, we know not how, from a local monastery.

The culture of the doctor was founded at least as much upon the book as upon practical experience. Together with lawyers, doctors offered a ready and a profitable market for the productions of scribes and printers. For example the most successful of all the books of François Rabelais in his lifetime was not Gargantua et Pantagruel or any other of his literary works for which he is today famous, but the selection of Latin versions of Hippocrates and Galen that he edited for the Lyons printer Gryphius in 1532⁵. The reason was because this volume provided in a convenient form the 'new' humanist Latin translations of the standard texts of the medical curriculum. Almost as an afterthought Rabelais appended an edition of the *Aphorisms* of Hippocrates in their original Greek, the first printing of an ancient Greek medical author North of the Alps. Alas, in most of the copies that I have seen this was a vain gesture: the Greek pages were never opened.

One might argue that Gryphius had misjudged his market, like the Venetian printers, Callierges and Vlastos, whose beautiful edition of the *Method of Healing* of Galen in Greek, published in 1500, effectively bankrupted them⁶. But Gryphius was no fool: he was merely dipping his toe into the water, testing the market to find what it could bear. Modern claims for the renaissance printer as a scholar, innovator and catalyst of change need to be balanced by those of the printer as consumer and craftsman, a businessman who worked to eat and who had no wish to jeopardize himself or his family by investing in a product that would not sell⁷. Complex negotiations were often necessary in order to publish a classical text, and success was far from assured: the Aldine publication of Greek medical authors broke off half way through the Aldine edition of Aetius in his original Greek in 1534 - and the consequences are still with us today, for no printer has yet been brave, or foolish, to complete the task.

Yet by focusing on the process of print, we often leave out the middlemen, the booksellers, the shippers and so on, like Garret Godfrey in Cambridge, who arranged for a book published in Lyons, or Venice to appear quickly on the shelves of a Cambridge professor⁸. The journey of the book from publisher to future owner had its own hazards. When the English ambassador in Paris in 1542 received a parcel from Italy for transmission to Henry VIII, he had it opened, on the grounds that 'Italy was full of poison' and there were traitors who might wish to send he knew not what. His discovery that all it contained was the presentation copy of Brasavolàs commentary on Hippocrates' *Aphorisms* resulted in a grovelling apology to the King⁹. The next year, a copy of the *Epitome* of Vesalius' *Fabrica* on its way from Basle to Joachim Vadianus at St. Gallen was lost when the messenger's horse fell into a stream; the publisher grudgingly provided a replacement copy - the fate of the horse is unknown¹⁰. We know more about Vesalius' *Fabrica* than about perhaps any

provided a replacement copy - the fate of the horse is unknown¹⁰. We know more about Vesalius' *Fabrica* than about perhaps any other Renaissance book. We know the circumstances of its writing, we know many technical details of its production, and that of subsequent editions. We have bibliographies and lists of the current whereabouts of copies¹¹. As an object of beauty, it forms the centrepiece of exhibitions around the world, and attracts the admiration of art historians, doctors, and the general public. One of Fermòs copies, handpainted, is rightly one of the great treasures of the Biblioteca Comunale. The *Fabrica* has come to stand as the example of the renaissance medical book, marking by the sheer quality of its prose and the wit and elegance of its illustrations, to say nothing of their accuracy, the change from the manuscript world of the Middle Ages to the new world of the printed book.

But while we can admire the technical brilliance of the Fabrica, and the way in which Vesalius and its publisher Oporinus, for perhaps the first time, harnessed the power of the printing press to produce repeated images of high quality integrated into the textual narrative, the historian must not forget one thing: Vesalius' Fabrica was a luxury item, one of the most expensive books produced in the sixteenth century. To take this, or any other of the large and spectacular illustrated books, like the De Historia Stirpium of Leonhard Fuchs, Basle, 1542, as typical of the renaissance book is to begin at the wrong end. Such books were aimed at one small portion of an expanding market. They added value and expense to what was already valuable and expensive. For example, the famous herbal of Pietro Andrea Matthioli only received its illustrations in 1554, ten years after its first publication and after it had already gone through three ever larger editions. The illustrations for which it remains famous today were added to it still later, first in the German translation of 1562 and then in editions in Italian and Latin¹².

