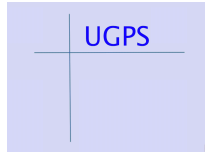


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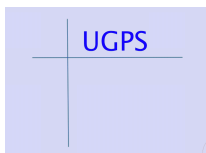
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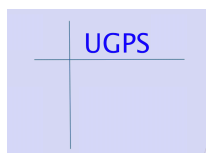
Metaphor as Medicine in Medieval Surgical Manuals

Virginia Langum



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VIRGINIA LANGUM

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(as presented at 2013 Metaphor Festival, Stockholm University)

When we think about metaphor in medicine, we tend to focus upon military imagery. Whether employed unconsciously or consciously, or assessed critically, war is considered to be the dominant rhetorical domain in medicine.¹ Society wages campaigns against cancer, patients fight hostile pathogens, doctors give orders and so on. Certain conceptual metaphor theorists have argued that metaphors such as TREATING-ILLNESS-IS-FIGHTING-A-WAR represent ways of structuring ideas that are timeless, pre-linguistic, pre-cultural even. Others, however, have attempted to historicize such metaphors. Various origins have been offered for the introduction of military metaphors into medicine: the 17th century, the American Civil War, the advent of germ theory are a few examples.²

Medieval medical texts employed a range of metaphors, some of which are military. However, these militaristic metaphors form part of the medieval conceptualization of sin. In a prevalent tradition, the soul is defended as a fortress against attacks by enemies such as the devil and personifications of the seven deadly sins.³ As the historian of medicine Roy Porter has noted, "the words 'holiness' and 'healing' stem from the single root."⁴ The holy body is thus the whole body, the intact body, the balanced body, the contained body.

¹ Paul Hodgkin, "Medicine is War: and other medical metaphors," *British Medical Journal* 291 (1985), 1820-1

² Dale Keiger, "Why Metaphor Matters," *John Hopkins Magazine* (1998) <<http://www.jhu.edu/~jhumag/0298web/metaphor.html>>; Heather Patricia Lane, SueAnne McLachlan and Jennifer Philip, "The War Against Dementia: Are We Battle Weary Yet?" *Age and Aging* (2013) <<http://ageing.oxfordjournals.org/content/early/2013/02/26/ageing.aft011.full>>.

³ Christiania Whitehead, *Castles of the Mind: a Study of Medieval Architectural Allegory* (Cardiff: University of Wales Press, 2003).

⁴ Roy Porter, *The Greatest Benefit to Mankind: a Medical History of Humanity from Antiquity to the Present* (London: Harper Collins, 1997), 84

However, there is a *material* as well as linguistic link between healthiness and holiness. Medieval medicine and spirituality rely on a model of the imbalanced body and soul that fosters illness and sin or the balanced body and soul that fosters health and virtue. Medieval medicine uses the terms "vices" and "virtues" to describe properties of organs, bodies, medicines, physiological processes. Certain herbs and remedies are "blessed" while others are "evil" and "wicked." But are we are to understand these terms as morally "good" and "evil" or simply denotative of "positive" and "negative"? Knotty problems of evaluating spiritual terms within material medicine become apparent when tracing references to the seven deadly sins – pride, envy, avarice, wrath, lechery and gluttony. Some of these references bear a material relation to how behavior effects health and healing, such as moderation in eating and drinking, as well as abstinence from sexual activities. Others are more figurative. To have “proud flesh” is to have excess granulation tissue and to be “avaricious” or “niggardly” is to be “constipated.” Yet others collide the metaphorical and the material. For example, when a text advises the surgeon to "temper the heart of the sick person for too much anger makes the spirits run to the wound and causes swelling" ["entempre ... þe herte of him þat is sijk, for to greet wrapþe makip þe spiritis renne to myche to þe wounde & þat is caus of swellynge"].⁵ Here, "temper" is physiological in the sense of achieving balance by pacifying the physiological effects of anger and facilitating healing, but has an ethical application. One way of tempering the body and countering anger is to will against anger the vice.

In *Medicine as Metaphor*, Susan Sontag writes of the dangers of metaphors in medicine, advocating a more literal and material approach. She argues "the most truthful way of regarding illness--and the healthiest way of being ill--is one most purified of, most resistant to, metaphoric thinking."⁶ In this paper, however, I wish to consider metaphorical language in Middle English surgical writing by inverting the

⁵ *Lanfrank's "Science of Chirurgie,"* ed. Robert von Fleischhacker, EETS o.s. 102 (London: K. Paul, Trench, Trübner & Co., 1894), 17

⁶ Susan Sontag, *Illness as Metaphor* (Picador: New York, 1989), 3.

idea of "medicine as metaphor" in order to think about how metaphor *serves* medicine, even functioning *as* medicine.

