

# H-Net Reviews

in the Humanities & Social Sciences

Kevin Siena, ed. *Sins of the Flesh: Responding to Sexual Disease in Early Modern Europe*. Toronto: Centre for Reformation and Renaissance Studies, 2005. 292 pp. \$21.50, ISBN 978-0-7727-2029-0.

Reviewed by Susan R. Boettcher (Department of History, University of Texas at Austin)  
Published on H-HRE (September, 2006)



## Dis-Eased?

This group of essays is governed by two assumptions—articulated by Kevin Siena in the volume’s introduction—that characterize most recent scholarly literature on historic disease, health, and medicine. First, the authors reject or at least articulate suspicions about the utility of retrospective diagnosis for answering questions about “syphilis”; second, they share the assumption that disease is not an objective condition but rather a cultural construct in need of critical reading. (In light of these assumptions many of these authors call the disease by the name(s) found in their sources, particularly “the French disease” or its Latin equivalent, *morbus gallicus*, or even “the pox.”) As the essays demonstrate, these assumptions give rise to fruitful, intriguing readings of the culture around early modern disease.

These assumptions work most productively, in my opinion, in the essays of the collection’s first section, which treat early modern medicinal and scientific approaches to syphilis. Here, they allow us to lay aside modern prejudices about the alleged inadequacy of medical understanding and treatment of sexually transmitted diseases. In his essay, Jon Arrizabalaga (co-author of an important work in this area, *The Great Pox* [1997]) traces the confusion in early medical works about the disease’s causes, much of which resulted from the dominance of the Galenist medical model, which allowed the possibility of multiple explanations for the disease. Although some medical authors quickly connected the disease with sex, this conclusion was by no means shared or understood in the same way by all. Following an approach

that owes more to social history than postmodernism, David Gentilcore then provides the most compelling essay of the section on the “charlatan” as medical practitioner in early modern Italy. He suggests, on the basis of readings of court cases that resemble modern malpractice suits, that shame due to infection was lower in Italy than elsewhere, and so it was acceptable for sufferers to seek medical treatment. Because it was expensive, however, and its results uncertain, patients also sought out “charlatans,” who were not so much quacks as individuals who employed other methods of treatment also regulated by city administrators. The existence of this category of healer is substantiated by the fact—surprising from the modern perspective—that charlatans referred to themselves as such in the sources. Darin Hayton continues this discussion in his essay, in which he connects the German humanist Joseph Grünpeck’s attempts to formulate an astrological explanation (and related treatment) for the disease, with his attempts to rise to prominence at the court of Holy Roman Emperor Maximilian I—attempts that failed when the humanist contracted the disease himself. Intriguingly, however, contracting syphilis did not cause Grünpeck to change his explanations.

The second section of the book, on literary and metaphoric responses to the pox, opens with a stellar essay by Jonathan Gil Harris that effectively articulates the importance and consequences of considering the infection as (in Harris’s terms) a “pathotext”—“not a simply pathological fact outside of and prior to language (even if that is one of the principal effects produced by the lan-

guage used to speak about it), but a textual palimpsest that splices together many strands of discourse—strands that include not only the physiological and the pathological, but also the religious and the economic” (pp. 110–111). In explaining this point, Harris rejects explanations that relate certain responses to specific historical moments, arguing instead that the traces of this disease are better described as anachronistic—thus substantially complicating the connection between “early modernity” and the appearance of syphilis in Europe. Harris accomplishes this task by an innovative reading of Robert Wilson’s play, *The Three Ladies of London* (c. 1580), in which “spots” that appear in the narrative can be connected to medieval narratives of the sinful soul and to the metaphors of syphilis (which is not, however, specifically mentioned in the play). What is novel to this period, Harris argues, are connections between disease and economics—not the fact of the disease itself or even its metaphoric or moralistic readings. Roze Hentschell’s essay then provides a detailed analysis of the multilayered meanings of the term “French disease” as used in England—it emerges as a deep discomfort with not just illness, but also (French) foreignness. Diane Cady discusses how, in turn, foreign languages (especially French and Italian terms) were connoted as sexually diseased; according to one theory of the time, women were considered responsible for spreading syphilis. In an intriguing contribution, Cady also shows how this discourse was interlaced with discussions of women’s verbal excesses and dangerous tendencies to embrace the foreign in dress as well as in vocabulary. Finally, Domenico Zanre traces the myriad satirical uses of the French disease in fifteenth-century Tuscan literature, suggesting a change in employment of this topos in the subsequent production of an infected author.