One should remember also that very few books on anatomy were printed with illustrations - and the 1552 Lyons reprinting of the Fabrica did without them almost entirely. The renaissance anatomy book that comes closest to Vesalius in the quantity and precision of its illustrations, the *De Dissectione* of Charles Estienne, was intended, like the *Fabrica*, to appeal to a broad audience of wealthy connoisseurs as well as professors, who could appreciate the visual wit of the transformation of the loves of the Gods into the inner organs of humans¹³. Matthioli, Vesalius and Estienne are the successors of the illuminated manuscripts of the Middle Ages, prepared for a wealthy clientele.

Far more significant than the Fabrica itself from the point of view of the impact of printing was its Epitome, deliberately aimed at a less wealthy market, printed on poorer paper, with few pictures and with a poorer typeface, but published at a price that more could afford¹⁴. Vesalius had already tested the same market with his Tabulae Sex, and even before 1543 publishers around Europe were bringing out their sets of anatomical fugitive sheets. Sold for a few pence, not pounds, these sets of male and female anatomy used flaps to reveal the insides of the body, and were accompanied by a brief text, sometimes in latin, sometimes in the vernacular. Some were used in conjunction with university lectures, as at Wittenberg, but others seem to have no direct connection with the academic world¹⁵. There is no doubt about their popularity, or about the commercial success of the rather more sophisticated set of anatomical plates based ultimately on Vesalius that were published and republished by Jacques Grevin from 1565 onwards 16.

But to talk of illustrated books is misleading in one way. They formed only a small proportion of medical books, perhaps less than three per cent of the total, a reminder that there is as much variety among medical books as among their owners and readers. It is similarly misleading to think largely in terms of reprints of classical texts. True, one of the results of the invention of printing was that it

stopped the steady disappearance of earlier works preserved only in manuscript. Half a dozen works of Galen were lost in Greek between 1300 and 1525; no ancient medical text disappeared once put into print, although more than one seems scarcely to have been read at all¹⁷. But classical and medieval authors formed a steadily diminishing proportion of books in print; Jon Arrizabalaga has calculated that living authors already formed perhaps 40% of those in print by 1500, and topped 50% by the 1540s, if not a decade earlier¹⁸. This is only one aspect of perhaps the most significant feature of printing, namely that it substantially increased the amount and variety of what was available and accessible to readers.

It did this in a variety of ways. Firstly, it elided the division between public and private. In medicine, it led first to the proliferation of large volumes of consilia, collections of private advice to patients. By the end of the sixteenth century, in the hands of the Dutch Hippocrates, Pieter van Foreest, private case notes were presented in the form of Observationes, each of them supplied with a detailed commentary as if they were a classical text¹⁹. Another novelty of printing was the medical epistle, like those of Giovanni Manardi or Johannes Lange. What was ostensibly a private communication between colleagues, circulating between friends, here became a public statement, sometimes deliberately selected and refashioned for public consumption²⁰. Where on this spectrum of public and private one is to place the apparently unauthorised pirating of the lecture notes of distinguished professors by pupils and printers is a more difficult question, for some professors turned a blind eye to this activity or, like Giambattista Da Monte at Padua, allowed favourite pupils to hand over their copies to the press. My point here is not that consilia, epistles, and lecture notes could not or did not circulate widely in the Middle Ages, but, rather, that this became far more common and far more extensive in the sixteenth century.

Another example of the amalgamation of public and private comes with books of household remedies and such like. Many literate households in the middle ages kept books containing recipes and household hints, sometimes handed down from one generation to ano-