I will focus on the main works of two late medieval surgeons: the English surgeon John Arderne and the Italian Lanfranc of Milan who practiced in France, using their Middle English translations as base texts. Arderne's specialist text on anal fistula was something of a surgical best-seller with forty medieval manuscripts surviving, including four unique Middle English translations. Lanfranc's surgical manual is more general in focus, covering the anatomy and treatment of the entire body. Arderne also mentions Lanfranc and quotes this work and there are at least nine copies of his work surviving in Middle English. I am interested specifically in the vernacular for a few reasons. The later Middle Ages witnessed an overwhelming production of translations and original vernacular works.⁷ Furthermore, particularly in the later fourteenth and fifteenth centuries, there is a greater circulation of medical knowledge within other audiences.⁸

Although church legislation from this period explicitly prohibits clergy from practicing "that part of surgery involving burning and cutting", many clerics in medieval England practiced medicine and copied medical texts. This point about translation also befits an exploration of metaphor. The medieval word for *metaphor* is *translatio*, or translation, and, in justifying the act of translation, translators of medical texts often adopt religious metaphors, either separating good from evil in the body of knowledge or eliminating or abstaining from superfluities in their prose.

In what follows I will focus on the metaphor of the surgeon as confessor. While recent scholars have demonstrated how surgery was employed as a useful metaphor in

⁷ Päivi Pahta and Irma Taavitsainen, "Vernacularisation of Scientific and Medical Writing in Its Sociohistorical Context," in *Medical and Scientific Writing in Late Medieval English* (Cambridge: Cambridge University Press, 2004), 11.

⁸ Peter Murray Jones, "Medicine and Science" in *The Cambridge History of the Book in Britain* (Vol. 3), ed. Lotte Hellinga and J. B. Trapp (Cambridge: Cambridge University Press, 1999), 433.

religious contexts as a treatment that was both punitive and restorative, I will look here at the integration of pastoral and confessional care to medical care.⁹

Parallel changes in medical and pastoral care further explain this mutual influence in discourse. In the later Middle Ages, the empirical methods prompted by an increased availability of medical texts demanded that medical practitioners observe and question patients directly, rather than base their diagnosis and treatment upon third party reports. For example, surgical manuals state that it is necessary for a surgeon to know the complexions of bodies, limbs and medicines since two patients with the same wound would not necessarily need the same treatment. Decisions are to be made on a case-by-case basis, requiring both experiential observation and authority. Likewise, in this period greater discretionary power was given to priests. Confessional manuals set out a similar process to that found in surgical manuals by which priests can discern individual circumstances and apply experiential authority. Such circumstances included the penitents' spiritual fortitude and their disposition to certain sins.

In Lanfranc and Arderne, the surgeons adopt the role of the confessor for themselves. At the beginning of his surgical manual, John Arderne constructs himself as confessor, writing:

If the patients complain that their medicines are bitter or sharp or such other, then the surgeon shall say to the patient thus...Jesus Christ came into this world for the health of mankind in the manner of a good and wise doctor. And when he came to the sick man he showed him medicines, some light and some hard, and said to the sick man, "if you wish to be made hole you shall take these."

3if pacientes pleyne that ther medicynes bene bitter or sharp or sich other, than shal the leche sey to the pacient thus; "It is redde in the last lesson of matyns

⁹ Jeremy Citrome, *The Surgeon in Medieval English Literature* (Basingstoke: Palgrave Macmillan, 2006).

of the natiuitè of oure lord that oure lorde Ihesus criste come into this world for the helthe of mannes kynd to the maner of a gode leche and wise. And when he cometh to the seke man he sheweth hym medicynes, som li3t and som hard; and he seiþ to the seke man, "3if þou wilt be made hole þise and þise shal thou tak."¹⁰

Christus medicus, or Christ the Physician, was a popular metaphor for confession, which relied on instances of material healing performed by Christ in the New Testament. *Christus medicus* was used to elaborate the role of the confessor, who diagnoses and treats the wounds or sins of the confessant. However, translated in this particular context of a surgical text, the image performs two functions. First, it provides a spiritual model for surgery, and it demonstrates the material importance of metaphor for physical health.