The final section deals with the resonance of syphilis in the realm of public order by handling attempts to respond to the epidemic through policing or discipline. Here the cultural approach breaks down slightly, as most of the authors in this section seem implicitly to limit their notions of disease as a discourse to the analysis of the *response* to syphilis, rather than of the disease itself (a tightrope on which the literary essays seem to dance less cautiously). Not surprisingly, public responses to the disease were heavily influenced by the conflict between the perceived need for order and the scarceness of resources (whether financial, political, or moral) available for enforcing it. In her contribution, Laura J. McGough traces the foundation and population of institutions for repentant prostitutes and young girls who were in danger of

become prostitutes. Her detailed, convincing essay reveals that just as typical explanations of the period referred to a particularly beautiful prostitute as the originator of the epidemic, institutions that “protected” the Venetian population against syphilis concentrated on the control of women and girls who were considered *particularly* beautiful in order to remove such troublesome occasions of sin from the street. Mary Hewlett’s essay marks the interesting manipulation of the French disease in Lucca as a means of civic control of sodomy, which had already been viewed as rampant by the middle of the fifteenth century. Once syphilis appeared, city authorities used it as a justification for punishing sodomy even more stringently, a strategy that led to manipulations and negotiations of the legal system by everyone involved: victims of the disease, doctors, prostitutes, practitioners of sodomy, and judges. Syphilis thus became a political tool for the maintenance of public authority. Finally, Siena contributes an essay on the charity treatment of syphilitics in London hospitals, suggesting again that sufferers were not cast out from society; instead, such institutions devoted considerable resources to treating victims of the disease. Because other social sectors could afford to pay for treatment and thus hide their disease, however, the poor were particularly stigmatized, and those returning for a repeat treatment ran the risk of being publicly whipped. Thus patients did what they could to avoid a diagnosis of pox—even if they had it—and many of the poor who did not have syphilis were nonetheless diagnosed with it.

These essays are of a uniformly high quality unusual in essay collections and, taken together, they effectively demonstrate the utility of the cultural studies approach. Nonetheless, when we as readers consider the widely varying constructions of “syphilis” it is hard to suppress the reaction that early modern subjects were reacting to *something*. Essays that outline the extreme horror contemporaries expressed do not consider, for example, the hypothesis of some researchers that in the first years of its appearance, early modern syphilis circulated in a particularly virulent form, *lues maligna*, akin to that contracted by AIDS patients nowadays. This critique is potentially more serious for the historical essays in the volume, since considering how change affects understandings of disease would seem to include a discussion of how material circumstances changed. Harris’s suggestion that syphilis is a palimpsest of diachronic traces conflicts, in my opinion, with the work of those researchers here who are trying to trace changes in policy and action; these essays rely not simply on the common contempo-

rary perception that social circumstances had changed, but on effects that appeared real to early modern observers. The postmodernist would grasp upon my use of the word “appeared” here, but I find it hard to sustain the most extreme versions of the “disease as text” arguments in the face of the evidence that people died from their infections and local communities had to respond to these deaths. Subjects died. In other words, their response may have been culturally conditioned, but not the events to which they responded. So the cultural approach works better in the literary essays, but here, too, the historian’s suspicions may be raised: if textual evidence of syphilis is a discourse, is there anything specific about its analysis? Isn’t it entirely arbitrary (which, for the historian, is tantamount to suggesting that it is trivial)? If it isn’t entirely arbitrary, then aren’t claims about anachronism (at least in its more extreme forms) significant? And if retroactive diagnosis is anachronistic, don’t we commit

the same transgression when we refer to early modern syphilis sufferers with terms like “patient zero”? (Literary scholars should feel to dismiss these reservations; I readily concede that historians should more often restrain their unbridled tendency to think of most of literature as a *Schlüsselroman* for occasional mining.)

Postmodernists have turned to matters of the expression of embodiment as a field particularly susceptible to revealing readings, but several essays included here may leave readers wondering if it is precisely embodied experience that most hardily resists cultural “readings.” At the same time, however, the interdisciplinary approach leads to a fascinating volume. The persisting unsettled feeling I had after reading Siena’s compilation is only one reason for me to urge all readers interested in disease and its representations (not just early modern syphilis) to turn their attention to this extremely strong collection.

If there is additional discussion of this review, you may access it through the network, at:

<https://networks.h-net.org/h-hre>

**Citation:** Susan R. Boettcher. Review of Siena, Kevin, ed., *Sins of the Flesh: Responding to Sexual Disease in Early Modern Europe*. H-HRE, H-Net Reviews. September, 2006.

**URL:** <http://www.h-net.org/reviews/showrev.php?id=12216>

Copyright © 2006 by H-Net, all rights reserved. H-Net permits the redistribution and reprinting of this work for nonprofit, educational purposes, with full and accurate attribution to the author, web location, date of publication, originating list, and H-Net: Humanities & Social Sciences Online. For any other proposed use, contact the Reviews editorial staff at [hbooks@mail.h-net.msu.edu](mailto:hbooks@mail.h-net.msu.edu).