ther, sometimes compiled from recipes handed on by others by word of mouth. These continue into the world of print, but they are supplemented, and gradually superseded by printed texts - in considerable numbers and editions²¹. The National Library of Medicine Catalogue lists 28 editions of the Secretes of the Reverend Maister Alexis of Piedmont, containing excellent remedies against divers diseases, woundes and other accidentes, which appears in Latin, Spanish, Dutch, Italian, French and German, as well as in two different English versions, one from the French, the other from the Italian²². Some of these books had long been familiar: Thomas Moulton, whose Mirror or Glass of Health went through at least seventeen editions between 1530 and 1580, was no renaissance man, but a Dominican friar of the fifteenth, if not the fourteenth century²³. The Regimen Sanitatis Salernitanum went through at least 50 editions, in a variety of languages²⁴. But there were also modern best sellers. Lionello Vittori's Practica medicinalis was published at Ingolstadt, Venice and Lyons, and was still being reprinted in the 1570s, 50 years after the author's death, but most historians of medicine or medical bibliography have never heard of him²⁵. The same could be said for the treatise On herbal distillations, by the Dean of the Vienna medical faculty, Michael Puff von Schrick, or, to be more accurate, by Puff and pseudo-Puff, which went through at least 38 separate printings between 1486 and 160126. Studies of these short practical treatises, frequently in the vernacular, are remarkably few in number, despite their obvious importance in preserving and transmitting a medical culture to a a non-professional public. These books were usually printed cheaply and in a small format. They popularised, some might say democratised, medical learning by making it available to a wider audience²⁷.

The printing press also allowed the dissemination of knowledge from universities to the general public. In Lutheran Germany, Philipp Melanchthon wrote his lectures on Aristotlès *On the Soul* specifically as a Christian anthropology to be studied by everyone attending the University of Wittenberg, future pastors as well as future physicians. For these lectures, he took advice from the Wittenberg

professors of medicine as to the best medical writers to use for his account of the human body. In the first printed edition, of 1540, he relied heavily on Galen; for the second, in 1552, he used Vesalius' Fabrica to preach an identical message. God's wisdom and understanding is visible in the natural world of the human body²⁸. But this message was not confined to universities. Printing allowed it to penetrate into schools, whether in the form of a rewriting in simpler fashion, as in this abridgement by Matthias Dresser, rector of the gymnasium at Pirna in Saxony, or more graphically in the form of Ramist tables chosen by Johannes Grun, rector of the gymnasium at Juterbog in Brandenberg, scarcely a day's ride away from Wittenberg. These tables, it was believed, were not only an effective way of organising onès material and rendering it memorable; they were also cheaper to produce and to buy, a mere 16 pages in length as compared with the two or three hundred in the original²⁹.

This proliferation of small volumes stands in contrast to the Middle Ages, where books tended to be large, collections of treatises sometimes five or six hundred pages long. Not everyone approved of the change: 'compendia dispendià, 'compendia are a waste of money' grumbled the Swiss physician, botanist and bibliographer Conrad Gesner, an author with a definite liking for the massive folio, witness his Bibliotheca Universalis or his Historia Naturalis. Small volumes, he thought, were always in danger of being mislaid, whereas one would be hard pressed to lose a large volume of Galen³⁰. There were other practical reasons for preferring a large volume over the small. If one had a large Articella, wrote one German physician, Wolfgang Reichart, to his student son in 1524, one had no need to bring in further books into the lecture room, for modern medicine was simply an extension of the older ideas contained therein³¹. One could copy into its broad margins everything the lecture said, as well as whatever one had read. But Reichart was fighting a losing battle. The folio retained its place in the libraries of the learned, but increasingly it was accompanied by volumes in smaller format. One has only to compare the lists of the libraries of John Caius, mostly bought during the 1540s and 1550s, with those of the Cambridge Regius Professor of Physic, Thomas Lorkyn, a generation later to observe the change³². It is no coincidence that most of the writings of the greatest of all anti-academic physicians, Paracelsus, were, with one exception, never published in large format - and that exception proves the rule, for this was his *Surgery*, the Grosse *Wundarztney*, the *Opus Chirurgicum*, the book of Paracelsus in which he came closest to a comprehensive survey of standard learning, albeit in surgery³³.

The printing press preserved the past, but it also permitted a remarkable proliferation of new learning. Printers quickly became associated with local universities, or with important markets, like Strasburg, but they could also work from a small town like Schwäbisch Hall, a familar name to historians of medical astrology. There was an increased need for ways to capture and to organise this abundance of learning that seemed to be in running out of control. Encyclopedias grew ever larger in their attempts to contain knowledge: Theodore Zwinger's Theatrum humanae vitae ran to 29 large volumes; Conrad Gesner's Bibliotheca universalis was a massive 631 pages long, and over a thousand pages, if the *Pandectae* are included³⁴. Its epitomes tell a similar story of a valiant effort to organise an ever-expanding world of books: the second edition of 1555 added over 2000 authors to the original catalogue of 1551, the third edition, of 1574, was more than three times the length of the second³⁵. Systems of classification, like those of Ramus, became increasingly important in allowing one to find ones way through and to the information available³⁶.