Imaginative thinking factors generally into Arderne's surgical practice, both in adapting to particular patients but also in the flexibility of his practice. It is a commonplace of surgical manuals to state that everything related to surgery cannot be written down. Several times Arderne and Lanfranc urge the surgeon to use their ingenuity in treatment and choice of instrument. In so doing, Arderne consciously writes himself and the craft of surgery into Christian meditative tradition by authorizing his advice with a citation from Boethius: "he is most wretched who uses only things that are found and not things to be found" ["he is of moste wreched witte þat euer more vseþ þings yfounden and no3t things to be founded"].¹¹ The reliance on the surgeon's own quick wit and evaluation of the particular situation mirrors that of the priest in arbitrary penance. Penitential manuals advise that confessors should know the examples found in the manuals and also those that are absent.

This creative, or discretionary thinking is at the heart of confessional and surgical practice, and I will circle back to it at the end of the paper. In what follows, I will

¹⁰ John Arderne, *Treatises of Fistula in Ano, Haemorrhoids and Clysters*, ed. D'Arcy Power (London: K Paul, Trench, Trübner & Co., 1910), 7.

¹¹ Arderne, *Treatises of Fistula in Ano*, 23.

briefly touch upon a few traits of the surgeon as confessor and surgical treatment as confession, and how the metaphor of confession functions both in and as medicine. The division is somewhat arbitrary as they overlap. These traits are as follows: obedience, trust, pain as penance/treatment as satisfaction and strong medicine for the weak heart.

Surgical texts stress the necessity of the patient's obedience to the surgeon. John Arderne emphasizes that the patient be "obedient and busy, because, great effectiveness of treatment stands in the patient's patience and business." Likewise, Lanfranc notes that a "wound may be kept from severe inflammation and an evil imbalance if the surgeon is knowledgeable and does his duty and the sick man is obedient to the surgeon" ["a wounde mai be kept from apostyme & an yuel discrasie if þat þe leche be kunnyng & do his deuer, & þe sike man be obedient to þe leche"].¹²

The word "obedience" is further used to describe positive responsiveness of the body or affected body parts to the surgeon's treatments. Lanfranc, for example, describes "evil wounds" as those to which "sharp humours run" and which are not "obedient to natural heat."¹³ Thus the "obedience" of the patient is implicitly linked with the "obedience" of the body, suggesting the patient's complicity in his health and disease.

This mutuality is expressed by John Arderne as if "the patient is good-hearted and abiding, there is nothing to fear: the surgeon shall fare well in the cure if he is an expert" ["the pacient is gode herted and abydyng, it is no3t to drede þat-ne þe lech schal spede wele in þe cure of it if he be experte"].¹⁴ One historian of medicine has described this *pactum* between the surgeon and the patient as essentially penitential:

¹² Lanfranc's "Science of Chirurgie," 54.

¹³ Lanfranc's "Science of Chirurgie," 25-6, 42, 136.

¹⁴ Arderne, *Treatises of Fistula in Ano*, 21.

like that required of the Christian by the confessor, when the patient is required to suffer the pains prescribed as necessary for the recovery of his spiritual health."¹⁵

Arderne recommends impressing the importance of this relationship upon the patient before treatment. He includes a model speech to deliver to the patient in his prologue to his surgery:

Know your gentleness and your excellence, and also your good heartedness, that the gracious perfection of this cure not only consists in my abilities but also in your good and abiding patience. Therefore let it be not hidden to you that if you are inobedient and unpatient to my commandings, grudging the time of cure, you may fall into a great peril or delay the effect of the cure. Therefore be ware, for he that is warned before is not beguiled. Painful things pass soon when glorious health follows.

[Witte 3our gentilnes and 3our hiznes, and also 3our godehertynes, þat þe gracious perfeccion of þis cure ow not only to be reced as now to þe possibilite of my gode bisynes, bot also to 3our gode and abydyng pacience. And for-alsmich be it no3t hidde to 3ow þat if 3e be vnobedient and vnpacient to my commandyngs, lustyngþe tyme of wirchyng, 3e may falle in-to a ful gret perile or tary longer þe effecte of þe cure. Therfor beþ-war, For he þat is warned afore is no3t bygiled. Paynful things passeþ sone when at the next foloweþ glorious helthe.]

The critical urgency of this spiritual advice, similar to that found in penitential manuals, is suggested by its placement among practical matters such as how to select an operating room with good light.