Private libraries themselves grew in size. True, we know of several doctors in the Middle Ages who collected large numbers of manuscripts, Amplonius Ratingk at Erfurt, Giovanni Marco da Rimini at Cesena, Niccolo Leoniceno at Ferrara, but these were exceptional. A single studiolo, even a single bookcase, was perhaps enough to house the books of most practitioners. By 1600 there were many doctors who owned over a hundred books, and some collections ran into thousands. Institutional libraries grew apace. The town Gymnasium at Zwickau in Saxony seems to have regularly bought

whatever came from the Leipzig presses, while one of the duties of the professor of medicine at Heidelberg was each year to visit the Leipzig fair to buy books for the Faculty³⁷. Such collections are particularly important when they can be isolated from a larger body of books or, as here in Fermo, where they are the result of the collecting by one individual. The fondo Spezioli is remarkable in its extent and in its variety, and is what makes Fermo so important in the history of medicine for the insight it gives, and will assuredly continue to give, into the thinking and habits of one distinguished medical man³⁸.

But acquiring books is not the same as reading them - few of us, I suspect, have read all the books in our possession, let alone cover to cover. Sixteenth-century owners were no different. It is not unusual to come across a translation of Galen, bought perhaps in a first flush of enthusiasm, whose pages have never been opened beyond the end of the first book - and sometimes even before that. One can only admire the bravery of the owner of the Baltimore copy of Vesalius' De humani corporis fabrica of 1543, who began to write into it the numerous changes he found in the second edition of 1555, and who completed the whole of Book 1 before overwhelmed by the size of the task³⁹. How many scholars, like Melanchthon, ever read their Fabrica to the very end - or, to be precise, to within a few pages of the end, for that is where his comments and corrections end⁴⁰? One can learn about the habits of famous authors from their marginalia: it is no coincidence, for example, that William Harvey should have underlined in his copy of Galen's minor works every single word relating to experiment, knowledge, proof and the like, for Harvey, it needs no saying, was always extremely scrupulous about the need to prove the truth of his case, and to deploy a whole range of diverse arguments in so doing⁴¹. Whether the attitude of readers and annotators towards the text changed over from decade to decade is an almost impossible question to answer, but it is my impression, and it is only an impression, that the type of academic annotation changes very little between the fourteenth and early seventeenth century, with the rare exception of those sixteenth century scholars,

like John Caius, who filled the margins of the Greek texts with variant readings of editions and manuscripts⁴². But this was at best an interest of a tiny minority of scholars, let alone of all medical practitioners.

This paper has attempted so far in very general terms to show how medical historians and historians of the book can benefit from each other. This last section takes as a specific example one type of medical literature, that dealing with plague. By this I mean printed literature specifically referring in its title to plague, pest, or pestilential fever. I have thereby excluded works dealing with the proper usage of theriac or how to recognise and use the twelve 'pest roots', both well kown remedies for plague. I have also left out official plague ordinances and theological sermons either praying for an end to plague or discussing whether the Christian should flee a city in time of plague. Similarly, I have not taken into account treatises dealing with fevers in general, of which pestilential fever form one type, or with epidemic diseases that were not considered to be plague, e.g. the English sweat, petechial fever, or the lues Morava⁴³. With so many exclusions, the amount of material might be considered to be relatively small. Far from it. In terms of numbers, according to my calculations, that plague tracts, of whatever length, formed a minimum of seven per cent of all works on medicine published in the Cinquecento, which gives some indication of the importance of plague in the universe of disease⁴⁴.

My second, perhaps surprising, conclusion is that very little work has ever been done on these tracts. There exist a handful of bibliographical studies of, e.g. plague tracts printed at Antwerp, and rather more investigations of the theories of plague advanced in these texts or in a few areas, e.g in N. Italy. But medical historians have been singularly unwilling to confront this literature for itself⁴⁵. The reason is simple: plague texts are too numerous and difficult to locate in a single library, or even in several, and plague still awaits its Ernst Zinner to bring together and to check all this scattered information⁴⁶. There have been attempts. As early as 1590 Paschalis Gallus listed printed books on plague by some 80 authors, begin-

ning with Hippocrates. Some of them are famous today, but many are not⁴⁷. But Gallus' estimate was out by a very wide margin: the true figure for the whole of the sixteenth century will be closer to 500, and the number of separate printings perhaps twice that. If one compares two institutions with major holdings in this period, Wellcome and NLM, of their total of 450 titles only 30% is held in common; or to put it another way, only 40% of NLM's holdings is also in Wellcome, well down on the average overlap of 50% The Herzog August Bibliothek, Wolfenbüttel, the major German repository of early printed books, has more than a hundred such tracts, many of them unique but only a few coming from outside Germany⁴⁸. Even Fermo has two plague tracts that are not found in the three libraries just mentioned⁴⁹.

This abundance of material means that any survey at present is bound to be provisional, especially when, as here, it is confined to three different aspects of plague books; production, acquisition, and preservation.

To begin with preservation, most of these books are small and produced on poor paper. Roughly 30% of these texts is in Latin, i.e. intended for a learned audience outside the confines of any one linguistic area, and it is these books that tend to survive today on the shelves of a learned library. They are rarely bound together with other books, and when they are, the common pattern is for a plague tract to be bound along with a more general manual of health, a material counterpart to the literary publication of a plague tract as an appendix to another, more general manual of medicine⁵⁰.

But it is the conditions of production that are crucial. Almost three quarters of plague tracts known to me are in the vernacular languages - German, Italian, French, Spanish, English, Dutch, Danish, even Czech and Catalan, i.e. they are intended for a literate local audience. They are often published in towns without medical schools, and without a substantial tradition of medical printing - Asti, Carmagnola, even Macerata and Camerino, or at Neustadt an der Hardt, Neisse, Schmalkalden and Unna, for example⁵¹. They are usually short in length and small in format. 70% have fewer than 70

pages, perhaps half fewer than 50. Folios and large quartos are very rare (or very early); octavo and sedicesimo editions are common. A day or two at most would have sufficed to set them up in type, and many could have been printed on a single large folio sheet before it was folded - or on two or three at most. Their authors do not on the whole come from the scribbling classes. Fewer than 40% are known by more than a single plague tract. Still fewer held chairs at a university. The great majority were local physicians, university educated in the standard Galenism - Paracelsian writers of plague tracts are extremely rare. Leaving aside the plague tracts ascribed to Paracelsus which raise their own problems, Condiòs Medicina filosofica contro la peste, published at Lyons in 1581, is the only one on my list, unless one adds the plague tracts of Guinther von Andernach and Leonardo Fioravanti - again an indication that in the late sixteenth century Paracelsan doctors still remained outsiders⁵². Although they might treat a royal household, few were civic physicians, still fewer university professors.

These tracts bear physical witness to what we are told by one intelligent author, Simone Simoni. When plague struck Leipzig in 1575, its inhabitants sought advice from the university and from the civic doctors about what they should do. There was a general expectation that such practitioners should provide this information, whether informally, or formally by some public means, out of civic duty. Simoni himself, the Elector's personal physician, sat down to write his tract a week or more into the outbreak, but was unable to have it printed because the printers had closed down and left town to avoid the plague. But, Simoni consoled himself, his work was not in vain: plague was so common that it would inevitably recur shortly, and people would then be able to rely on his book⁵³. Elsewhere one can see printers swiftly reissuing their own publications or reprinting tracts found elsewhere. Johann Ewich wrote his tract originally in Latin in 1582; an enterprising colleague turned it into German, and it was printed shortly after at Mühlhausen; 13 years later, when plague next arrived, the same printer swiftly reissued it⁵⁴. The plague tract of Caspar Kegeler seems to have been a particular favourite. It

first appeared at Leipzig in 1521, and was reprinted four years later; Kegeler brought out an enlarged second edition in 1529, which was reprinted a further five times, including once at Eisleben and possibly once at Wittenberg. It was, if not an entirely local, at least a regional production. In 1553, Kegeler's son, Melchior Kegeler, produced a more ambitious revision, which enjoyed a much wider success, being printed also at Breslau, Graz, Dresden and Cologne before 1600⁵⁵. Interestingly, while the medieval authors of plague tracts, such as Johannes Jacobi and Benedictus Kanuti, dominate printings before 1500, they figure only rarely in the sixteenth century, usually appearing only in composite volumes.