However, the surgeon shared this moral responsibility for the success of treatment. The patient's obedience was a corollary to trust in the physician. Emphasis upon the

¹⁵ Peter Murray Jones, "The Surgeon as Story-Teller," *Poetica* 72 (2009): 77-91 (86).

psychological relationship between patient and surgeon is expressed in the inclusion of prologues and chapters that outline the necessary qualities of surgeons. Such passages emphasize not only necessary training but the ability to display training through use of jargon and complicated terms. Arderne advises the surgeon to study and to be "occupied in things that pertain to his craft" ["occupied in thingis that biholdith to his crafte"] so the he "shall both be held and he shall be more wise" ["shal boþ byholden and he shal be more wise"].¹⁶ His reputation and his speech, how he is "beholden" is an external manifestation of his inward condition. Public perception not only shapes opinion of the surgeon's abilities but has a material impact upon his healing.

In addition, surgical texts outline appropriate behaviour, grooming and dress. Much attention is paid to proper dietary habits. It is utmost importance what the surgeon feeds himself and what he fees his patients in a material and figurative sense. Surgeons materially feed their patients healing diets. However, surgeons also nourish patients with their words. John Arderne's *Practica* includes an extensive passage on the surgeon's drinking habits. He writes, "above all...it profits the surgeon that he always be found sober; for drunkenness destroys all virtue and brings it to nothing" ["aboue al...it profiteth to [the surgeon] that he be founden euermore sobre; ffor dronkenne3 destroyeth al vertu and bringith it to not"].¹⁷ However, Arderne's exhortation to bodily sobriety is followed by his exhortation to sobriety of demeanor and speech where he warns the surgeon to "abstain from much speech, and most of all among great men, and answer briefly to things that are asked" ["abstenence he fro moche speche, and most among grete men; and answehe he slei3ly to thingis y-asked"], worrying that inappropriate speech "shall blemish" the "good fame" of the surgeon.¹⁸

As in pastoral writings on the vices and virtues, speech is a particular index of character. In addition to general talkativeness, particularly kinds of speech are

¹⁶ Arderne, *Treatises of Fistula in Ano*, 4.

¹⁷ Arderne, *Treatises of Fistula in Ano*, 4.

¹⁸ Arderne, *Treatises of Fistula in Ano*, 4.

proscribed in surgical prologues. Many of these speech acts correspond to pastoral writings on the sins of the tongue. These include loquacity (*multiloquium*); bawdy talk (*turpiloquium*); joking (*scurrilitas*); boasting (*iactantia*); backbiting (*detractio*); flattery (*adulatio*); lying (*mendacio*); insulting (*convicium*); sowing discord (*seminatio discordiarum*); grumbling (*murmur*); quarrelling (*contentio*); swearing (*blasphemia*) and revealing secrets (*revelatio secretorum*). The last, revealing secrets, is expressed in a Lanfranc translation as the surgeon should be "discreet as a confessor" ["privy as a confessour"].

In addition to his explication of *Christus medicus* that was earlier mentioned, Arderne also includes a few other philosophical snippets and generally advises the surgeon to learn a stock 'of good and honest tales that may make the patients laugh, as well as the bible and other tragedies.' The purpose is to "induce a li3t hert" ["induce a light heart"] in the patient.¹⁹ *Inducten*, or in modern English, "induce" is a verb that means both "persuade" and "induce," and within medical contexts, specifically to "introduce something into the body."²⁰ The concept that words may enter the body and impact it materially resonates with the ethical framework of these texts.

We saw earlier how Arderne's use of the *Christus medicus* metaphor positions physical suffering in terms of spiritual health. This occurs in other ways in Arderne and Lanfranc's texts. Lanfranc uses the word "penaunce" as a synonym for "pain." Just as the medieval confessant undertook various forms of penance – almsgiving, physical mortification, prayers -- to cleanse himself of sin, so the medieval surgical patient also undertook "penance" for his illness.

Likewise Arderne uses the word "satisfaction" ["satisfaccion"], what in confessional context refers to the satisfactory repayment of acts of penance for sins to mean absolute obedience to his instructions.

¹⁹ Arderne, *Treatises of Fistula in Ano*, 8.

²⁰ *Middle English Dictionary*, "inducten," b.

Like confession, surgery is in the short-time painful and embarrassing; however, it promises greater health when the patient puts his faith in his cure and submits wholly to the surgeon/confessor. The image of the "vomit of confession" is used to convey these ideas in pastoral contexts. For example, one fifteenth-century sermon explains, it is "both painful and shameful for the tyme that it lasts but man shall be the healthier longe tyme after if he governs himself henceforth from such foul excesses" ["boþe peynefull and schamefull for the tyme þat hit lasteþ but man schall be the helyere longe tyme after if he rule hym afterward frome suche foule exceses"].²¹ This comparison is particularly utile given Arderne's practice.