For the most part, then, these texts are unique, local, almost ephemeral publications, rarely reprinted, aimed at a specifically local market. Their closest parallel in every way is with the astrological Practicae, or almanachs, another type of medical literature produced by local physicians.

None of this is new or surprising, save possibly the extent and number of these tracts. But the consequences of this literature for our understanding of print culture, and of the uses of print, has never been exploited. I give one very brief example, a contrast between Germany and England (there are no publications from Scotland, Wales or Ireland). Germany is a region where print culture is dominant, and where printers and writers are quick to publish; probably over half the plague tracts ever written were printed in the German lands; their authors number well over 200. The contrast with England is marked: in his study of medical publications in English, Paul Slack lists a mere 23 titles and 42 editions published between 1486 and 1604, constituting 15% of all medical printings in English⁵⁶. But this is somewhat misleading, for only two thirds of these were actually published in the sixteenth century. Often these tracts were appended to other more general works on health, like Moulton's Mirror of health; separate tracts are very rare until the 1570s. Often, too, they were translations of older works from the Continent in French or occasionally Latin⁵⁷. Only two or three authors call themselves physicians, and only one, William Bullein,

was a member of the College of Physicians of London, although he lived and practised seventy or eighty miles away⁵⁸. They are more often clergymen, schoolmasters, translators, even lawyers, often living far away from London⁵⁹. Simon Kellwaye, for example, the author of a *Defensative against the Plague*, was a Devon gentleman, a friend and neighbour of the owner of the Wellcome copy⁶⁰.

Two complementary explanations can be offered for this unusual state of affairs. The first is that a print culture did not go deep into Tudor England as compared with Italy or Germany, and certainly not until the last quarter of the century⁶¹. The second, and much the more important, is that England lacked the medical numbers and institutions that elsewhere encouraged the writing of such tracts. Graduate physicians were very, very few; the universities of Oxford and Cambridge were physically isolated from the capital; and civic physicians did not yet exist. However much travellers to Italy might wish to introduce into England the public health institutions and regulations they had experienced on the Continent, their aspirations were not fulfilled in the sixteenth century. In other words, the medical infrastructure that encouraged the writing of plague tracts was largely missing in England. My last example neatly proves the point. In 1560 The London publisher Thomas Purfoot brought out a tiny plague tract on the continental model, written by a licentiate in medicine and dedicated to Queen Elizabeth⁶². Its author, Janus Julius Monacius, had studied in Paris and Cologne, and, although his preface is mainly in Latin, his plague tract is written in French; i.e. it was intended for the benefit of the French community of exiled Protestants in London and, possibly, for the handful of English readers who knew French. It was, in short, a continental production that owed next to nothing to its English surroundings.

Finally, how were plague tracts used? Many are today preserved in a poor condition, one possible indication that they were read; others were bound together with a manual of domestic medicine, to serve as a major resource for the household. A few copies bear annotations and corrections. The contemporary owner of Kellwayès plague tract, now in the Wellcome Library, notes that the best time to

make this plague water is in May or June⁶³. Secondly, roughly ten per cent of the medical library of Georg Palma, the doctor and Stadtarzt at Nuremberg, was formed of plague tracts, comprising sixty printed volumes and one in manuscript. Many contain his marginal notes, and at least one of them bears evidence of Palmàs revisions in preparation for a future reprint when plague next struck⁶⁴. In one unusual instance, an annotator covered his plague tracts with copious notes, often deriving from his practice. The Wellcome Library has recently acquired a collection of six French plague tracts from around 155965. Its owner, Pierre Costan, was a graduate of Montpellier, who used them while working at Rodez in S. France in the late 1550s and 1560s. Five of these tracts are bibliographical rarities, two of them unique. One of this pair, by an otherwise unknown Guillaume Dassonville, was originally written at Béthune in December 1546 and printed the next year at Paris⁶⁶. The second, printed at Toulouse in 1558, was a list of proven remedies against the plague put out by the Bishop of Rodez to help his flock⁶⁷. At various points in these texts, Pierre Costan notes in a very tiny hand his own experiences during plague over several years at Rodez⁶⁸. In one book he altered and corrected the wording of the text as if in preparation for a future edition under his own name. But few plague tracts, it must be admitted, show such intensive use as these, for their format and poor quality of production left hardly any room or opportunity for annotation.

But what of Fermo? In her study of plague tracts in the Library, Fabiola Zurlini lists a mere nineteen authors, a tiny fraction of Speziolis library. These tracts have one striking feature in common: they are almost entirely cinquecentine. Only one plague tract was printed during Speziolis lifetime - and that one he seems to have given away before he made his bequest to Fermo⁶⁹. This small number appears to conflict with what I have already said about the ubiquity of plague tracts, but there is a simple explanation for this discrepancy. First, Spezioli was only briefly a medico condotto, concerned with public health; in Rome he was a professor and a private physician to the very wealthy⁷⁰. Secondly, by his day, plague had

become very much a disease of the poor, localised even when it attacked a town; whether this was because the bacillus itself had become less virulent, and whether the complex provisions put in place by the Health Boards were finally working, is not clear. But the rich had long adopted the safest of all remedies – flight – and only in the gravest of epidemics were they seriously affected. Spezioli, the great physician, was concerned far more with medical theory and with understanding the personal humoral balance of his patients. Unlike Stadtarzt Palma, he did not need a large personal library of plague tracts from which to choose appropriate guidance for the general public.

This final example illustrates neatly my main point. Books on medicine are far too important to be left to bibliographers alone — or to medical historians alone. Both groups can learn much from the investigations of the other, and an understanding, based on autopsy, of the historical background of the composition, production, distribution and use of individual volumes can reveal much both about the practice of medicine and the development of a medico-scientific literacy.

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- 70. Soon after graduation, he served as medico condotto at Grottamare (1665-6), Ripatransone (1666-71) and Iesi (1671-5), all places with strong connections with the Azzolino family and with his Roman patron, Cardinal Decio Azzolino.

Correspondence should be addressed to:

Vivian Nutton, The Wellcome Trust Centre for the History of Medicine, University College London, England.

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Articoli/Articles

COMMENTI IPPOCRATICI IN ETÀ MODERNA

THOMAS RÜTTEN
School of Historical Studies, University of Newcastle, UK

SUMMARY

HIPPOCRATES COMMENTARIES IN MODERN AGE

The Hippocratic commentaries represent a genre utilised not only by university teachers and so-called "medical philologists", but also by working doctors, personal physicians, and other medical practitioners. As such, the genre of the commentary is located at a crucial point of intersection between medical history, theory, and practice, as well as between orthodox and "alternative" conceptions of medicine; the commentaries are thus ideally placed to reflect the diversity of early modern medicine as well as the larger cultural context in which it was practised and debated. In this paper, some general remarks on researching Hippocrates commentaries are presented and followed by two test cases: the commentaries on the Hippocratic Letters and on the Hippocratic Oath.

I. Note Generali

I Commenti su Ippocrate a stampa del XVI secolo e dell'inizio del XVII secolo rappresentano, per la ricerca della Storia della Medicina, del Rinascimento e dell'Umanesimo nonché della prima età moderna, una tipologia di testo importantissima seppur poco considerata. Il *Catalogus translationum et commentariorum*, nel quale da decenni è previsto, ma per ora manca, un articolo su Ippocrate, ha evidenziato l'indispensabilità dei commenti per la comprensione della cultura della latinità dal XIV al XVI secolo². Il progetto *Aristoteles latinus*³, inaugurato da Charles Schmitt e Charles Lohr, dà un'idea delle potenzialità di conoscenza che si

Key words: Hippocrates - Renaissance medicine - Commentaries - Hippocratic Oath - Hippocratic Letters