To conclude, I return to the idea of discretionary treatment and the weak heart versus the strong heart. Surgeons like priests must distinguish between patients and penitents to determine the best course of treatment. For confessors, this meant determining spiritual fortitude. If, for example, a confessant committed a sin for which seven years penance is recommended, and that confessant seems likely to fall into despair at such a harsh sentence, then the priest is to "lay aside [his] book and use [his] discretion."²²

For surgeons, this means discerning both their particular complexions and physical fortitude. This is no more a matter of simply rehearsing a textbook response that matches the symptoms than the priest's assignment of the standard penance to match the sins. Lanfranc and Arderne throughout employ the phrase "weak heart" and "strong heart" to indicate physical fortitude. Weakness of heart is caused by deficiency of vital heat and blood, and those with phlegmatic and melancholic complexion are characterized by "weak-heartedness." As in modern English, the heart is both metaphorical and material. To be strong-hearted is to be courageous and to be weak-hearted is to be weak. However, this emotional or psychological condition can be determined by physiology. Despair or fear results in a physiologically contracted, weak heart.

²¹ Oxford, Bodleian Library, Bodley MS. 95, f. 28v.

²² Patrick J. Horner, ed. and trans., *A Macaronic Sermon Collection from Late Medieval England: Oxford Bodley 649* (Toronto: Pontifical Institute of Mediaeval Studies, 2006), 270.

Determining whether a patient is "weak" of heart is cited as important in both surgical texts for knowing what sort of treatment to administer. Using a line from Boethius, Arderne writes about cauterization, "for to a strong sickness answers a strong medicine, and namely in strong men. I call, therefore, delicate men, feeble men. For all things are hard to a weak hearted man. To a strong hearted man, thus, is nothing great" [ffor to a strong sekene3 answerēþ a strong medicyne, and namely in strong men. I call, forsop, delicate men feble men. ffor al þing3 bene hard to a waik hert man. To a strong hert man, forsop, is noþing grete"].²³ Although Lanfranc is less explicit about drawing out the spiritual connections, he also describes how "strong" or severe conditions demand "strong" or extreme treatments.²⁴ Yet "for in every medicine that a surgeon administers he shall take heed of the strength and the virtue of the patient" [ffor in euery medicyns þat a leche doip he schal take kepe of the strenkþe & of þe vertu of þe pacient"].²⁵

Regardless of individual physiology, Arderne implies that the weak-heart can be bolstered through use of metaphor. Employing the same quotation from Boethius, Arderne counsels surgeons to offer patients a lengthy cure regardless of prognosis, doubling the estimated recovery time, so that patients do not despair when their health does not improve immediately. As he explains,

For it is better that the diagnosis be lengthened than the cure. For prolonging of the cure gives the patient cause to despair when trust in the doctor is the greatest hope for health.

[For it is better that the terme be lengthed þan the cure. ffor prolongacion of the cure giffēþ cause of dispairyng to the paciente3 when triste to the leche is most hope of helthe. And 3if the pacient considere or wondre or aske why that he putte hym so long a tyme of curyng, siþe þat he heled hym by the half,

²³ Arderne, *Treatises of Fistula in Ano*, 64.

²⁴ Lanfrank's "Science of Chirurgie," 197.

²⁵ Lanfrank's "Science of Chirurgie," 353.

answere he that it was for that the pacient was strong- herted, and suffrid wele sharp þingis, and that he was of gode complexion and hadde able flesshe to hele; & feyne he othir causes pleseable to the pacient, ffor paciente³ of syche worde³ are proude and delited.]²⁶

If despair causes the heart to contract and become weak, here Arderne persuades the heart in the opposite direction. He further advises the surgeon to "comfort the patient and admonish him that in anguish he is of great heart. For a great heart makes a man hardy and strong to suffer sharp and grievous things" ["Ouer that hym ow to comferte þe pacient in monysshynge hym that in anguisshe³ he be of gret hert. ffor gret hert makeþ a man hardy and strong to suffre sharp þingis and greuous"].²⁷ Having a strong heart then is simply indicated by ability to suffer. By convincing the patient to be spiritually strong, he is thus materially strong, and metaphor is medicine.

²⁶ Arderne, *Treatises of Fistula in Ano*, 6.

²⁷ Arderne, *Treatises of Fistula in Ano*, 7.
